

LOS ANGELES GENERAL MEDICAL CENTER POLICY

Subject: PATIENT DEATH - FETAL	Original Issue Date: 5/1/78	Policy # 229
	Supersedes: 2/13/18	Effective Date: 8/17/23
Policy Owner(s): Admin for Decedent Affairs Executive Sponsor(s): Chief Operations Officer		
Departments Consulted: Diagnostic Services Decedent Affairs Office Labs and Pathology Nursing Services Ethics Resource Committee Fetus/Infant/Child Ethics Committee Office of Risk Management	Reviewed & approved by: Attending Staff Association Executive Committee Senior Executive Officer	Approved by: Chief Operations Officer
		Chief Executive Officer

PURPOSE

To provide guidelines and delineate the appropriate disposition of fetal deaths.

POLICY

Any fetus that dies after having advanced to or beyond the twentieth week of gestation as determined by the best estimated day of delivery, or any fetus that demonstrated at the time of delivery (regardless of gestational age) any sign of life requires a death certificate and shall be registered with the County Registrar.

Best estimated day of delivery is determined by either the date of the last menstrual period of a 40 weeks long gestation or of estimated age from last menstrual period by ultrasonographic determination, whichever is determined to be more accurate. Gestational age is then calculated by subtracting the weeks contained between the time of death and the estimated day of delivery (e.g. a fetal demise 26 weeks prior to the estimated day of delivery is 14 weeks of age).

The Decedent Affairs Office shall be responsible for:

- Administrative processing of all fetal death records;
- Notifying the Coroner of cases under the Coroner's jurisdiction;
- For cases requiring a Certificate of Death, Decedent Affairs shall store and transport the fetus; if a placenta is available for examination, it should be submitted to Surgical Pathology from the patient care unit.
- For cases not requiring a Certificate of Death, any fetal remains and placenta should be submitted to Surgical Pathology for examination. Ensuring compliance with all pertinent laws and regulations.

The fetal death shall be reported to the Decedent Affairs Office within two hours of the event.

A Certificate of Death is not required if a fetus failed to demonstrate any sign of life and failed to advance to the twentieth week of gestation, as determined by the best estimated day of delivery.

Subject: **PATIENT DEATH - FETAL**

Effective Date:

8/17//23

Policy #

229

A Certificate of Death is not required if fetal remains are the product of an induced abortion regardless the gestational age. Fetal remains that do not require a Certificate of Death shall be sent to Surgical Pathology from the patient care unit.

RESPONSIBILITY

Decedent Affairs Staff
Attending Staff
Residents
Allied Health Professionals
Nursing Staff
Surgical Pathology Staff
Autopsy Staff

PROCEDURE DOCUMENTATION

Decedent Affairs Operations Manual
Attending Staff Manual
Nursing Services and Education Policy Manual
Autopsy Policy and Procedure Manual
Surgical Pathology Manual

REFERENCES

California Health & Safety Code, Sections 7054.3, 7100
DHS Policies #s 316, Patient Deaths; and 153, Assisting the Coroner
Joint Commission Standards (Ethics, Rights, and Responsibilities)

REVISED DATES

May 1, 1995; February 16, 1999; March 12, 2002; April 19, 2005; October 3, 2008;
June 10, 2014, February 13, 2018; August 17, 2023