

MOUNTAIN RESCUE ASSOCIATION

Webinar Series

Death Notification

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Disclaimer

- Nothing discussed here represents a standard of practice
- Established local procedure applies
- No relevant financial disclosure
- Thanks to PMI, the MRA education committee, and to you for your efforts and service





My background

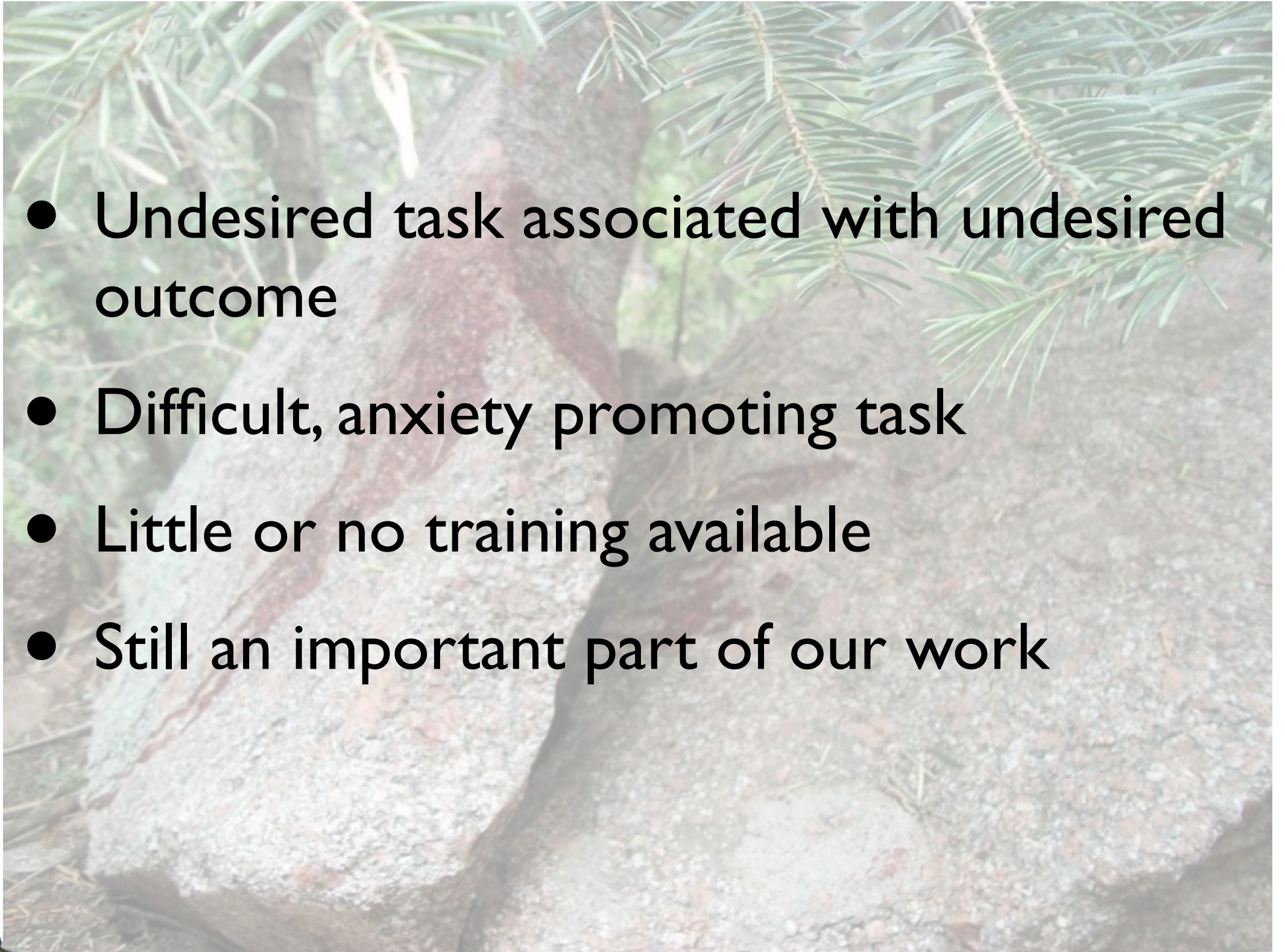


- Boarded, practicing community EM Physician
- Active member and medical director for Albuquerque Mountain Rescue.
- 4 yr of EM residency training at urban and rural level I centers
- Previous career and volunteer Paramedic
- College volunteer rescue squad EMT
- Explorer SAR in high school with Appalachian SAR Conf/MSAR/PVRG



Death Notification

- Undesired task associated with undesired outcome
- Difficult, anxiety promoting task
- Little or no training available
- Still an important part of our work





Evidence

- Evidence for best practices is limited
- Most publications are author opinion or survey of experiences and attitudes





- Even Senior ER physicians reported insomnia and fatigue
- Homicide detectives had high rates of substances abuse
- Even SIMULATED death notification created measurable physiologic stress among trainee physicians
- Taboo topic, message: if more tough/nice/smart/experienced, you will succeed
- Othering vs Identifying - we have it worse



The good news...

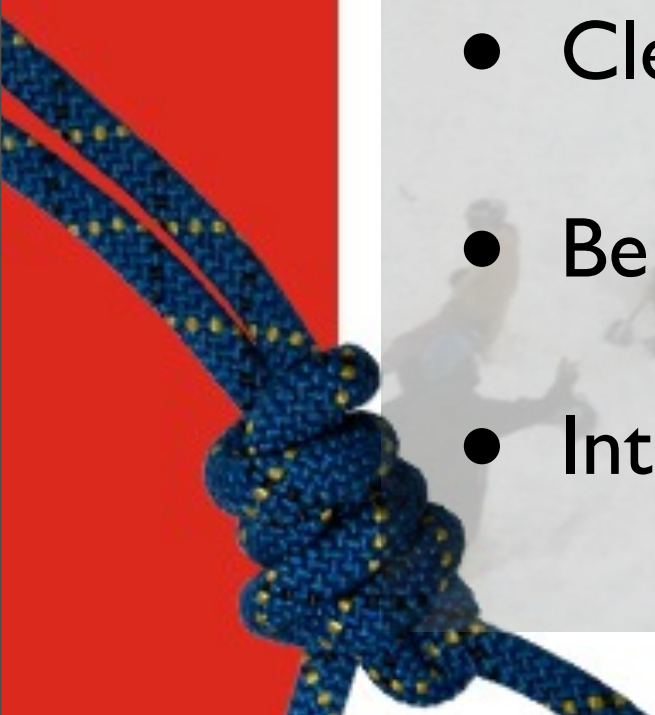
- Small training amount greatly reduced anxiety, measurably improved performance
- Even discussion with colleagues helpful
- Like everything else we do, having a plan improves our performance





General Principles

- Timely
- In person
- Appropriate setting
- Sit at eye level
- Do not go it alone
- Clear language
- Be informed
- Introductions
- Lead In/Prepare: "We have some very bad news to tell you"
- Obtain 'Invitation'
- Allow reaction
- Express Sympathy
- Avoid: religious endorsement
- Avoid: "I know how you feel"





What is Important to survivors?

J Trauma Survey

Most to Least Important

Attitude
Clarity of message
Privacy
Ability to answer question
Sympathy
Time for questions
Autopsy information
Clergy available
Directions after death
Location of conversation
Timing of conversation
Rank/seniority of newsgiver
Follow-up contact
Attire of news-giver (<5%)

Hong Kong Data

Helpful

Written Information
Opportunity to view remains
Respectful of Culture

Not Helpful

Lack of Information



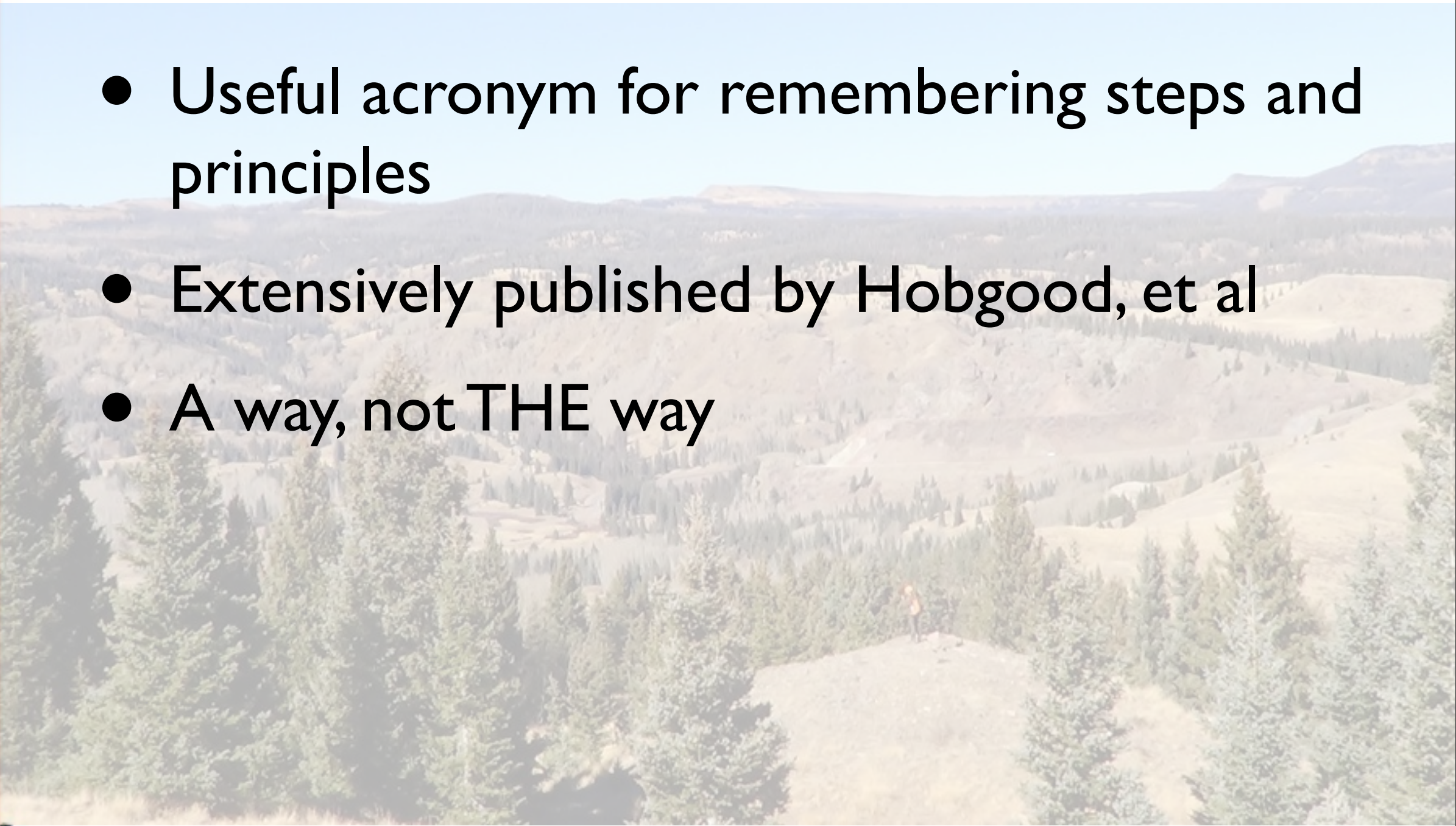
Who should notify?

- IC
- Sr Medical
- Responsible Agency Rep
- Law Enforcement
- Chaplain
- Clinical Social Worker
- Psychologist
- Detective/Investigator
- Friend/Family
- Clergy
- Someone experienced
- Someone who wants to



GRIEV_ING

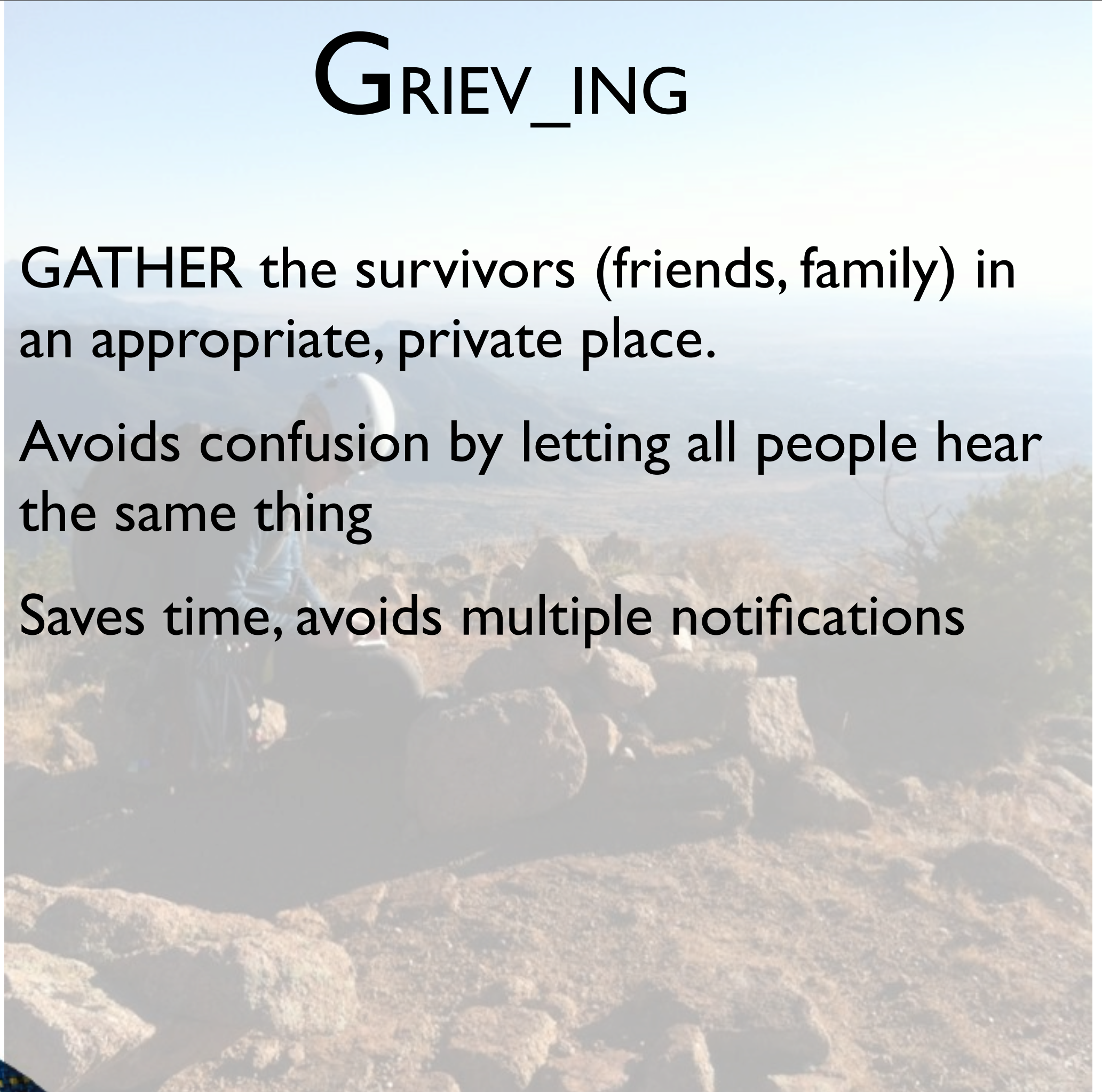
- Useful acronym for remembering steps and principles
- Extensively published by Hobgood, et al
- A way, not THE way





GRIEV_ING

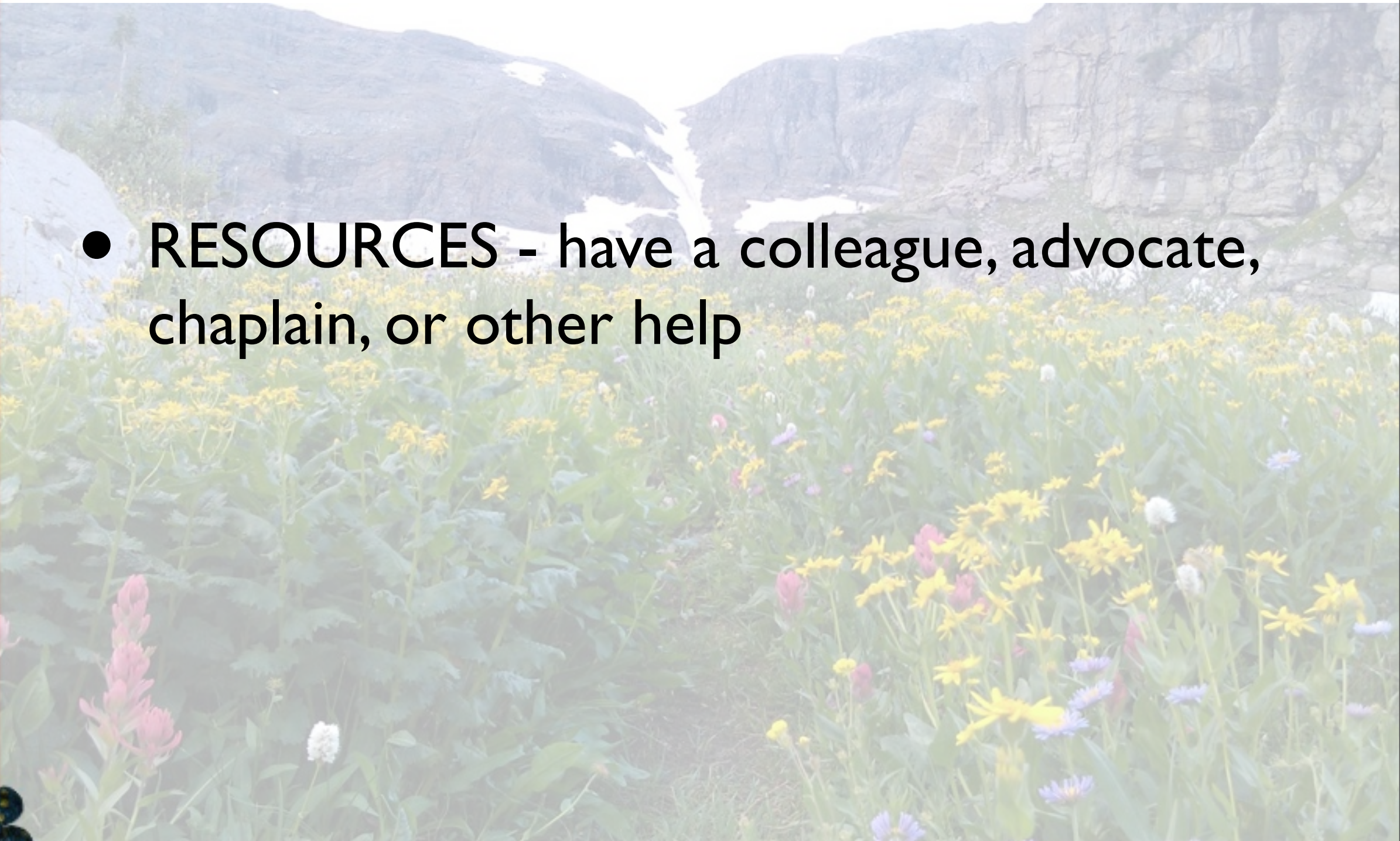
- GATHER the survivors (friends, family) in an appropriate, private place.
- Avoids confusion by letting all people hear the same thing
- Saves time, avoids multiple notifications





GRIEVING

- RESOURCES - have a colleague, advocate, chaplain, or other help





GR|EV_ING

- IDENTIFY / Introduce
- First yourself
- Anyone else with you
- All survivors present





GRIEVING

- EDUCATE survivors
- ask them their understanding of the situation if appropriate
- Explain the events that lead to this discussion
- “we did everything we could do.”





GRIEVING

- VERIFY
- use very clear phrases like
 - “has died”
 - “is dead”
- +/- statement of “i dont think s/he suffered,” if evidence supports it

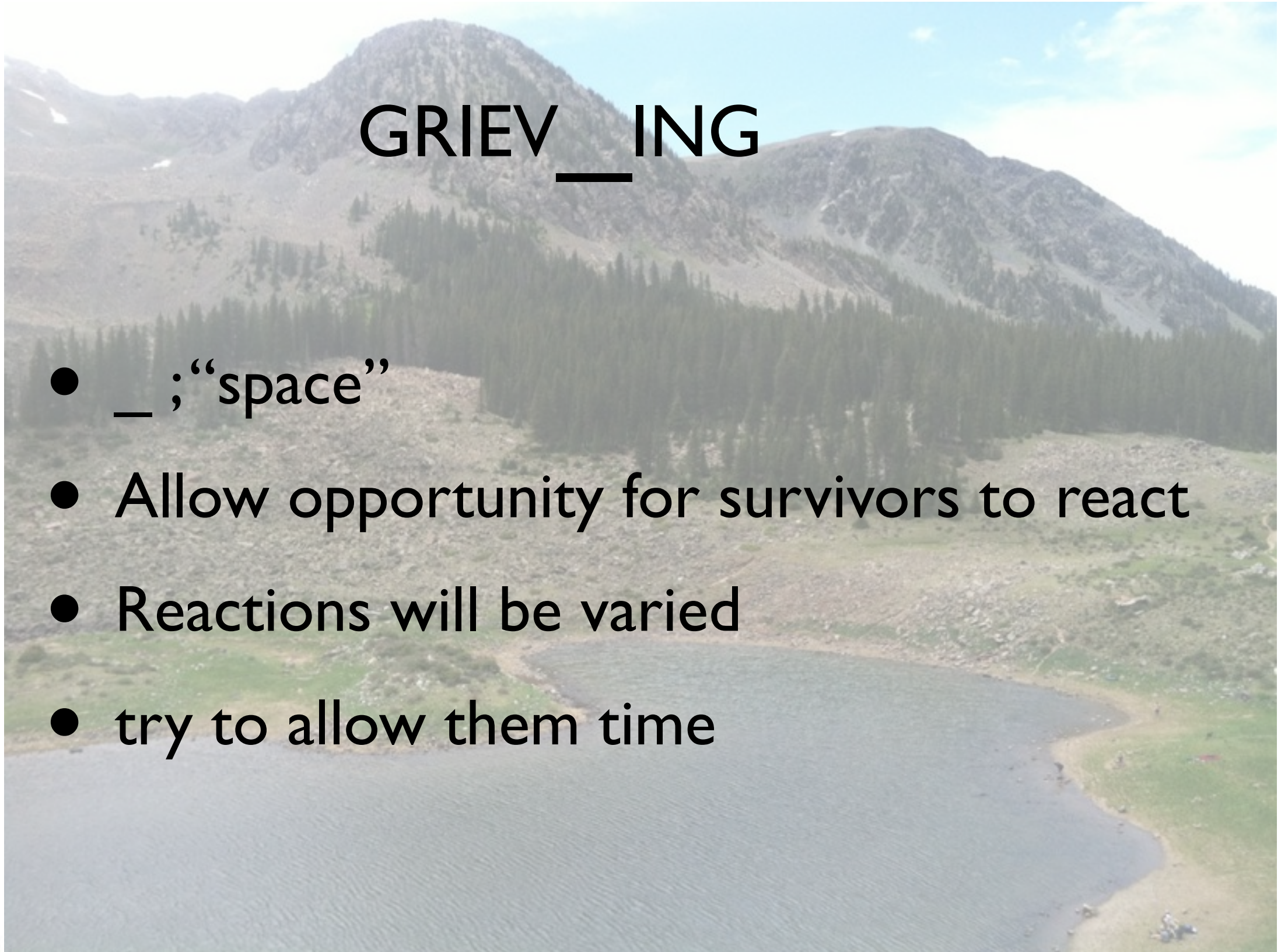




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GRIEV _ ING

- _ ; “space”
- Allow opportunity for survivors to react
- Reactions will be varied
- try to allow them time

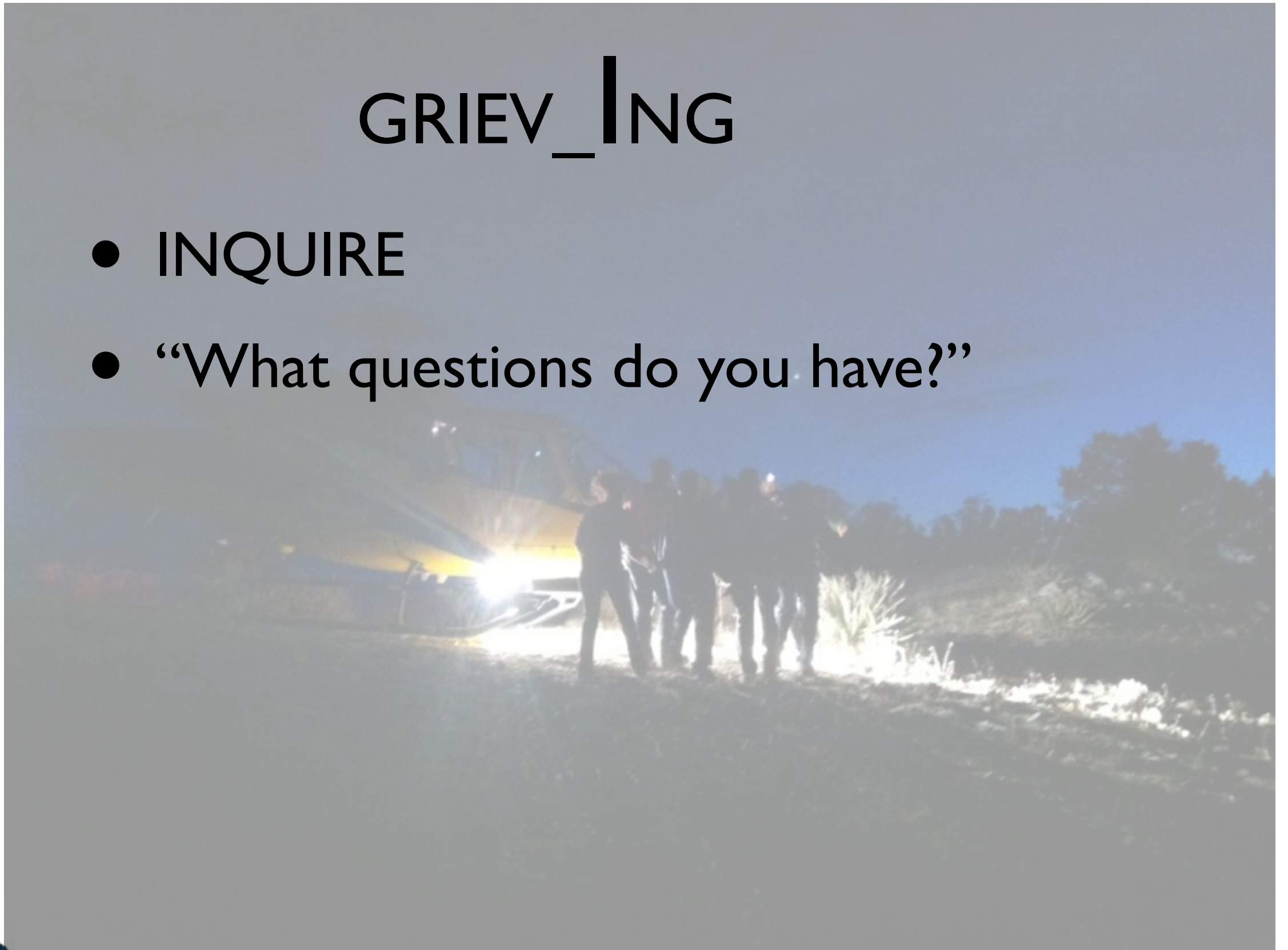




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GRIEV_ING

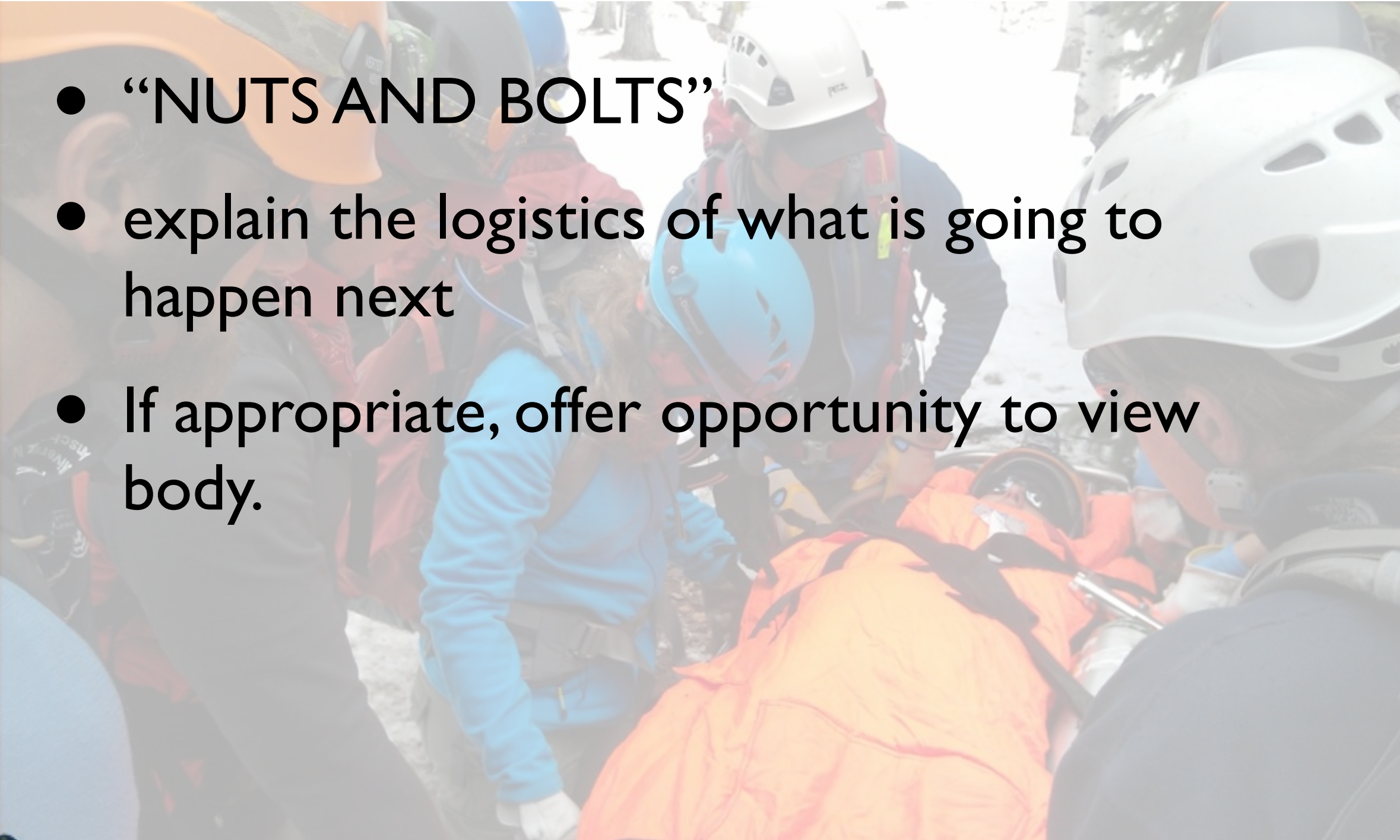
- INQUIRE
- “What questions do you have?”





GRIEV_ING

- “NUTS AND BOLTS”
- explain the logistics of what is going to happen next
- If appropriate, offer opportunity to view body.





GRIEV_ING



- GIVE
- provide contact information (Your location & timeframe, business card, contact info)
- other appropriate assistance (coffee, tissues, ride, telephone, etc)





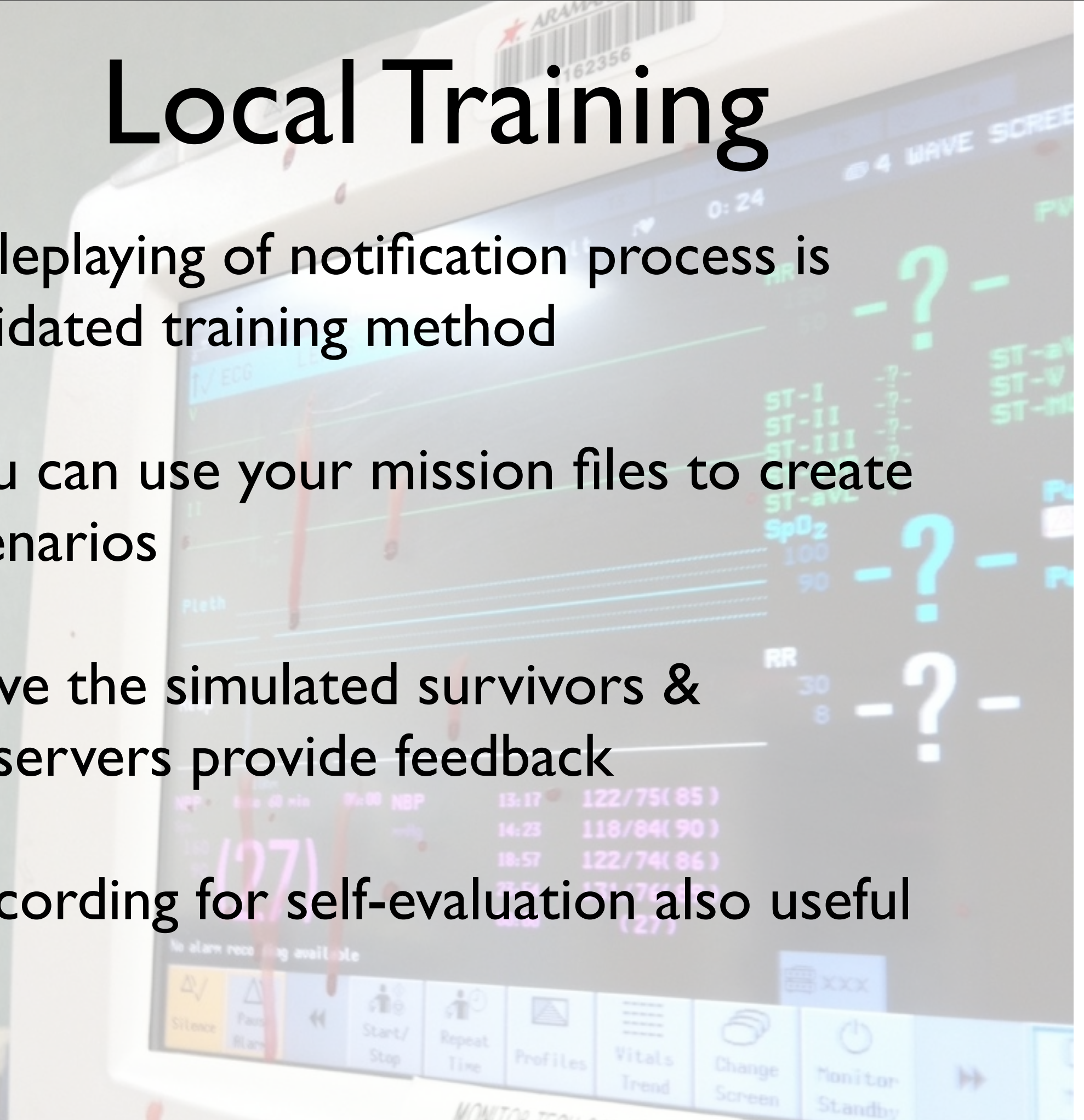
Local Training

Roleplaying of notification process is validated training method

You can use your mission files to create scenarios

Have the simulated survivors & observers provide feedback

Recording for self-evaluation also useful





Telephone Notification

- Sometimes unavoidable
- 90% wanted immediate notification at any hour
- Best to have them come to you or have someone go to them to make notification in person
- Try to re create as much of the in person process as you can
- Privacy & Timing
- “are you sure you want to talk about this right now?” (invitation)
- Support person
- Similar discussion
- Similarly offer contact information and support



Anger, Violence, Self Injury

- Rare
- Kubler ross: denial-anger-bargaining-depression-acceptance
- Potential to exacerbate existing conflict
- Wide cultural / personal variations
- Avoid escalation





Survivor insists to go into field, recovery in process

Option 1:

Tell them no.

Physical restraint?

Law Enforcement?

Escalating violence?

Danger to self? Others?

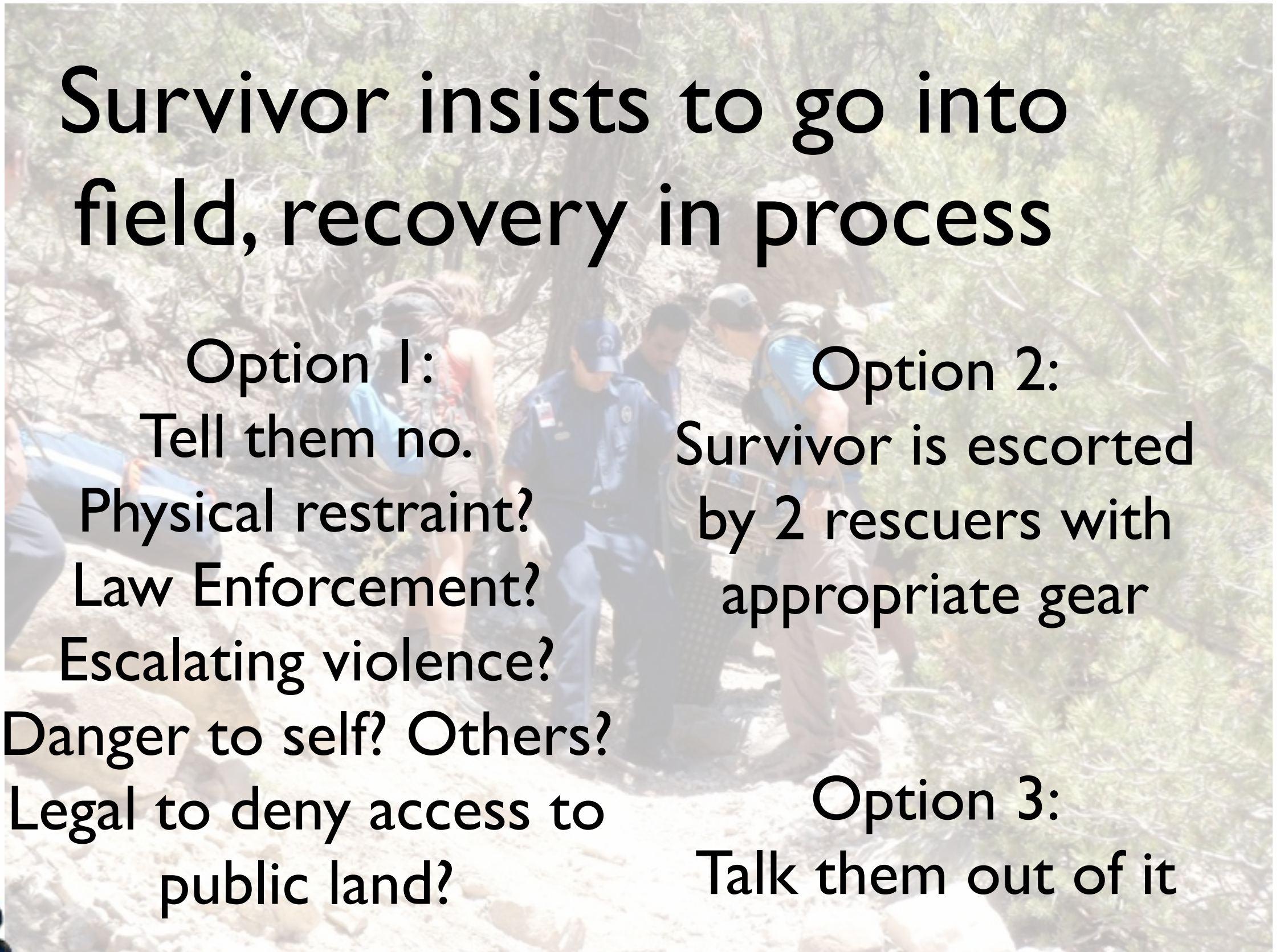
Legal to deny access to public land?

Option 2:

Survivor is escorted by 2 rescuers with appropriate gear

Option 3:

Talk them out of it





Further Reading

Bull Am Acad Psychiatry Law. 1987;15(3):275-81.

Death notification.

[Eth S](#)¹, [Baron DA](#), [Pynoos RS](#).

Anaesthesiol Intensive Ther. 2013 Oct-Dec;45(4):241-3. doi: 10.5603/AIT.2013.0046.

The procedure for death notification--"In Person, In Time..."

[Sobczak K](#).

Med Intensiva. 2006 Dec;30(9):452-9.

[Breaking bad news in medicine: strategies that turn necessity into a virtue].

[Article in Spanish]

Ann R Coll Physicians Surg Can. 2002 Aug;35(5):287-93.

Breaking bad news: a clinician's view of the literature.

[Phipps LL](#)¹, [Cuthill JD](#).

Oncol Nurs Forum. 2001 Jul;28(6):951-3.

Communication skills: breaking bad news in the clinical setting.

[Radziewicz R](#)¹, [Baile WF](#).

Am Fam Physician. 2001 Dec 15;64(12):1975-8.

Breaking bad news.

[VandeKieft GK](#).

J Hosp Med. 2007 Nov;2(6):415-21.

Breaking bad news: a practical approach for the hospitalist.

[Minichiello TA](#)¹, [Ling D](#), [Ucci DK](#).

Oncologist. 2003;8(6):587-96.

Breaking bad news: a patient's perspective.

[Dias L](#)¹, [Chabner BA](#), [Lynch TJ Jr](#), [Penson RT](#).

Oncologist. 2007 Sep;12(9):1105-13.

Hope.

[Penson RT](#)¹, [Gu F](#), [Harris S](#), [Thiel MM](#), [Lawton N](#), [Fuller AF Jr](#), [Lynch TJ Jr](#).

Dimens Crit Care Nurs. 1989 Nov-Dec;8(6):382-5.

Death notification: legal and ethical issues.

[Helm A](#), [Mazur DJ](#).



Further Reading

Prim Care. 2001 Jun;28(2):249-67.

Breaking bad news and discussing death.

[Ambuel B](#)¹, [Mazzone MF](#).

Indian J Palliat Care. 2010 May;16(2):61-5. doi: 10.4103/0973-1075.68401.

'BREAKS' Protocol for Breaking Bad News.

[Narayanan V](#)¹, [Bista B](#), [Koshy C](#).

J Am Coll Radiol. 2007 Nov;4(11):800-8.

Breaking bad news: a primer for radiologists in breast imaging.

[Harvey JA](#)¹, [Cohen MA](#), [Brenin DR](#), [Nicholson BT](#), [Adams RB](#).

Prehosp Emerg Care. 2013 Oct-Dec;17(4):501-10. doi: 10.3109/10903127.2013.804135. Epub 2013 Jun 27.

Death in the field: teaching paramedics to deliver effective death notifications using the educational intervention "GRIEV_ING".

West J Emerg Med. 2013 Mar;14(2):181-5. doi: 10.5811/westjem.2012.10.14193.

Death notification in the emergency department: survivors and physicians.

[Shoenberger JM](#)¹, [Yeghiazarian S](#), [Rios C](#), [Henderson SO](#).

Soc Work Health Care. 1996;23(4):91-7.

Breaking the bad news when sudden death occurs.

[Von Bloch L](#).

Acad Emerg Med. 2012 Mar;19(3):356-8. doi: 10.1111/j.1553-2712.2012.01305.x. Epub 2012 Feb 23.

Reflections on giving bad news.

[Gilmore T](#).

Lancet. 2004 Jan 24;363(9405):312-9.

Communicating sad, bad, and difficult news in medicine.

[Fallowfield L](#)¹, [Jenkins V](#).

J Trauma. 2000 May;48(5):865-70; discussion 870-3.

Giving bad news: the family perspective.

[Jurkovich GJ](#)¹, [Pierce B](#), [Pananen L](#), [Rivara FP](#).

Clin Pediatr (Phila). 2010 Jul;49(7):619-26. doi: 10.1177/0009922810361380. Epub 2010 Feb 25.

What do we know about giving bad news? A review.

[Harrison ME](#)¹, [Walling A](#).



Further Reading

Acad Emerg Med. 2003 Mar;10(3):219-23.

Evaluation of emergency medicine resident death notification skills by direct observation.

[Benenson RS](#)¹, [Pollack ML](#).

J Emerg Nurs. 2012 Mar;38(2):130-4; quiz 200. doi: 10.1016/j.jen.2010.10.005. Epub 2011 Jan 22.

Practical strategies for death notification in the emergency department.

[Roe E](#).

Teach Learn Med. 2009 Jul;21(3):207-19. doi: 10.1080/10401330903018450.

Griev_Ing: death notification skills and applications for fourth-year medical students.

[Hobgood CD](#)¹, [Tamayo-Sarver JH](#), [Hollar DW Jr](#), [Sawning S](#).

Acad Emerg Med. 2005 Apr;12(4):296-301.

The educational intervention "GRIEV_ING" improves the death notification skills of residents.

[Hobgood C](#)¹, [Harward D](#), [Newton K](#), [Davis W](#).

Psychosomatics. 1996 Jul-Aug;37(4):339-45.

Death anxiety, locus of control, and purpose in life of physicians.

Their relationship to patient death notification.

[Viswanathan R](#).

Crit Care Nurs Q. 1996 May;19(1):21-34.

Death notification: practical guidelines for health care professionals.

[Leash RM](#).

Am J Forensic Med Pathol. 1990 Dec;11(4):342-7.

Death notification.

[Haglund WD](#)¹, [Reay DT](#), [Fligner CL](#).

Omega (Westport). 2008;57(4):367-80.

Death notification for families of homicide victims: healing dimensions of a complex process.

[Miller L](#).

Int J Emerg Ment Health. 2007 Winter;9(1):13-23.

Line-of-duty death: psychological treatment of traumatic bereavement in law enforcement.

[Miller L](#).

Int J Emerg Ment Health. 2004 Winter;6(1):33-7.

Death notification: considerations for law enforcement personnel.

[Hart CW Jr](#)¹, [DeBernardo CR](#).



Thank you for your
time and your service.

What questions or
comments do you
have?

