COVID-19 Deaths: Rapid reference guide for correct certification

Key facts

• Definitions¹:

 Confirmed COVID-19 case: a person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.

o Suspect COVID-19 case:

- A) a patient with acute respiratory illness AND a history of travel to or residence in a location reporting community transmission of COVID-19 disease during the 14 days prior to symptom onset;
- B) a patient with any acute respiratory illness AND having been in contact with a confirmed or probably COVID-19 case in the last 14 days prior to symptom onset;
- C) a patient with severe acute respiratory illness AND in the absence of an alternative diagnosis that fully explains the clinical presentation.

Probable COVID-19 case:

- A) a suspect case for whom testing for the COVID-19 virus is inconclusive;
- B) a suspect case for whom testing could not be performed for any reason.
- Note, often the case has clinical images or exams indicating that characteristics of COVID-19 are present including signs and symptoms.

Correct certification

- Deaths due to COVID-19 infection should be accurately recorded in the Medical Certificate of Cause of Death (MCCD).
- The certifiers (usually the attending physician) should report the relevant condition/s in the MCCD in a logical sequence of events leading to the death with the time interval from the onset of each condition.
- Standard abbreviation is "COVID-19" and is the accepted, unambiguous abbreviation used worldwide.²

Clinical sequence of events leading to death

- COVID-19 is the underlying cause of death (UCOD) and is reported in the lowest used line of Part 1 of the MCCD
- Risk of mortality from COVID-19 is significantly higher among patients with co-existing chronic diseases. These are important to report in Part 2 of the MCCD and may include:

¹ Global Surveillance for COVID-19 caused by human infection COVID-19 virus, Interim guidance - 20 March 2020 https://www.who.int/publications/i/item/global-surveillance-for-human-infection-with-novel-coronavirus-(2019-ncov)

² Other terms used by certifiers that can be coded as synonyms of COVID-19 include: COVID Positive; Coronavirus Pneumonia (unless clearly related to non-COVID-19 coronavirus); COVID-19 Infection; SARS-CoV-2 Infection; COVID-19 Coronavirus; Infection – COVID-19 (Coroner informed); Hospital Acquired Pneumonia – COVID-Positive; Corona Virus two infection (SARS-CoV-2); Coronavirus-Two Infection; Novel Coronavirus.

- Non-communicable diseases (e.g. Diabetes Mellitus, Hypertension, Coronary Artery Disease, Chronic Obstructive Pulmonary Disease, Bronchial Asthma)
- o Chronic communicable diseases (e.g. HIV)
- Disabilities
- Example of typical pathway: COVID-19 (Underlying cause of death- leads to) ----> Pneumonia caused by COVID-19 (Intermediate cause of death leads to) ----> Acute Respiratory Distress Syndrome (Immediate cause of death leads to) ----> Death

Indicate if virus is laboratory confirmed or not

- For statistical purposes it is extremely important to identify whether the COVID-19 death is laboratory confirmed or not laboratory confirmed but clinically/epidemiologically diagnosed.
- As there are two different codes used, differentiating this during the certification process is critical for correct tabulation and analysis:
 - Confirmed case \rightarrow ICD-10 code U07.1 (ICD-11 code RA01.0)³
 - Note: Virus identified or laboratory confirmed
 - Suspect or Probable case \rightarrow ICD-10 code U07.2 (ICD-11 code RA01.1)³
 - Note: Virus not identified/laboratory not confirmed but clinically/epidemiologically diagnosed

Examples of most common errors in certifying COVID-19 deaths

UCOD ill-defined and illogically sequenced

Example 1

	Cause of death	Time interval from onset to death		Cause of death	Time interval from onset to death
a	COVID-19 (Laboratory confirmed)	2 weeks	a	Bilateral pneumonia	4 days
ь	Due to: Bilateral pneumonia	4 days	ь	Due to: COVID-19 (Laboratory confirmed)	2 weeks
c	Due to: Respiratory failure UCOD ill-defined	hours	c	Due to:	
d	Due to: condition	X	d	Due to:	✓

Example 2

	Cause of death	Time interval from onset to death		Cause of death	Time interval from onset to death
a	COVID-19 (Virus identified)	10 days	a	Bronchopneumonia	2 days
Ь	Due to: Bronchopneumonia	2 days	b	Due to: COVID-19 (Virus identified)	10 days
c	Due to: Respiratory arrest	Minutes	c	Due to:	
	Due to: UCOD ill-defined	X	1 4	Due to:	V

Example 3

	Cause of death	Time interval from onset to death		Cause of death	Time interval from onset to death
a	Bilateral pneumonia	4 days	a	Bilateral pneumonia	4 days
b	Due to: COVID-19 (Laboratory confirmed)	2 weeks	ь	Due to: COVID-19 (Laboratory confirmed)	2 weeks
c	Due to: Abdominal pain	2 days	c	Due to:	
d	Due to: UCOD ill-defined condition	>	d	Due to:	
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Example 4

	Cause of death	Time interval from onset to death		Cause of death	Time interval from onset to death
a	Bronchopneumonia	2 days	a	Bronchopneumonia	2 days
b	Due to: COVID-19 (Virus identified)	12 days	b	Due to: COVID-19 (Virus identified)	12 days
С	Due to: Severe headache	2 days	с	Due to:	
d	Due to: UCOD ill-defined condition	~	d	Due to:	
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Incorrect sequencing of conditions

Example 1

	Cause of death	Time interval from onset to death		Cause of death	Time interval from onset to death
a	Acute respiratory distress syndrome	2 days	a	Acute respiratory distress syndrome	2 days
b	Due to: Pneumonia	10 days	b	Due to: Pneumonia	10 days
с	Due to: COVID-19 (Virus identified)	12 days	С	Due to: COVID-19 (Virus identified)	12 days
d	Due to: Insulin dependent diabetes mellites	10 years	d	Due to:	
ibutii led ir	Incorract sequencing		ibuti led ii	Insum dependent diabetes memies (10	Years)

• Insulin dependent diabetes mellites is documented in the lowest used line of Part 1 of the MCCD and represents an incorrect/illogical sequence. Insulin dependent diabetes mellites is a *contributary cause* therefore must be reported it in Part 2.

Example 2

	Cause of death		Time interval from onset to death		Cause of death	Time interval from onset to death
a	COVID-19 (Laboratory 1	not confirmed)	10 days	a	Bronchopneumonia	2 days
b	Due to: Bronchopneumonia	Incorrect	2 days	b	Due to: COVID-19 (Laboratory not confirmed)	10 days
С	Due to:	sequencing of UCOD		С	Due to:	
d	Due to:		X	d	Due to:	— •

Bronchopneumonia documented in the lowest used line of Part 1 of the MCCD and represents an
incorrect/illogical sequence. Instead COVID-19 (Laboratory not confirmed) must be reported in the lowest
used line.

Other general errors committed during certification

- Illegible handwriting
- Making alterations or erasures
- Use of correction fluid to correct an incorrect entry
- Use of non-standard abbreviations³

³ Sri Lanka handbook for medical certification ref TBA

COVID-19 CASE SCENARIOS for COD GUIDE App

Case scenarios

Case scenario 1	68-year-old male with a 20-year history of type II diabetes mellites						
	and a 5-year history of chronic kidney disease						
Presented to hospital	 4 days fever, body aches and sore throat 						
	Recent history of overseas travel						
Upon examination and	Febrile and ill looking						
investigation	Mild breathing difficulties						
	 Polymerase Chain Reaction (PCR) test - positive for COVID-19 						
While at ward	 Moderate breathing difficulties on day 6 of admission 						
	Chest x-ray confirmed a bilateral pneumonia						
	Severe respiratory distress on day 7						
Transferred to ICU	Despite aggressive treatment worsening respiratory distress						
	Expired on the same day						

Figure 1: Completed International Form of Medical Certificate of Cause of Death, Frame A – case scenario 1

Frame A: Medical data: Par	t 1 and	2			
1 Report disease or condition			Cause	of death	Time interval from onset to death
directly leading to death on line a		a	Seve	re acute respiratory distress syndrome	1 day
Report chain of events in		b	Due to:	TD-19 infected pneumonia	10 days
due to order (if applicable)	0	c	Due to:	TD-19, Laboratory confirmed	11 days
State the underlying cause on the lowest used line		d	Due to:		
2 Other significant conditions contributing				Diabetes Mellites Type II (20 Years)	
to death (time intervals can be included in brackets after the condition)				Chronic Kidney Disease (5 Years)	

Pop up message on App: Important to indicate whether COVID-19 has been confirmed in the deceased. COVID-19 cases may have comorbidities. These are recorded in Part 2 with time intervals in brackets.

Case scenario 2

Case scenario 2	59-year-old lady with a 13-year history of Hypertension, Bronchial
	Asthma 10 years and Carcinoma of Breast for the last 6 months
Presented to hospital	Loss of taste for 2 days and
	Difficulty in breathing for 1 day
	Was on self-quarantine due to an exposure to a COVID-19 positive person
Upon examination and	Moderate breathing difficulties
investigation	Fever, muscle pain and body aches
	Chest x-ray confirmed a bilateral pneumonia
	Nasopharyngeal swab for a PCR test was sent to a remote laboratory since
	laboratory testing is not available
	 A clinical diagnosis of COVID-19 was made pending PCR test results
	Oxygen measure in blood is low (65%) by oximetry

While at ward	•	Severe breathing difficulties on day 2 of admission
	•	Confirmed as having Severe Acute Respiratory Distress Syndrome
	•	Lack of response to aggressive supportive therapy
	•	Respiratory arrest on the same day
	•	PCR test results not received

Figure 2: Completed International Form of Medical Certificate of Cause of Death, Frame A – case scenario 2

Frame A: Medical data: Part 1 and 2								
1 Report disease or condition			Cause	of death	Time interval from onset to death			
directly leading to death on line a	\Diamond	a	Seve	re acute respiratory distress syndrome	Hours			
Report chain of events in	1) (b	Due to:	ID-19 infected pneumonia	2 days			
due to order (if applicable)	1)	c	Due to:	ID-19, Probable case (PCR test collected)	4 days			
State the underlying cause on the lowest used line	J	d	Due to:					
2 Other significant conditions contributing				Hypertension (13 years), Bronchial Asth	ıma (10 years)			
to death (time intervals can be	e includ	ed in	L		· · · · · · · · · · · · · · · · · · ·			
brackets after the condition)				Carcinoma of left breast (6 months)				

Pop up message on App: It is important to indicate if COVID-19 has not been laboratory confirmed but clinically or epidemiologically diagnosed in the deceased as well as any relevant co-morbidities in Part 2. If the virus is not identified it is good practice to state that this is a "Probable Case" and if PCR test was collected but results not received this can also be noted in Part 2 or in Part 1c. This will help coders to search for lab results in the future for greater precision.

Case scenario 3

Case scenario 3	65-year-old female with a 15-year history of non-insulin-dependent diabetes mellitus, hypercholesterolemia and ischemic heart disease						
	for last 5-years						
Presented to hospital	5-day history of fever, sore throat and a dry cough						
	Retrosternal chest pain of 6-hours						
Upon examination and	ECG showed myocardial ischemia						
investigation	PCR test on a nasopharyngeal swab was positive for COVID-19 virus						
	Mild breathing difficulties						
While at ward	Fever, sore throat and cough subsided on day 4 of admission						
	 Second PCR test negative for COVID-19 on hospital day 9 						
	 Sudden severe tightening retrosternal chest pain associated with sweating, 						
	nausea and vomiting on day 10 morning						
	ECG – acute left anterior myocardial infarction						
	Urgent transfer to Coronary Care Unit (CCU)						
While at CCU	Cardiac condition further aggravated						
	Goes into cardiac arrest in next 2 hours						
	All attempts of resuscitation were unsuccessful and died in minutes						

 $Figure \ 3: \ Completed \ International \ Form \ of \ Medical \ Certificate \ of \ Cause \ of \ Death, \ Frame \ A-case \ scenario \ 3$

Frame A: Medical data: Part 1 and 2							
Report disease or condition directly leading to death on line a	R R R		Cause	of death	Time interval from onset to death		
		a	Acut	e myocardial infarction (left anterior)	2 hours		
Report chain of events in due to order (if applicable)		b	Due to: Ische	emic Heart Disease	5 years		
		с	Due to:				
State the underlying cause on the lowest used line		d	Due to:				
2 Other significant conditions contributing			ng	COVID-19 (Virus identified) (15 days)			
to death (time intervals can be included in brackets after the condition)			1	Non-insulin dependent diabetes mellitus; Hypercholesterolemia (15 years)			

Pop up message on App: The patient died of an acute myocardial infarction following long term ischemic heart disease. Here, COVID-19 is **not** the underlying cause but may have contributed for the death and therefore is reported in Part 2 of the MCCD. It is also recommended to report all other contributary causes.

Case scenario 4

Case scenario 4	A 36-year-old man was brought to the hospital						
Presented to hospital	 6-day history of fever, abdominal pain, anorexia, nausea and a dry cough He also complained of shortness of breath for the last 3-days 						
Upon examination and investigation	 Intense pain over the lower right quadrant of the abdomen and febrile (Temperature 41.2° C) Mild breathing difficulties 						
While at ward	 Worsening abdominal pain and breathing difficulties WBC – high neutrophil count (76%) Abdominal ultrasound – compatible with acute appendicitis Chest x-ray – compatible with right sided pneumonia PCR test positive for COVID-19 Patient was prepared for emergency surgery to remove his appendix Unfortunately, he developed a perforated appendix and peritoneal contamination Though he was subjected for surgery his condition deteriorated and died due to septicaemia 						

Frame A: Medical data: Part 1 and 2							
Report disease or condition directly leading to death on line a	R R R		Cause	of death	Time interval from onset to death		
		a	Septi	icaemia	1 Hour		
Report chain of events in due to order (if applicable)		b	Due to:		3 Hours		
		С	Due to: Perforated appendix		3 Hours		
State the underlying cause on the lowest used line		d	Due to:	e appendicitis	6 Days		
2 Other significant conditions contributing to death (time intervals can be included in brackets after the condition)			_	COVID-19 (Lab confirmed) (6 days)			
			1	Right sided pneumonia (3 days)			

Pop up message on App: The patient died of septicemia due to acute appendicitis despite having pneumonia. PCR test was positive however at this point COVID-19 can only be recorded in Part 2 as there is no clearly established relationship between COVID-19 and acute appendicitis.