

**CS FOR HOUSE BILL NO. 39(JUD)**

**IN THE LEGISLATURE OF THE STATE OF ALASKA**

**NINETEENTH LEGISLATURE - FIRST SESSION**

**BY THE HOUSE JUDICIARY COMMITTEE**

**Offered: 2/13/95**

**Referred: Rules**

**Sponsor(s): REPRESENTATIVES THERRIAULT, B.Davis, Bunde, G.Davis, James, Toohey, MacLean, Mackie, Kubina, Nicholia**

**A BILL**

**FOR AN ACT ENTITLED**

1 "An Act relating to the authority of mobile intensive care paramedics, physician  
2 assistants, and emergency medical technicians to pronounce death under certain  
3 circumstances."

4 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

5 \* **Section 1.** AS 09.68.120 is amended to read:

6           Sec. 09.68.120. DEFINITION OF DEATH. An individual is considered dead  
7 if, in the opinion of a physician licensed or exempt from licensing under AS 08.64 or  
8 a registered nurse authorized to pronounce death under AS 08.68.395, based on  
9 acceptable medical standards, or in the opinion of a mobile intensive care  
10 paramedic, physician assistant, or emergency medical technician authorized to  
11 pronounce death based on the medical standards in AS 18.08.089, the individual  
12 has sustained irreversible cessation of circulatory and respiratory functions, or  
13 irreversible cessation of all functions of the entire brain, including the brain stem.  
14 Death may be pronounced in this circumstance before artificial means of maintaining

1       respiratory and cardiac function are terminated.

2       \* **Sec. 2.** AS 18.08 is amended by adding a new section to read:

3               Sec. 18.08.089. **AUTHORITY TO PRONOUNCE DEATH.** (a) A mobile  
4       intensive care paramedic or physician assistant registered under AS 08.64.107 or an  
5       emergency medical technician certified under this chapter may make a determination  
6       and pronouncement of death of a person under the following circumstances:

7               (1) the paramedic or emergency medical technician is an active member  
8       of an emergency medical service certified under this chapter;

9               (2) neither a physician licensed under AS 08.64 nor a physician exempt  
10      from licensure under AS 08.64 is immediately available for consultation by radio or  
11      telephone communications;

12              (3) the paramedic, physician assistant, or emergency medical technician  
13      has determined, based on acceptable medical standards, that the person has sustained  
14      irreversible cessation of circulatory and respiratory functions.

15              (b) A mobile intensive care paramedic, physician assistant, or emergency  
16      medical technician who has determined and pronounced death under this section shall  
17      document the clinical criteria for the determination and pronouncement on the person's  
18      emergency medical service report form and notify the appropriate medical director or  
19      collaborative physician as soon as communication can be established. The paramedic,  
20      physician assistant, or emergency medical technician shall provide to the person who  
21      signs the death certificate the

22              (1) name of the deceased;

23              (2) presence of a contagious disease, if known; and

24              (3) date and time of death.

25              (c) Except as otherwise provided under AS 18.50.230, a physician licensed  
26      under AS 08.64 shall certify a death determined under (b) of this section within 24  
27      hours after the pronouncement by the mobile intensive care paramedic, physician  
28      assistant, or emergency medical technician.

29              (d) In this section,

30              (1) "acceptable medical standards" means cardiac arrest accompanied

31      by

1 (A) the presence of injuries incompatible with life, including  
2 incineration, decapitation, open head injury with loss of brain matter, or  
3 detrucation;

4 (B) the presence of rigor mortis;

5 (C) the presence of post mortem lividity; or

6 (D) failure of the patient to respond to properly administered  
7 resuscitation efforts;

8 (2) "failure of the patient to respond" means without restoration of  
9 spontaneous pulse or respiratory effort by the patient;

10 (3) "properly administered resuscitation efforts" means

11 (A) when a person authorized to perform advanced cardiac life  
12 support techniques is not available and the patient is not hypothermic, at least  
13 30 minutes of properly performed cardiopulmonary resuscitation;

14 (B) when a person authorized to perform advanced cardiac life  
15 support techniques is not available and the patient is hypothermic, at least 60  
16 minutes of cardiopulmonary resuscitation properly performed in conjunction  
17 with rewarming techniques as described in the current State of Alaska  
18 Hypothermia and Cold Water Near-Drowning Guidelines published by the  
19 division of public health, Department of Health and Social Services; or

20 (C) at least 30 minutes of cardiopulmonary resuscitation and  
21 advanced cardiac life support techniques properly performed by a person  
22 authorized to perform advanced life support services.