



# LAWS OF ALASKA

1995

**Source**  
CSHB 39(JUD)

**Chapter No.**  
53

## AN ACT

Relating to the authority of mobile intensive care paramedics, physician assistants, and emergency medical technicians to pronounce death under certain circumstances.

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

THE ACT FOLLOWS ON PAGE 1

**Approved by the Governor:** May 27, 1995

**Actual Effective Date:** August 25, 1995

AN ACT

1 Relating to the authority of mobile intensive care paramedics, physician assistants, and  
2 emergency medical technicians to pronounce death under certain circumstances.

3

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

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

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

## Chapter 53

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

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

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

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

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

20                   (1) name of the deceased;

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

22                   (3) date and time of death.

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

27                  (d) In this section,

28                   (1) "acceptable medical standards" means cardiac arrest accompanied by

29                   (A) the presence of injuries incompatible with life, including  
30 incineration, decapitation, open head injury with loss of brain matter, or  
31 detrunication;

1 (B) the presence of rigor mortis:

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

3 (D) failure of the patient to respond to properly administered  
4 resuscitation efforts;

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

7 (3) "properly administered resuscitation efforts" means

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

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

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