**Claim & City Burial Request Checklist for Nursing Homes**

### General

- ✓ ALL spellings of names, dates and times of birth / death must agree throughout ALL paperwork: cover letter, facesheet, clinical summary worksheet, death certificate, burial permit.
- ✓ All required decedent paperwork must be faxed to OCME Communications at 646-500-5762 as soon as possible. Pick up of the decedents CANNOT occur until all the following paperwork is completed.
- ✓ Please submit only the documents requested based upon the case type. Please do not attach any additional medical records or otherwise unsolicited documentation.
- ✓ Cases filed for City Burial will not be processed without Next of Kin Authorization for this disposition type. If NOK are unavailable, please submit the request for the Claim Only disposition.
- ✓ Once competent paperwork is received, we will pick up remains as operations allow. Please begin organizing a contingency plan with funeral homes in the event that the pick up is delayed.

### Key Points to Remember

- ✓ Send over the paperwork as soon as possible. Do not send over incomplete or partially done paperwork.
- ✓ Do not call OCME. We will process your paperwork as soon as possible.
- ✓ Do not provide a general phone number that you can be reached at, you must provide a DIRECT line to someone who can answer questions regarding cases you are submitting paperwork for.

### Fax Cover letter

- ✓ Please indicate the name of your nursing home (NH).
  - If your NH is required to use the electronic death registration system, please submit the name as it is registered with the Department of Health in e-Vital.
- ✓ Please include a contact person and phone number.
  - Please note that the Nursing Home general line is NOT acceptable. OCME requests a direct line or extension so that we can promptly address any paperwork concerns.
- ✓ Indicate if your facility has a refrigerated morgue space or if there is no refrigeration.

### Clinical Summary Worksheet

- ✓ Please complete only the required sections. **Section E is not required** for Claim Only or City Burial requests.
- ✓ Please indicate ‘unknown’ in fields where you do not have the requested information. Do not leave blank fields.
- ✓ OCME requires the medical record number for all decedents coming to OCME from a nursing home.
- ✓ OCME requests any aliases known to be used by the decedent.
- ✓ OCME requests as much next-of-kin (name and contact) information as possible:
  - Where the NOK are known, the HCF must notify the NOK of the death. **Failure to notify NOK of the death of their loved one interferes with the NOK’s right to direct final disposition without delay and may therefore be a violation of the NOK’s right of sepulchre.** If the HCF was unable to reach the NOK, all notification attempts must be documented.
  - Where the NOK are unknown and the HCF is requesting storage at OCME of the decedent for claim only, the HCF shall notify the Public Administrator (PA) of the death and document notification as indicated. **Public Administrator Contact Numbers by Borough:**
    - Manhattan – 212-788-8430
    - Bronx – 718-293-7660
    - Brooklyn – 718-643-3032
    - Queens – 718-526-5037
    - Staten Island – 718-876-7228
✓ If the patient was admitted or resided in a nursing home (NH), the HCF shall contact the nursing facility and document all details in this section as recorded by the nursing home.
✓ Please provide all available contact information for NOK, PA and NH so that OCME can follow up, as appropriate.
✓ Please select “Yes” or “No” to all screening questions.
✓ Please ensure that the form is signed.

### Death Certificate

✓ Please ensure that the method and place of disposition on the death certificate matches the burial permit.

<table>
<thead>
<tr>
<th>DC Field</th>
<th>Claim Only</th>
<th>City Burial</th>
</tr>
</thead>
<tbody>
<tr>
<td>21a Method of Disposition</td>
<td>Other - Interim</td>
<td>Interment / City Burial</td>
</tr>
<tr>
<td>21b Place of Disposition</td>
<td>OCME Morgue</td>
<td>City Cemetery at Hart Island</td>
</tr>
<tr>
<td>22a Funeral Establishment</td>
<td>Office of Chief Medical Examiner</td>
<td>Office of Chief Medical Examiner</td>
</tr>
<tr>
<td>22b Address</td>
<td>520 1st Ave, NY, NY 10016</td>
<td>520 1st Ave, NY, NY 10016</td>
</tr>
</tbody>
</table>

### Burial Permit

✓ Please ensure that the method and place of disposition on the burial permit matches the death certificate

<table>
<thead>
<tr>
<th>Type of Disposition</th>
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<th>Place of Disposition</th>
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</tr>
</tbody>
</table>

### In Closing

✓ If any of the above requirements are not met, the case cannot be accepted by OCME.
✓ The nursing home must provide hard copies of all documents at the time of removal.
✓ Please visit the OCME official website which includes a “Case Reporting Criteria for Clinicians” page and the clinical summary worksheet and instructions at [www.nyc.gov/ocmereportacase](http://www.nyc.gov/ocmereportacase).