# Roles, responsibilities, and duties of medical referees

**1. Introduction**

Medical referees are responsible for permitting cremations to take place. Their main role is to review cause of death documentation and cremation forms produced by certifying medical and nurse practitioners, and to decide whether to approve or decline applications for cremation.

Medical referees act as an additional check to assure that the cause of death has been definitely ascertained before the body is cremated. They support the following functions:

* Ensuring that the identity of the deceased is established
* Ensuring that the cause of death is reasonably determined and does not require an autopsy
* Identifying cases that should be referred to the Coroner
* Determining whether there are concerns held by the certifying medical or nurse practitioner or by the applicant regarding the cause of death, and
* Providing a *de facto* oversight role of the completeness of cause of death documentation to ensure that it is accurately completed.

The Cremation Regulations 1973 (the Regulations), made under section 37 of the Burial and Cremation Act 1964 (the Act), impose process controls to regulate the cremation of deceased. The Regulations require crematorium authorities to have at least one Medical Referee and one Deputy Medical Referee. Most Crematoria have more than one Medical Referee, on the basis of regulation 6(1A):

*Without limiting the powers of the Referees appointed under subclause (1), every crematorium authority may… appoint, in respect of any crematorium under its control, a Medical Referee, a Deputy Medical Referee, and a Second Deputy Medical Referee to exercise the respective functions of those officers in any specified place.*

Under regulation 6(1) a Second Deputy Medical Referee may be appointed if the establishment of this position has already been approved by the Minister of Health (in practice, the Minister’s power has been delegated to Manatū Hauora). Deputies and Second Deputies may only act in substitution for a medical referee, or Deputy Medical Referee respectively, and only when the more senior medical referee is absent, incapacitated, otherwise unavailable, or was the medical practitioner attending the deceased’s last illness.

**2. Appointment of medical referees**

Medical referees are appointed by crematorium authorities, subject to approval by the Director-General of Health (currently delegated to the Director of Public Health). Whilst medical referees appointed by one crematorium authority can act for any other crematorium authority, and in respect of any crematorium, they should only be used so when none of the crematorium authority’s own medical referees are available. The crematorium authority may also appoint medical referees to exercise their functions in any ‘specified place’.

As noted in section 4, below, the crematorium authority should be the single point of contact, and the only conduit, for accessing the medical referee. Applicants and funeral directors should not approach the medical referee directly; all contact should be via the crematorium authority.

The appointed medical referee for the crematorium authority is the default medical referee. Deputies and Second Deputies may only act in substitution for the Medical Referee, or Deputy Medical Referee respectively, and only when the more senior medical referee is absent, incapacitated, otherwise unavailable, or was the medical practitioner attending the deceased’s last illness.

Crematorium authorities should submit medical referee applications to their local office of the National Public Health Service. The National Public Health Service will report to Manatū Hauora on the suitability of the applicant. The National Public Health Service’s report will confirm that the person:

* Holds a current annual practising certificate from the New Zealand Medical Council (copy to be included with the application)
* Is a medical practitioner of more than five years standing
* Has experience and qualifications that will enable the applicant to discharge the duties of a medical referee
* Understands the responsibilities of a medical referee under the Regulations, particularly Regulations 7 and 9, and
* Is not the subject of any other matter that might prejudice the appointment (a copy of the Certificate of Good Standing from the Medical Council of New Zealand is to be included with the application).

The Medical Council’s requirements for a current annual practising certificate are now more rigorous than when the Regulations were first made. Most retired doctors will not now be able to hold an annual practising certificate. However, the Medical Council makes an exception for retired doctors who want to work solely as medical referees. A medical referee who has not practised clinical medicine for several years may be granted an annual practising certificate, with a scope restricted to non-clinical practice as a cremations referee.

**3. Use of medical referees appointed by another crematorium authority**

Medical referees appointed by one crematorium authority are able to act for any other crematorium authority and in respect of any crematorium (Regulation 6(8) refers). However, they should only be used when none of the crematorium authority’s own medical referees are available. In addition, crematorium authorities must be certain that the medical referee has been properly appointed. They must be familiar with the medical referee’s signature.

These provisions should be used with care, however, as it would not be appropriate for crematorium authorities or medical referees to rely on these as a matter of everyday convenience. Circumstances warranting such action would be rare and subject to the hierarchy discussed above. A medical referee should question being approached in preference to the crematorium authority’s own appointees, and should ask for the reason for approaching them.

**4. Independence of medical referees**

Medical referees provide an important independent process check before cremations occur. The Regulations set out requirements for cremation applications and the duties of medical referees. Under regulation 7(2), medical referees can require a statutory declaration, or other evidence as to the identity of the deceased, to be provided to them when they consider it necessary.

However, the Regulations are silent on how, when, and where the statutory declaration may be delivered. Traditionally, statutory declarations have been delivered by funeral directors, representatives of the crematorium authority, or collected by medical referees. This allows medical referees to have minimal or no contact with applicants, who are often near relatives to the deceased. Referees can then undertake their review in their own premises away from any possible undue influence from applicants.

In some areas, applicants have been encouraged to contact the medical referee directly to make arrangements for approval of the proposed cremation. In some cases, medical referees’ contact details have been made publicly available. While applicants may prefer to directly contact medical referees from a convenience viewpoint, the potential risk of this is that applicants or family members (who are often in an emotional state of mind) could pressure or influence the medical referee’s decision-making and impact on the independence and impartiality of the role.

Te Whatu Ora is aware of anecdotal reports of applicants urging medical referees to complete cremation permissions at short notice, fast track the process by not asking for verification information, or suggesting to medical referees they will take their application to another medical referee rather than providing the information sought by the referee

On balance, to ensure the impartiality and independence of the medical referee role, Te Whatu Ora considers that crematorium authorities should be the single point of contact, and the only conduit, for applicants or funeral directors to access medical referees (unless there are exceptional circumstances requiring otherwise). This means that applicants approaching medical referees directly should almost always be referred to the crematorium authority.

**5. Payment/remuneration of medical referees**

Remuneration arrangements are described in the Regulations (regulation 6(9)):

*Every Medical Referee, Deputy Medical Referee, and Second Deputy Medical Referee shall be remunerated* ***in accordance with such arrangements****, if any, as may be made between [them] and any crematorium authority for which [they] acts.*

This means medical referees (including Deputy and Second Deputy Medical Referees) are paid directly by the crematorium authority.

**6. Cremation forms**

When a person dies, a medical or nurse practitioner completes a certificate of cause of death. In cases where the person died unexpectedly, violently, or in suspicious circumstances, or if the health practitioner is unsure about the cause of death, then the death is referred to a coroner to investigate further and authorise the disposal of the body. These processes apply irrespective of the intended method of body disposal (e.g. burial, cremation, etc).

If a body is to be cremated, the Regulations set out a process that must be followed to get approval for the cremation to take place. The Regulations include a series of forms (**Forms A** to **H –** copies are provided at **Appendices 1-10**). These need to be completed or adhered to by various persons – such as medical and nurse practitioners and medical referees. The forms cover different steps in the cremation process and their relevance to medical referees is discussed further in sections 6 and 7 below. However, in summary:

* If the body is to be cremated, an application for cremation (see **Form A**), is completed and provided to:
* the cremation authority, if the cremation is to occur at that approved crematorium, or
* the medical officer of health, if permission is sought to cremate otherwise than in an approved crematorium.
* The certifying practitioner completes the relevant cremation forms, including:
* **Form AB** – regarding any pacemakers or biomechanical aids in the body. Note: a practitioner may not always be sure whether or not the deceased has a biomechanical aid. Embalmers should routinely check to ensure no biomechanical aids are present. Medical referees may also ask the embalmer to confirm any biomechanical aids have been removed. The embalmer may complete the (Voluntary) Certificate in Relation to Biomechanical Aids (**Appendix 8**)
* **Form B** – regarding medical details about the body to be cremated
* For deaths referred to a coroner, a certificate (**Form C**) is provided to the medical referee by the coroner to advise that there are no circumstances that call for further examination of the deceased
* On occasions, medical referees may require a post-mortem examination to be undertaken to confirm the likely cause of death (**Form E** applies)
* If a medical referee grants permission for the cremation in an approved crematorium, he/she completes **Form F**
* For cremations that require the permission of a medical officer of health (cremations otherwise in an approved crematorium), the medical officer of health can grant permission by using **Form G**
* Various record keeping requirements for cremation authorities are prescribed in **Form H**.

The forms are provided at **Appendices 1-10**.

In most cases, the funeral director collects the cause of death documentation and relevant cremation forms and provides the paperwork to the crematorium authority to forward on to the medical referee. However, if people make their own arrangements for a cremation, and do not use a funeral director, they need to collect and provide the required information to the cremation authority.

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| Note: While some of the forms discussed in this guidance have historically been completed manually by certifying practitioners in hard copy format, the government Death Documents online service has now modernised this process. Some of the paperwork required to approve a cremation (e.g. **Forms AB** and **B** that are completed by medical or nurse practitioners) can now be completed online and viewed by medical referees and funeral directors. This is explained further in **section 6.6**.  |

**6.1 Using the correct prescribed forms**

It is always advisable to use the prescribed form. For example, regulation 5 requires that *'no cremation shall be carried out unless [the] application …. has been made in form A of Schedule 1….’.* Regulation 4 is worded in a similar manner, requiring the specified forms to be used. Given such wording of the Regulations, the forms should be filled in as they are set out in the Regulations, and not altered.

Section 52 of the Legislation Act 2019 provides that a form is not invalid because it contains minor differences from a prescribed form, as long as it still has the same effect and is not misleading. Therefore, while it is therefore possible to use a slightly different form, Te Whatu Ora recommends that, wherever possible, cremation authorities and medical referees use the forms as set out in the Regulations. Copies are provided at **Appendices 1-10**.

There are anecdotal reports that some crematoria may not accept cremation applications unless they contains the crematorium’s letterhead. This is not correct. If the form used is consistent with the Regulations, then it is lawful, regardless of the letterhead used. Please note that that funeral directors or crematorium authorities and not authorised to include the Manatū Hauora or Te Whatu Ora logos on any forms or documents.

Applications must not be completed and signed before the person has died.

**6.2 Electronic Signatures**

Provided that all parties receiving the form consent to receiving the electronic signature, the medical referee may use an electronic signature to complete the relevant cremation forms.

Section 26 of the Contract and Commercial Law Act 2017 states that “*A legal requirement for a signature … is met by means of an electronic signature if the electronic signature adequately identifies the signatory and adequately indicates the signatory’s approval of the information to which the signature relates…”* The signature must be *“as reliable as is appropriate given the purpose for which, and the circumstances in which, the signature is required”.*

The Contract and Commercial Law Act 2017 also requires that a legal requirement for a signature that relates to information legally required to be given to a person is met by means of an electronic signature only if that person consents to receiving the electronic signature. The 'key person' who must consent is the cremation authority itself (see regulation 9(3) of the Regulations).

However, there is a stricter obligation that applies to stillbirth certificates under section 46A of the Burial and Cremation Act that requires encryption in clause 1 of Schedule 2 of the Contract and Commercial Law Regulations (as described in section 10, below).

**6.3 Application form (Form A)**

Before any cremation can be carried out, an *Application for cremation* (**Form A**) must be completed and is to be addressed to the crematorium authority. The application form must be signed by an executor or a near relative of the deceased person, and the signature witnessed. However, another person may sign the form if the crematorium authority is satisfied that it is reasonable for that person to make the application and there is sufficient reason given on the application as to why it is not signed by an executor or a near relative.

**Form A** may sometimes be completed relatively late – for example, when the applicant arrives from another city on the day of the funeral service. In this case, the funeral director should submit the forms available to the crematorium authority at their earliest convenience, to allow the crematorium authority to collect the documents, send them to the medical referee to check, make any relevant enquiries, and to issue the cremation certificate. Additionally, time may be needed for the medical referee to check and follow up on any outstanding matters, while awaiting for the application to be finalised and sent (which can be as late as the day before or day of a funeral service).

The medical referee is required to check the application. The application will:

* Confirm the full name of the deceased (including the correct spelling). This is important because certifying practitioners can sometimes write an incomplete name on the accompanying medical certificate or use an informal first name rather than the legal name of the deceased
* Indicate that the executor (if there is one) and near relatives have been informed of the intention to cremate and confirm their approval for the cremation
* Provide information about the medical and nurse practitioners who attended the deceased, and others who were present at the time of death, and
* Provide an opportunity (on behalf of whānau) to express any reservations about the cause of death or appropriate medical care leading up to the death (questions 8 and 9 on **Form A**). These reservations can be expressed independently of the certifying medical or nurse practitioner.

Sometimes the family is aware of a biomechanical aid (pacemaker) that has been overlooked by a certifying medical or nurse practitionerand not mentioned on **Form AB** (described below). There have been several instances of a pacemaker being detected this way (question 9A).

**6.4 Certificate in relation to pacemakers and other biomechanical aids (Form AB)**

A medical or nurse practitioner will complete **Form AB** certificate to confirm that the deceased did not have a pacemaker or other such aid or, if they did have one, it has been removed.

However, there are instances when a medical or nurse practitioner may be unaware of, or overlook, the presence of a pacemaker. The medical or nurse practitioner may certify that no biomechanical aid is present when the applicant or an embalmer has identified that one is present. Embalmers should routinely check to ensure no biomechanical aids are present.

Medical referees may also ask the embalmer to provide a separate statement in such cases to confirm that it has been removed. An example of a form provided by the New Zealand Embalmers Association is provided at **Appendix 8**.

**6.5 Certificate of medical practitioner or nurse practitioner (Form B)**

A medical or nurse practitioner completes a **Form B** certificate when they become aware that an application is about to be made to cremate a body. This form covers medical details required for cremation. It includes questions about the time and place of death, how the fact of death was established, the identity of the deceased, the cause and mode of death, the medical practitioners and nurse practitioners who attended the person before death, and if they had suspicions around the death, etc.

In most cases certifying practitioners examine the deceased after death. However, there is one exception to this for situations where a person has died in a residential care facility, and the death was not unexpected. In such cases a **Form B** cremation certificate from a certifying practitioner may be issued without examining the deceased after death. Another process with appropriate safeguards is described in section 8, below.

The **Form B** certificate has a statement at the end, required by the Regulations: “*Note this certificate must be handed or sent in a closed envelope by the medical practitioner or nurse practitioner who signs it to a medical referee”.* In the past thismeant that the medical or nurse practitionerwho completed the **Form B** certificate had to provide it in a sealed envelope and deliver it directly to the medical referee. This was to ensure patient confidentiality regarding the causes and circumstances of death. However, officials accept that this is no longer always feasible and that funeral directors may collect the forms and then fax or email the scanned forms to the medical referee.

If someone wants to arrange a cremation without a funeral director, the original documentation (i.e. the *Medical Certificate of Cause of Death* and cremation forms) should be provided to the medical referee in a sealed envelope – in most cases via the crematorium authority. The crematorium staff can check the originals (which they keep) and fax or email a copy to the medical referee, along with a copy of the application. The medical referee will email a scanned copy or fax the permission to the crematorium authority (and then post the hard copy originals to the crematorium authority).

**6.6 Death Documents – cause of death and cremation forms can now be completed online**

Certifying practitioners can now complete the Medical Certificate of Cause of Death (HP4720) and cremation certificates (**Forms AB** and **B**) via the online Death Documents platform, instead of filling in paper forms. See:

* <https://deathdocs.services.govt.nz/welcome>
* <https://www.tewhatuora.govt.nz/for-the-health-sector/health-sector-guidance/burial-and-cremation-act-1964/burial-and-cremation-act-1964/>.

Funeral directors and medical referees can now view completed medical certificates and cremation forms online or download as a PDF.

***How does the Death Documents system affect medical referees?***

Certifying practitioners no longer need to print the certificates for funeral directors, as they can access them online via Death Documents. These documents may, therefore, come to medical referees without a handwritten signature. This is an acceptable format for medical referees to receive and consider whether, or not, to grant permission for the body to be cremated. If a medical referee has any concerns they may contact the certifying practitioner whose contact details are available on the cremation form.

Medical referees can search for and view documents that they are required to referee. However, they cannot currently grant permission to cremate (**Form F**) online via Death Documents. This is still paper-based, for now. Ongoing enhancements are proposed for the Death Documents system to incorporate this function. Medical referees will be advised if/when this happens.

You can read more at: <https://www.tewhatuora.govt.nz/for-the-health-sector/health-sector-guidance/burial-and-cremation-act-1964/death-documents-project>

If medical referees require further information, or have any specific queries, please email the Mortality Administrator at:mortality\_administration@health.govt.nz

**7. Duties of medical referees**

Regulation 7 prescribes some key duties of medical referees. Further guidance about such duties, and other aspects of the cremation approval process, that medical referees should be familiar with are provided below.

***Obtaining forms.*** Crematorium authorities and/or medical referees can prepare and use their own forms. These should be consistent with the prescribed forms in the Regulations. While stocks of forms are not held by Manatū Hauora or Te Whatu Ora, the versions attached can be used (see **Appendices 1-10**).

***Permitting a cremation.*** Unless specifically exempted in law, a medical referee must give permission for any cremation before it takes place. The prescribed *Permission to Cremate* form (**Form F**) is provided at **Appendix 6.**

***A Medical referee cannot act in some situations.*** A medical referee cannot act as a medical referee if he or she attended the deceased as a medical practitioner during the deceased's last illness. The only exception to this is if the person died in a hospital and the medical referee is the medical superintendent and the deceased was (also) attended by another medical practitioner, whether a member of the hospital staff or not.

***Cremation certificates required.*** Before giving permission for a body to be cremated, a medical referee must have received from a medical or nurse practitioner:

* a *Certificate in relation to Pacemakers and Other Biomechanical Aids* (**Form AB)**, and
* a *Certificate of Medical Practitioner or Nurse Practitioner* (**Form B**) if the death is not required to be reported to a coroner.

Note, the information required by these forms can also be provided online via the online Death Documents platform described above.

It is important that medical referees pass on patient history as a matter of course so that embalmers and funeral directors are aware of any potential risks such as radioactive medical implants or infectious diseases.

Medical referees must have a sound understanding of when such cremation certificates can be issued and who can issue them.

A medical or nurse practitioner who can give a *Certificate of Medical Practitioner or Nurse Practitioner* (**Form B**) is defined in sections 46B, 46C, or 46CA of the Act. This includes a medical or nurse practitioner:

* who attended the person during their last illness. The practitioner may only issue a certificate if they are satisfied that the person's death was a natural consequence of the illness (s 46B).
* who is available for the certification of a death of a person over 70 years who died in an accident (in defined circumstances) (s 46C)
* who is available to the person in an assisted death (s 46CA).

Another medical or nurse practitioner may issue a **Form B** certificate if they are satisfied that the person's death was a natural consequence of the illness and that the medical or nurse practitioner who last attended the person during the illness is unavailable or is not available within 24 hours of the death. Before issuing a certificate, the medical or nurse practitioner must have checked the medical records, considered the circumstances of the person's death, and examined the person's body. This medical or nurse practitioner must have also made reasonable efforts to have contacted the medical or nurse practitioner who had attended the person during their last illness.

Another medical or nurse practitioner cannot issue a **Form B c**ertificateif the medical or nurse practitioner who last attended the person during the illness has refused to give a certificate because they were not satisfied that the death was a natural consequence of the illness.

A medical or nurse practitioner must NOT give a **Form B** certificate if, under the Coroners Act 2006, the death must be reported to the New Zealand Police or it has been reported to a coroner. However, if the coroner decides not to open an inquiry into the death, the medical or nurse practitioner may issue a **Form B** certificate.

If the death has been reported to a coroner (under the [Coroners Act](http://prd-lgnz-nlb.prd.pco.net.nz/regulation/public/1973/0154/latest/link.aspx?id=DLM377056#DLM377056) 2006), the medical referee needs to obtain a *Coroner’s certificate* (**Form C**) from the coroner.

A medical or nurse practitioner may give a **Form B** certificate even if the death was reported to the New Zealand Police if the person was 70 years of age or older and, in the opinion of the medical or nurse practitioner, the death was caused (or significantly contributed to) by injury. However, the medical or nurse practitioner must also be satisfied that the injuries were caused by an accident and arose principally because of age-related infirmities. They must be satisfied that the accident was not suspicious or unusual, was not caused by an act or omission of any other person, and was not violent or unnatural. It must not be a death that would require a Coronial inquiry. If the medical or nurse practitioner is aware that a death has been reported to a coroner, they must not give a certificate without first obtaining the agreement of the designated coroner.

Such strict prerequisites to cremation approvals are required because there must be no doubt about the propriety of reducing the body to ashes.

***Identity of the deceased.*** Medical referees must require a statutory declaration or other evidence as to the identity of the deceased to be provided *‘in every case where [they] consider it necessary’.* In other words, if there is any doubt about the identity of the deceased, the medical referee must obtain a statutory declaration or other evidence to confirm who the deceased was.

The provision of a statutory declaration is prescribed by the Oaths and Declarations Act 1957. It requires the involvement of a lawyer, Justice of the Peace, or a court official. Arranging this can be a hurdle for some whānau and funeral directors. However, the *Application for cremation* (**Form A**) may be a useful supplement to confirm the identity of the deceased: a witnessed statement usually completed by a relative or executor. Not only is it a supplementary form of identification, it also sometimes indicates that the name used by the medical or nurse practitioner on the medical forms is incomplete, misspelled, or inaccurate.

***Checking the application and certificates.*** Before permitting a cremation, the medical referee must examine the application (**Form A**) and cremation certificates required to be provided. The medical referee is responsible for ensuring the documents meet the regulatory requirements and that the information provided in the *Certificate of medical practitioner or nurse practitioner* (**Form B**) is a result of adequate enquiry by the medical or nurse practitioner completing it. Medical referees should make further inquiries about applications and/or any certificates that they think are inaccurate, incomplete, or if they are not satisfied that the person completing the application or certificate took adequate care to ensure the information was accurate.

***Near relative.*** This term is used in the cremation application form (**Form A**)and defined as “*the spouse, civil union partner, or de facto partner of the deceased, but only if the spouse, civil union partner, or de facto partner was living together with the deceased immediately before his or her death……”.* If the deceased was living in a rest home or hospital or hospice before death, there may be a question about whether the near relative meets the definition of having lived together with the deceased **immediately** before death. It is acceptable to allow an application from a near relative who otherwise meets the definition, when the deceased was nursed in a facility before death. However, applications made by a surviving sister or brother of the deceased are not acceptable as these are not classified as “near relatives”.

***Executor.*** Many funeral directors routinely list themselves as the applicant but do not explain why they are making the application rather than the executor or a near relative of the deceased. The only time a funeral director should sign as the applicant is when no family or an executor available. The executor or a near relative must make and sign the application in all instances unless there are no such individuals. If this is the case a declaration from the funeral director must be given as to why they are making the application.

***Form AB regarding biomechanical aids.*** This form no longer reflects common practice. The Regulations only offer 2 options: that there is no pacemaker in situ, or the medical or nurse practitioner has removed a pacemaker. It is now very rare for a certifying medical or nurse practitioner to remove a pacemaker. In most cases, the certifying practitioner asks the funeral director to remove any pacemaker when the body is at the funeral home and, in practice, an embalmer is much more likely to remove any pacemaker present. This is not an option listed on **Form AB** but can be written as a separate option.

Medical referees may also ask the embalmer to provide a separate statement in such cases to confirm that any such a device has been removed. An example form provided by the New Zealand Embalmers Association is provided at **Appendix 8**. However, there are instances when a medical or nurse practitioner may be unaware of, or overlook, the presence of a pacemaker. The medical or nurse practitioner may certify that no biomechanical aid is present when an the applicant (on **Form A**) or an embalmer has advised that one is present. Embalmers should routinely check to ensure no biomechanical aids are present.

If the body has been referred to a coroner, then the coroner usually issues a **Form AB** (signed by a pathologist). There can be instances where the coroner issues **Form C** but declines to also issue a **Form AB**. Typically, these are coroner referrals where the coroner has made enquiries that satisfy her or him that no autopsy is required. In the absence of an autopsy, there is no medical or nurse practitioner to issue a **Form AB**. The most helpful option is for the embalmer to issue a statement that there is no pacemaker even though this does not fulfil the regulatory requirements for a **Form AB**.

***Full name of the deceased.*** The full nameis required on the *Certificate of medical practitioner or nurse Practitione*r (**Form B**) but many medical or nurse practitioners only write the first and last name, and may not be aware of the person’s other names. In these cases, it is important to cross reference among the documents to ensure the deceased is correctly identified, but the documents need not be returned to the medical or nurse practitioner (annotating the documents to confirm the identify may be helpful in case of future enquiries).

***Definition of*** ***a*** ***hospital.*** This is relevant to questions 2 and 12 on the *Certificate of medical practitioner or nurse practitioner* (**Form B**). A hospital includes a private hospital, public hospital, “nursing home”, or the “hospital bed” of a rest home. If the death does not occur in a “hospital”, for example hospice care in the home, then the medical or nurse practitioner must provide the names of nursing and medical staff (and friends and family) who attended the deceased in the four weeks prior to death.

***Definition of an operation.*** Question 11 on the *Certificate of medical practitioner or nurse practitioner* (**Form B**) asks whether the deceased has undergone any operation during their final illness. The definition of operation includes (for example) procedures performed under sedation without general anaesthetic (such as a colonoscopy, a gastroscopy, or insertion of a chest drain or stent). The definition of **final** **illness** may be unclear but if a medical or nurse practitioner is unsure whether it is the terminal inter-current illness that preceded death (such as pneumonia for a few days) or the underlying fatal illness (such as cancer), then they may put both on the form.

***Cause of death not clear.***  If a coroner has not given a *Coroner’s certificate* (**F**[orm C](http://prd-lgnz-nlb.prd.pco.net.nz/regulation/public/1973/0154/latest/link.aspx?id=DLM39826#DLM39826)), the medical referee cannot permit a cremation unless he or she is satisfied that the fact and cause of death have been definitely ascertained.

If the medical referee has any suspicion that the death was due to poison, violence, an illegal operation, privation, or neglect, or if there is any suspicious circumstance whatsoever, then the medical referee must not permit a cremation until the *Coroner’s certificate* (**Form C**) has been provided or the coroner has notified the medical referee that he/she does not intend to open an inquiry. For clarification, the term “violence” includes death as a result of a traumatic accident and the term “poison” can refer to an adverse effect or toxicity of a medicine or other substance.

If, for any reason, the death has been or ought to be reported to a coroner, the medical referee must not permit a cremation until the coroner has given a *Coroner’s certificate* (**Form C**) or has notified the medical referee that he does not intend to open an inquiry.

If a medical referee is not satisfied that the cause of death has been definitely ascertained then he/she must *not* permit the cremation unless a pathologist appointed by a crematorium authority has performed a post-mortem examination. In an emergency or if the cremation is taking place elsewhere than in an approved crematorium (**Appendix 7**), the post-mortem examination should be conducted by a pathologist appointed by the medical referee. Following the post-mortem examination, the pathologist should provide a *Certificate After Post-Mortem Examination* ([Form E](http://prd-lgnz-nlb.prd.pco.net.nz/regulation/public/1973/0154/latest/link.aspx?id=DLM39830#DLM39830)) to the medical referee.

In practical terms, it is not clear how a medical referee would arrange for a post mortem if the Coroner declines the case. Private autopsies are very expensive (around $2000-5,000) and hospitals do not routinely perform autopsies for deaths that did not occur in their facilities. Provided he or she did not attend the deceased as a medical practitioner during the deceased's last illness, the medical referee may complete a *Coroner’s certificate* (**Form C**) if he or she is a coroner, or a *Certificate after Post-Mortem Examination* (**Form E**) if he or she has made a post-mortem examination of the body.

***Deceased died overseas.***  In the case of a person who has died overseas, the medical referee may accept a declaration containing the particulars required in an *Application for cremation* (**F**[orm A](http://prd-lgnz-nlb.prd.pco.net.nz/regulation/public/1973/0154/latest/link.aspx?id=DLM39816#DLM39816)) provided it was made before the appropriate overseas authority to administer an oath or take a declaration. A medical referee may also accept equivalent documents to a *Coroner’s certificate* (**Form C**) or a *Certificate after Post-Mortem Examination* (**Form E**) if these are signed by a person substantially equivalent to a New Zealand Coroner or Pathologist.

The documentation should include a confirmation that there is no biomechanical aid (pacemaker) in situ. If the documentation provided by the overseas jurisdiction has no medical certification as to the presence or absence of a biomechanical aid, the embalmer may be the only person able to certify whether or not the body has a pacemaker, in a timely manner.

***Issuing permission to cremate.*** If a medical referee decides to permit a cremation, he/she will complete the *Permission to Cremate* (**F**[orm F](http://prd-lgnz-nlb.prd.pco.net.nz/regulation/public/1973/0154/latest/link.aspx?id=DLM39831#DLM39831)) in duplicate, and send one copy to the attendant at the crematorium and another copy is kept with the application documentation and other forms. Permission to cremate a body elsewhere than in an approved crematorium is the responsibility of a medical officer of health and not the medical referee. **Form G** is used by a medical officer of health to give such permission.

***Right to refuse cremation.*** Despite anything in the Regulations, a medical referee may refuse to permit a cremation without stating any reason. Cremation authorities also have responsibilities and their registrars cannot permit cremations to proceed unless all the documentation has been provided and is correctly completed.

***All documentation to be given to the crematorium registrar.***  Once a medical referee decides on the application for cremation, he/she must provide the registrar of the crematorium authority with all the documentation held (whether or not they permit the cremation). The only exception is the copy of the *Permission to Cremate* (**Form F**) sent to an attendant at the crematorium.

In practice, the funeral director usually holds the original certificates, and faxes or emails a scanned copies to the medical referee, and then delivers the original documents to the crematorium authority.

The registrar should check all documentation and ensure it is fully and accurately completed. If there are concerns or issues, the documentation must be amended and re-refereed if there is a problem. The registrar cannot permit a cremation to proceed without the correct documentation so this may mean some cremations are delayed.

**8. Exemption from cremation certificates for residential care facilities**

The Minister of Health has authorised medical referees, in some specific cases, to permit cremations to be carried out without complying with the full requirements in regulation 7 which usually when authorising cremations to take place. This exemption is enabled by regulation 12(b) of the Regulations.

In summary, if a person has died in a residential care facility, and the death is not unexpected, then the certifying practitioner can issue the **Form B** cremation certificate without examining the deceased.

Under this authorisation, a medical referee must receive advice from a trusted source, who has a reasonable level of assurance of the cause of death, to verify the identity of the deceased and that the deceased died of natural causes, in lieu of a certifying practitioner examining the deceased.

Medical referees have discretion in determining who constitutes a trusted source, but must record the identity, contact details, and position of the trusted source.

When the certifying practitioner does not view the body, the cremation authority must confirm whether there is a biomechanical aid present in the body.

This authorisation applies for a two-year period from the date of approval, 19 December 2022. It only applies in rest homes, residential care facilities, and other long-term in-patient facilities, and where the medical history and current conditions of the deceased are known by a medical or nurse practitioner.

This exemption DOES NOT apply to deaths in hospitals, hospices, private homes, or other settings and where a medical practitioner does not know the medical history of the individual. Certifying practitioners would still be required to view the body of a person who dies outside of a residential care facility.

This exemption from the full requirements of regulation 7 means that, in situations where a person has died in a residential care facility and where the death is not unexpected, a **Form B** cremation certificate from a certifying practitioner may be issued without examining the deceased after death.

* The **Form B** cremation certificate should be completed by a certifying practitioner who previously attended the deceased before death (by personal attendance or via video-link).
* The **Form B** certificate should state that “the deceased was not examined after death as per the residential care facility exemption” (i.e. under the provisions of the exemption issued by Hon Aupito William Sio on 19 December 2022).
* A manager or registered nurse at the residential facility must confirm to a funeral director (or other applicant for cremation) that they have identified the deceased to the funeral director and that they are satisfied that there were no suspicious circumstances to the death.
* To ensure the crematorium authority knows the deceased may be safely cremated, the funeral director (or other applicant) must provide an embalmer's certificate to confirm that there is no biomechanical aid in situ (see Appendix 8). These certificates should be sent to the medical referee.
* A Deceased Verification form is provided at **Appendix 9**.

A practitioner who did not attend the deceased before death (an ‘alternate practitioner’) **must still examine the body** after death in order to issue the Medical Certificate of Cause of Death.

**9. Special circumstances**

Despite anything in the Regulations, if a medical referee is satisfied that any deceased person was suffering from anthrax, plague, cholera, small-pox, or yellow fever, the medical referee may, with the approval of a medical officer of health, permit the cremation of the body without any of the required forms and certificates.

In an epidemic (or for other emergency reasons) the Minister of Health may permit cremations to be carried out, or authorise medical referees to permit cremations to be carried out, in any place, without any of the required forms and certificates. This permission may be a general permission within the district of a local authority or it may be in relation to particular cases or classes of cases or particular places. It may also be subject to exceptions or conditions the Minister specifies or imposes (section 85, Civil Defence Emergency Management Act 2002).

**10. Cremation of stillborn babies**

The birth of a stillborn child must be registered with the Office of Births, Deaths and Marriages (BDM) but no death registration is required. The Act outlines the requirements for a certificate of cause of death that must be completed for stillborn babies – the *Medical Certificate of Causes of Fetal and Neonatal Death* (HP4721 form). This should be completed by a doctor (or midwife if no doctor was present at the birth) and sent to the Te Whatu Ora Mortality Collection. If a funeral director was used then they would do that.

The term 'stillbirth' is not a cause of death - it just means the baby was born dead. Ideally the cause of death would show why the baby died before birth. Sometimes that cause is related to a condition in the mother (e.g. high blood pressure in pregnancy), but in other cases the cause is unknown. Autopsies are performed on a reasonable percentage of stillborn babies to try and find the cause. If the certifying doctor or midwife cannot provide a cause of death because they don't know what it was then, they should enter something along the lines of 'Stillborn at 22 weeks gestation, cause of death unknown'. Every stillbirth should have an HP4721 certificate completed for it.

Section 46A of the Act and regulation 4(6) of the Regulations permit the body of a stillborn child to be cremated without the permission of the medical referee if the crematorium authority is provided with:

A written certificate relating to the cause of the stillbirth signed by a doctor or midwife who was present at the birth or examined the child after birth,

OR

A statutory declaration, made by the person required under the [Births, Deaths, Marriages, and Relationships Registration Act 2021](http://www.legislation.govt.nz/act/public/1964/0075/latest/link.aspx?id=DLM359368) to notify the birth, advising that the child was born dead and that no doctor or midwife was present at the birth or it is impossible to obtain a certificate from a doctor or midwife present at the birth,

OR

A coroner's authorisation.

If the crematorium authority is nervous about vetting these certificates for stillbirths, because their staff have no medical expertise, their medical referee may be able to check the certificates and advise the crematorium staff.

With the passage of the [Contract and Commercial Law (Electronic Transactions) Regulations 2017](http://scanmail.trustwave.com/?c=5305&d=49mt2UxKd7HxoyuS5nHXgSo0R4Xsmz4oGVRWm2uHMQ&u=http%3a%2f%2fwww%2elegislation%2egovt%2enz%2fregulation%2fpublic%2f2017%2f0216%2f4%2e0%2fwhole%2ehtml%23DLM7393940), the requirement for a written certificate may now be met by information that is in electronic form and signed by means of an electronic signature. However, the electronic signature is only valid if the means of creating the electronic signature is a digital certificate for authentication of users; and the signatory uses a public key cipher (asymmetric encryption) with a minimum key length of 2048 bits; and any alteration to the information or the electronic signature after the time of signing is detectable (Regulation 4 and Schedule 2 refer).

**11. Records and register**

The crematorium authority has to appoint a registrar, who shall keep a register of all cremations taking place at the crematorium (**Form H**). The registrar must check the documentation is complete prior to permitting the cremation to take place and then enter the details of each cremation immediately after the cremation has taken place. The exception is information about the disposal of the ashes, which should be completed as soon as the ashes have been handed over to the recipient or otherwise finally disposed of.

All applications, certificates, statutory declarations, and other documents relating to any cremation, whether that cremation is carried out or not, must be marked with a number corresponding to the number in the register, must be filed in order, and must be carefully preserved by the cremation authority. All registers and documents must be open to inspection at any reasonable hour by any constable, medical officer of health, health protection officer, or any other person appointed for that purpose by the Minister.

When any crematorium is closed, the crematorium authority must send all registers and documents to the Minister, or otherwise dispose of them as the Minister may direct.

For cremations taking place elsewhere than in an approved crematorium, the medical officer of health is responsible for carrying out the registrar’s duties (**Appendix 7**).

**Appendix 1 – Application for cremation (Form A)**

**Reg. 5**

**Form A**

**Application for cremation**

**Cremation Regulations 1973**

**Consecutive number (to be inserted on receipt of application)**

I,

(*Full name of applicant)*

Address:

Occupation:

apply to the crematorium authority of the ..........…………………………Crematorium (or as the case may be) to undertake the cremation of the body of

Full name of deceased

Address:

*(Occupation) (Age) (Sex) [relationship status, ie, whether the deceased was or had been married, in a civil union, or in a de facto relationship; or was the surviving spouse or partner of a marriage, civil union, or de facto relationship; or had never been married, in a civil union, or in a de facto relationship].*

The true answers to the questions set out below are as follows:

1. Are you an executor of the deceased? [*specify*]

2. Are you a relative of the deceased? [*specify*] If so, state the relationship.

If you are not an executor or a near relative\*, state why this application is being made by you and not by an executor or a near relative\*:

3. Have the near relatives\* of the deceased been informed of the proposed cremation? [*specify*]

4. If the application is not made by an executor, is there an executor of the deceased? [*specify*]

If there is an executor has he been informed of the proposed cremation? [*specify*]

5. To the best of your knowledge and belief has any near relative or executor of the deceased expressed any objection to the proposed cremation? [*specify*]

If so, on what ground? [*specify*]

6. What, to the best of your knowledge and belief, was the date and hour of the death of the deceased?

Date: Hour:

7. Where did the deceased die? *(Give address, and say whether own residence, lodgings, hotel, hospital, nursing-home, etc.).*

8. Do you know or have you any reason to suspect that the death of the deceased was due, directly or indirectly, to –

*(a)* Violence:

(b) Poison:

(c) Privation or neglect:

(d) Illegal operation?[*specify*]

9. Do you know any reason whatever for supposing that an examination of the body of the deceased may be desirable? [*specify*]

9A.Do you know or have you any reason to suspect that the body of the deceased contains a cardiac pacemaker or other biomechanical aid?

10. Give the name and address of the ordinary medical attendant of the deceased:

11. Give names and addresses of all the medical or nurse practitioners who attended the deceased during his (or her) last illness:

12. Who were the persons (if any) present at the time of death? [*specify*]

13. Was the deceased a member of a religious denomination whose tenets require the burning of the body to be carried out as a religious rite elsewhere than in an approved crematorium? [*specify*]

If so, give the name by which that religious denomination is known [*specify*]

I hereby certify, with a view to procuring the cremation of the body of the above-named deceased, that all the particulars stated above are true, and that to the best of my knowledge and belief no material particular has been omitted.

Date: Signature:

Witness to signature: Name:

Occupation:

Address:

*\**NOTE – The term near relative as used in this form, means—

(a) the spouse**,** civil union partner, or de facto partner of the deceased, but only if the spouse, civil union partner, or de facto partner was living together with the deceased immediately before his or her death; and

(b) a parent of the deceased; and

(c) any child of the deceased who is aged 16 years or over; and

(d) any other relative of the deceased who usually resided with him or her.

**Appendix 2 – Certificate in relation to pacemakers and biomechanical aids (Form AB)**

**Reg. 7(1)**

**Form AB**

**Certificate in Relation to Pacemakers and Other Biomechanical Aids**

**Cremation Regulations 1973**

I HEREBY certify that I have examined the body of:

*Full name of deceased:…..………………………………………………………………………………………*

Address

Occupation

\* I am satisfied that the body does not contain a cardiac pacemaker or any other biomechanical aid.

\* I have removed from the body a cardiac pacemaker or other bio-mechanical aid, namely

Date:

Signature:

Registered Qualifications:

Address:

*\* Delete whichever is inapplicable.*

**Appendix 3 – Certificate of medical or nurse practitioner (Form B)**

**Reg. 7**

|  |
| --- |
| **Form B****Certificate Of Medical Practitioner Or Nurse Practitioner****Cremation Regulations 1973** |

I AM informed that application is about to be made for the cremation of the body of:

Full name of deceased:

Address:

Occupation:

As a medical practitioner or nurse practitioner who is required or permitted by [section 46B](http://www.legislation.govt.nz/regulation/public/1973/0154/latest/link.aspx?id=DLM1806631" \l "DLM1806631) or [46C(1)](http://www.legislation.govt.nz/regulation/public/1973/0154/latest/link.aspx?id=DLM1806636" \l "DLM1806636) of the Burial and Cremation Act 1964 to give a certificate of cause of death (as defined in [section 2(1)](http://www.legislation.govt.nz/regulation/public/1973/0154/latest/link.aspx?id=DLM355084" \l "DLM355084) of that Act) for the death, and who has seen and identified the body after death, I give the following answers to the questions set out below:

1. On what date and at what hour did he/she die?

2. Where did the deceased die? (Give address and say whether own residence, lodgings, hotel, hospital, nursing-home, etc.).

3. Are you a relative of the deceased? If so, state the relationship.

4. Have you, so far as you are aware, any pecuniary interest in the death of the deceased?

5. Were you the ordinary medical attendant of the deceased? If so, for how long? (State how many weeks, months, or years.)

6. Did you attend the deceased during his/her last illness? If so, for how long? (State how many hours, days, weeks, or months.)

7. When did you last see the deceased alive? (Say how many hours or days before death.)

8. (a) How soon after death did you see the body?

(b) What steps did you take to satisfy yourself as to the fact of death?

(c) How did you establish the identity of the deceased person?

|  |  |  |
| --- | --- | --- |
| 9. | What were the causes of death? | Period elapsing between onset of each condition and death (years, months, or days). |
|  | (a) | Immediate cause – the disease, injury, or complication which caused death?  |   |
|  | (b) | Morbid conditions (if any) giving rise to the immediate cause (place the conditions in chronological order beginning with the most recent)?  |   |
|  | (c) | Other conditions (if any) contributing to death – pregnancy, parturition, over-exertion, dangerous occupation?  |   |

*State how far your answers as to the causes of death and the duration of such causes are founded on your own observations or on statements made by others. If on statements made by others, give their names and their relationship to the deceased.*

10. What was the mode of death? (Say whether syncope, coma, exhaustion, convulsions, etc.)

 What was its duration? (State number of days, hours, or minutes; and state how far your answer as to the mode of death is founded on your own observations or on statements made by others. If on statements made by others, give their names and their relationship to the deceased.)

11. Did the deceased undergo any operation during the final illness or within a year before death; if so, what was its nature, and who performed it?

12. By whom was the deceased nursed during his/her last illness? (If the death occurred in a hospital, this question may be answered by referring generally to the nursing staff in a specified ward, but otherwise give names and say whether professional nurse, relative, etc. If the illness was a long one, this question should be answered with reference to the period of four weeks before death.)

13. By what medical practitioners or nurse practitioners (besides yourself, if applicable) was the deceased attended during his (*or* her) last illness? [specify]

14. In view of the knowledge of the deceased’s habits and constitution, do you feel any doubt whatever as to the character of the disease or the cause of death?

15. Do you know, or have you any reason to suspect, that the death of the deceased was due, directly or indirectly, to –

*(a) Violence:*

*(b) Poison:*

*(c) Privation or neglect:*

*(d) Illegal operation:*

16. Have you any reason whatever to suppose a further examination of the body to be desirable?

17. Have you given the certificate of cause of death (as defined in [section 2(1)](http://www.legislation.govt.nz/regulation/public/1973/0154/latest/link.aspx?id=DLM355084#DLM355084) of the Burial and Cremation Act 1964) for the death? [specify]

I hereby certify that the answers given above are true and accurate to the best of my knowledge and belief, and that there is no circumstance known to me which can give rise to any suspicion that the death was due wholly or in part to any other cause than disease (or accident) or which makes it desirable that the body should not be cremated.

Signature:

Address:

Date:

Registered Qualifications:

**NOTE – This certificate must be handed or sent in a closed envelope by the medical practitioner or nurse practitioner who signs it to a medical referee.**

**Appendix 4 – Coroner’s certificate (Form C)**

**Reg. 7(1)(b)**

**Form C**

**Coroner’s Certificate**

**Cremation Regulations 1973**

I certify that—

(a) a death has been reported under the Coroners Act 2006 to a coroner, and the details of the death are as follows:

Full name of deceased: ………………………………………………………………………………..

Late of: [full residential address]:………………………………………………………………………

Occupation:………………………………………………………………………………………………

Sex: [male or female]: ………………………………………………………………………………….

Date of birth: ……………………………………………………………………………………………..

Date of death: ……………………………………………………………………………………………

Place of death: …………………………………………………………………………………………..

(b) I am satisfied that there are no circumstances likely to call for an examination or, as the case may be, a further examination, of the body.

**Signed**

Signed at [location] on [date]

Signature:

Name:

(Coroner)

**Appendix 5 – Certificate after post-mortem examination (Form E)**

**Reg. 7(5)**

**Form E**

**Certificate After Post-Mortem Examination**

**Cremation Regulations 1973**

I HEREBY certify that, acting on the instructions of \*......…………………..............……, a Medical Referee under the Cremation Regulations 1973, I made a post-mortem examination of the body of:

*(Full name of deceased)*

*(Address)*

*(Occupation)*

The result of the examination is as follows:

I am satisfied that the cause of death was …………………………............... (and that there is no reason for making any toxicological analysis or for reporting the death to the Coroner).\*\*

Date:

Signature:

Registered Qualifications:

Address:

\* Where the Medical Referee himself gives the certificate, strike out the works ‘*on the instructions of*’ and insert ‘*as*’.

\*\* The words “‘*for making any toxicological analysis or”*’ should be deleted where a toxicological analysis has been made and its result is stated in this certificate or in a certificate attached to it, and the words ‘*or for reporting the death to the Coroner*’ should be deleted if the death has already been so reported.

**Appendix 6 – Permission to cremate form (Form F)**

**Regs. 4(2), 7(8)**

**Form F**

**Permission to Cremate**

**Cremation Regulations 1973**

WHEREAS application has been made for the cremation of the body of:

Full name of deceased:

Address:

Occupation:

And whereas I have satisfied myself –

1. That all the requirements of the Burial and Cremation Act 1964 and the Cremation Regulations 1973 have been complied with; and

2. \*That the cause of death has been definitely ascertained (or that a certificate in form C has been given by a Coroner); and

3. That no reason exists for any further inquiry or examination:

Now, therefore, I hereby permit the cremation authority of the crematorium at ............................................... to cremate the said body.

Date: Signature:

\* Medical Referee (*or* Deputy Medical Referee *or* Second Deputy Medical Referee *or* Medical Officer of Health)

NOTE –

*1.* Delete all inappropriate alternatives in both places where an asterisk (\*) appears.

2 This permission should be signed in duplicate; one copy to be retained with the application papers and the other sent by the Medical Referee to the attendant at the crematorium. The Medical Referee should attach to the application papers a statement of any special inquiries which he/she may have seen fit to make before issuing the permission to cremate.

**Appendix 7 – Permission to cremate elsewhere than in an approved crematorium (Form G)**

**Regs. 4(2), 11(2)**

|  |
| --- |
| **Form G****Permission to Cremate Elsewhere Than in an Approved Crematorium****Cremation Regulations 1973** |

WHEREAS application has been made for the cremation of the body of:

Full name:

Address:

Occupation:

And whereas I have satisfied myself –

1. That all the requirements of the Burial and Cremation Act 1964 and the Cremation Regulations 1973 have been complied with; and

2. \*That the cause of death has been definitely ascertained (or that the child was stillborn or that a certificate in form C has been given by a Coroner); and

3. That no reason exists for any further inquiry or examination:

And whereas it has been represented to me that the said deceased belonged to a religious denomination whose tenets require the burning of the body to be carried out as a religious rite elsewhere than in an approved crematorium:

Now, therefore, I hereby permit the body of the said deceased to be cremated at …………………………… subject to the following conditions:

CONDITIONS

Date: Signature:

Medical Officer of Health

NOTE –

*1.* Delete all inappropriate alternatives where the asterisk (\*) appears.

2 This permission should be signed in duplicate; one copy to be retained with the application papers and the other delivered to the person or persons signing the application.

# Appendix 8 – (Voluntary) Certificate in Relation to Biomechanical Aids

****

# Appendix 9 – Verification of Deceased: Exemption from Cremation Certificate (Death in Residential Care Facility)

Under Regulation 12(b) of the Cremation Regulations 1973, on 19 December 2022 Hon Aupito William Sio, Associate Minister of Health, authorised medical referees to permit cremations to be carried out without complying with Regulation 7 for completion of a Cremation Certificate in situations where a person has died in a residential care facility and where the death is not unexpected. In specific conditions, the certifying practitioner does not need to examine the body after death. This exemption only applies

* in rest homes, residential care facilities, and other long-term in-patient facilities, ***and***
* where the medical history and current conditions of the deceased are known by the certifying medical or nurse practitioner.

Under this authorisationa medical referee must receive advice from a trusted source, who has a reasonable level of assurance about the identity of the deceased and that the deceased died of natural causes. Ideally this trusted source will be a facility manager or a registered nurse.

Medical referees have discretion in determining who constitutes a trusted source, but must have a record of the identity, contact details, and position of the trusted source.

**Date**

**Name of deceased**

**Identity of the deceased confirmed by:**

* Name
* Role in the facility
* Phone Number
* Email Address

**How they know the deceased and how long they have known the deceased:**

Declaration.

I …………………………………………………. have received confirmation and verification of the identity of the above-named deceased provided by ………………………………………………… .

I have attached the embalmer's certificate to confirm that there is no biomechanical aid in situ.

Signature:

Position: *[eg funeral director]*

Address:

Date:

*Note: This exemption does not apply to deaths in hospitals, hospices, private homes, or other settings and where a medical practitioner does not know the medical history of the individual. Certifying practitioners would still be required to view the body of a person who dies outside of a residential care facility.*

**Appendix 10 – Register of cremations (Form H)**

**Reg. 9(1)**

**Form H**

**Register of Cremations**

**Cremation Regulations 1973**

Consecutive number of application for cremation

Full name of deceased

Sex Age

Date of death

Place of death

Date of Medical Referee's permission or other authority

Date of cremation

Method of disposal of ashes

Date of disposal of ashes

Signature of person receiving ashes

Ground of recipient’s claim. (i.e., applicant for cremation; relative of deceased – relationship to be stated, etc.)