



Technical Bulletin



Date: April 08, 2020
Topic: Mandatory Reporting of All COVID-19 Mortality
Contact: Melissa Peek-Bullock, State Epidemiologist, Office of Public Health Investigations and Epidemiology
To: All Health care Providers and Facilities, Medical Examiners, Coroners and Funeral Homes

Effective immediately, all providers of health care, health care facilities, medical examiners, coroners and funeral homes must report immediately to their local and state health department, each death that is caused by, associated with or related to COVID-19 infection consistent with the CDC criteria outlined below.

Please Fax Completed Report to (775) 684-5999 and your local health authority listed below:

- Carson City Health and Human Services: (775) 887-2138
- Southern Nevada Health District: (702) 759-1454
- Washoe County Health District: (775) 328-3764
- All Other Areas: (775) 684-5999

All providers of health care and health care facilities should immediately notify both infection control personnel at their health care facility and their local/state health department in the event of a person under investigation (PUI) for COVID-19.

All providers of health care and health care facilities must report IMMEDIATELY to their local AND state health department, each death that is caused by, associated with or related to COVID-19 infection consistent with CDC criteria.

- Nevada Division of Public and Behavioral Health (DPBH): (775)-684-5911 (M-F 8:00 AM to 5:00 PM); (775) 400-0333 (after hours)
- Southern Nevada Health District (SNHD): (702)-759-1300 (24 hours)
- Washoe County Health District (WCHD): (775)-328-2447 (24 hours)
- Carson City Health and Human Services (CCHHS): (775)-887-2190 (M-F 8:00 AM to 5:00 PM); (775)-887-2190 (after hours)

This includes information on the immediate cause of death, such as a heart attack or pneumonia, as well as any underlying disease. An accurate count of deaths is essential to understand the burden and impact of this pandemic as it unfolds. Precise death counts can also inform the state/local government on how to target resources, including health care professionals, and medical supplies such as ventilators and other **essential equipment to areas with the most desperate need.**

Early in this SARS-Cov-2 Pandemic in the U.S. and Nevada, COVID-19-linked deaths may have been overlooked. A late start to this novel coronavirus testing could have hampered hospitals' ability to detect the infection among patients with pneumonia and severe flulike symptoms in February

and early March. While it's known to be overwhelming, the extent of the problem is not yet clear because significant numbers of COVID-19 virus-related deaths have been missed.

Throughout Nevada, even as COVID-19 daily deaths are being recorded in significant numbers, the true death toll is likely much higher. As of the date of issuing this Technical Bulletin more than 50 Nevada patients with COVID-19 infection have been reported to have died due to an association with COVID-19. The official death counts have failed to capture the true number of all Nevadans dying in this pandemic. This expected undercount is mainly the result of inconsistent protocols, limited resources and a patchwork of inconsistent decision-making. Additionally, an accurate estimation was difficult as there is no uniform standard system for reporting deaths caused by COVID-19 infection; related to and/or associated with COVID-19 infections in Nevada. Furthermore, the continued shortage of laboratory testing may continue to hinder case detection and mortality count.

[Death Certificates require](#) an immediate cause and encourage — but do not require — officials to take note of an underlying disease. Underscoring the need for uniformity and reinforcing the sense by health care providers and others that deaths have not been consistently tracked, the Centers for Disease Control and Prevention (CDC) just issued a new guidance for how to certify COVID-19 deaths. This CDC [Guidance for Certifying Death Due to Coronavirus Disease 2019 \(COVID-19\)](#) recommended reporting deaths where the patient has tested positive or, in the absence of testing, “if the circumstances are compelling within a reasonable degree of certainty.”

For More Information: Please contact DPBH M-F 8:00 AM to 5:00 PM at (775)-684-5911. The after-hours line can be contacted at (775) 400-0333.



Lisa Sherych, Administrator
Division of Public and Behavioral Health



Ihsan Azzam, Ph.D., M.D.
Chief Medical Officer



State of Nevada
Confidential Morbidity Report Form (COVID-19)

Updated April 8, 2020

Provider:

Attending Physician	Physician Phone	Physician Fax
Person Reporting / Job Title	Reporter Phone	Reported Fax
Facility Name	Facility Phone	Report Date

Patient:

Name		Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Nonbinary	Race	<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Asian <input type="checkbox"/> American Indian <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other	
Address		County	Sex assigned at birth	<input type="checkbox"/> Female <input type="checkbox"/> Male		
City	State	Zip	Pregnant	<input type="checkbox"/> No <input type="checkbox"/> Yes	Ethnicity	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic
Date of Birth / Age	Parent or Guardian Name		Pregnancy EDC		Primary Language Spoken	
Home Phone	Occupation / Employer / School		Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Unknown	Birth Country and Arrival Date	
Social Security Number	Medical Record Number			Incarcerated	<input type="checkbox"/> No <input type="checkbox"/> Yes	

Disease:

Disease or Condition Name		Admission Date	Deceased	<input type="checkbox"/> No <input type="checkbox"/> Yes
Onset Date	Diagnosis Date	Discharge Date	Date of Death	
Symptoms				
Was laboratory testing ordered?	<input type="checkbox"/> No <input type="checkbox"/> Yes	<i>If yes, attach the results or provide the laboratory name if the results are unavailable</i>		
Was the patient treated?	<input type="checkbox"/> No <input type="checkbox"/> Yes	<i>If yes, provide the treatment details (drug name, dosage, duration, dates etc.)</i>		

COVID-19 Death:

Autopsy performed	<input type="checkbox"/> No <input type="checkbox"/> Yes	Did cardiac/respiratory arrest occur outside the hospital?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Location of death	<input type="checkbox"/> Outside the Hospital (e.g. home or in transit to hospital) <input type="checkbox"/> Emergency Department (ED) <input type="checkbox"/> Inpatient ward <input type="checkbox"/> ICU <input type="checkbox"/> Other (please specify):		

Comments:

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Fax completed forms to:

Carson City: (775) 887-2138
 Clark County: (702) 759-1454

Washoe County: (775) 328-3764
 All Other Areas: (775) 684-5999