

Referring a death to the Coroner

The link that used to make a referral will not change.

www.hullcc.gov.uk/coroner

The Coroners Officer are available to discuss a referral on telephone 01482 613009

When completing the form the fields highlighted in red are mandatory and must be completed. The other fields are not essential, however it would be helpful if you can provide as much information as possible and it may reduce the need for further contact.

On the first screen, you are asked to provide details relating to the deceased.

Civica Coroners - Kingston upon Hull and the East Riding of Yorkshire

Coroner referral

Deceased Details

First name

Surname

Gender

Postcode

Address

Town

County

Postcode

Email address

Nationality

Marital Status

NHS number

Occupation

Alternate name details

Options

Forename

Surname

On the next screen, the details are the type of referral and dates relating to the referral.

The form will be used by GP's, Hospital doctors and staff from the Registration Service selecting the appropriate Referrer Category is important as this impacts on the information you will be asked to provide.

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Coroner referral

Initial details of death

Please select the appropriate Referrer Category in order for the relevant questions to be asked throughout this form

Referrer category

Details of Death

Date reported

If deceased died in hospital choose Standard in the Select Place of Death drop-down menu

Select place of death

Date of birth

Date of death

Time of death

Age at death

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The next the detail are about you as the person making the referral.

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Coroner referral

Referrer Details

Referral Documentation Upload file
No files uploaded yet

Please use the above to upload any relevant documentation

Death reported by

GMC number

Referrer's Details

Email address

Telephone number

Mobile number

Job title

Please confirm your availability for the next three working days

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The next page asks about circumstances relating to the death and the referral

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Coroner referral

Details of death

Circumstances of death

Family information and concerns

Any further information

Type of funeral

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The next page relates to Medical details

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Coroner referral

Medical referral details

MoJ Referral guidance Death notification regulation

Reason for referral:

Detailed reasoning:

Can you issue a MCCD? Yes No

If a cause of death is provided please confirm you have discussed this cause of death with the medical examiner Yes No

GP surgery:

GP name:

Previous medical history:

If YES is selected to the question – Can you issue a MCCD, the additional dropdown boxes will appear. The cause of death can then be selected using drop down boxes provided.

Can you issue a MCCD? Yes No

If a cause of death is provided please confirm you have discussed this cause of death with the medical examiner Yes No

Cause of Death

1a

1a

1b

1b

1c

1c

II

II

Cardiac implant present Yes No Not known

Are there are safeguarding issues? Yes No Not known

Date GP last seen alive:

If this is a Mesothelioma/Asbestos related death please attach a copy of the biopsy results Yes No

Consultant in charge details

Name:

Telephone:

Email:

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The final page relates to Next of Kin

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Coroner referral

Next of Kin Details

Can you provide information on next of kin? Yes No Not known

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If YES selected, the additional information fields will be displayed as below

Next of Kin Details

Title

Forename(s)

Surname

Same address as deceased Yes No Not known

Mobile number

Landline

Email

Relationship to deceased

Have they been informed of this referral? Yes No

Is the next of kin the preferred contact? Yes No

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If Next of Kin is not the preferred person for the Coroners Officer to contact, selecting NO to preferred contact enables you to provide an alternative named contact for the office to use.

Preferred Contact Details

Title

Forename(s)

Surname

Same address as deceased Yes No Not known

Mobile number

Landline

Email

Relationship to deceased

This is the end of the form.

The completed form, showing all details provided is now displayed.

At this stage, you have the ability to edit details in any section, by selecting the edit option shown in blue text, adjacent to the relevant section; or you can submit the form using the Submit button

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Coroner referral

Form about to be sent
Please check the details listed below.

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Deceased Details [Edit this page](#)

First name	Barry
Surname	Blue
Male	
Address	5 Howdale Road
Town	Hull
County	Yorkshire
Postcode	HU8 9FD
Email address	
British	
Single	
NHS number	

After the form has been submitted, the completed form is displayed again and you have the option to Save or Print the details.

An email confirmation of receipt of the form will not be sent, therefore if you wish to retain a copy for your records the form must be saved or printed at this stage

Civica Coroners - Kingston upon Hull and the East Riding of Yorkshire

Death referral

Form sent
Your request has been submitted successfully.
[Save or print these details](#)

Deceased Details

First name	Barry
Surname	Blue
Male	
Address	5 Howdale Road
Town	Hull
County	Yorkshire
Postcode	HU8 9FD
Email address	
British	