

DEATH REGISTRATION FORM FOR ALL IN-PATIENT DEATHS

To be completed following completion of MCCD and discussion with NOK

All deaths are currently being registered remotely, please do not issue MCCD to NOK

		Attach addressograph label or complete below: NAME OF DECEASED					
DATE OF DEATH	Α	DDRESS					
	C	HI					
Has the next of kin been contacted and informed of the certified cause of death and the current process for registering the death?							
-5	YES	If NO KNOWN NEXT OF KIN refer to bereavement.service@nhslothian.scot.nhs.uk					
Which Registration Service will the next of kin be using to remotely register the death? (Death can be registered in any local authority registration office in Scotland)							
City of Edinburgh	East Lothian	Midloth	ian	West Lothian	Out with Lothian (please specify)		
What are the contact details for the person (NOK) who will register the death?							
Name							
Relationship to deceased							
Email address							
Telephone number(s)							
Does the next of kin wish a scanned copy of the MCCD to be sent to them by email and consent to this being sent via non-secure route?							
	YES		NO				
If yes, advise NOK they	nail to	If no, please give NOK the serial number of the MCCD					
bereavement.service@		for reference and advise them that the registrar will					
their relative's full nan request this.	ne and DOB as the	e subject line to	contact them in due course using the contact details above.				
Tick to confirm			Tick to confirm				
Have NOK been given a bereavement information pack and supplementary leaflet on registering death during							
COVID-19 pandemic? Yes / No							
Any other relevant information or needs?							
STAFF NAME		STAFF SIGNATU	IRE	DATE			
Contact no:							

RIE, WGH & SJH: HAND DELIVER THIS FORM AND THE ORIGINAL MCCD TO THE MORTUARY

OPENING HOURS: MON-FRI 8AM -1PM, 2PM-4PM

OTHER SITES: WARD STAFF SCAN AND SEND THIS COMPLETED FORM & THE MCCD TO CHOSEN REGISTRATION OFFICE. CC BEREAVEMENT SERVICE AND DOCUMENT ON REVERSE

Version 4 [June 2020] Owner: Bereavement Coordinators

RECORD OF SCANNING AND EMAILING TO REGISTRARS OFFICE

ACTION	NAME	SIGNATURE	DATE
MCCD and this form received by Mortuary / other sites			
MCCD and this form scanned and emailed to Reg Office & cc'd to Bereavement Service			
Any other comments			

REMEMBER

- **1.** Email to registration office must be sent from an NHS Lothian email account (@nhslothian, @luht, etc). An NHS net account should not be used as this is not a secure email transmission route. Scanned MCCD must be sent in PDF format.
- **2.** Remember to cc. the NHS Lothian Bereavement Service into the email to the registration office: bereavement.service@nhslothian.scot.nhs.uk
- **3.** When sending email to the registration office the subject line should be the full name of the deceased person.

East Lothian Council

West Lothian Council

EMAIL AND POSTAL ADDRESSES TO SEND MCCDS

City of Edinburgh Council

registrars.city@edinburgh.gov.uk
Registration Office
The Quadrangle
253 High Street
Edinburgh
EH1 1YP

haddingtonregistrars@eastlothian.gov.uk
Registration Office
John Gray Centre
15 Lodge Street
Haddington
EH41 3DX

Midlothian Council

registrar@midlothian.gov.uk
Registration Office
Fairfield House
Substitution Rd
Dalkeith
EH22 3AA

registration@westlothian.gov.uk
Registration Office
Civic Centre
Howden South Road
Livingston
EH54 6FF

Contact details for registration offices in other areas can be found at:

https://www.nrscotland.gov.uk/files/registration/RegOfficeContacts.pdf

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