


NF01 * Form	Health Information and Quality Authority Unexpected death of a resident	 Health Information and Quality Authority <small>An tÚdarás Um Fhaisnéis agus Cáilíocht Sláinte</small>
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Section 1. Designated centre details	
Centre name	
Centre ID (OSV)	
Unit or ward name (if applicable)	

Section 2. Resident's details	
Resident's unique identifier [†]	
Is this resident under the age of 18?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Section 3. Cause of death	
Is the cause of death known?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If you have ticked yes , you must state the cause of death:	

* Please complete this form with the Authority's statutory notification guidance. You can download the guidance at www.hiqa.ie

[†] For more information on unique identifiers, please read the Authority's statutory notification guidance

Section 3. Cause of death

If you have ticked **no**, please state:

1. **Why** the cause of death is unknown at this time.
2. **When** the cause of death is expected to be known.

You **must** notify the Authority when the cause of death has been established.

Section 4. Details of death

Date of death		Date death was discovered	
Time of death (as pronounced)		Time death was discovered	
Has this death been referred to the coroner ?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Is a coroner's inquest pending ?			Yes <input type="checkbox"/> No <input type="checkbox"/>

Please include any **additional information** applicable to this notification:

Section 5. Declaration

I, the undersigned, declare that the information I have provided in this notification form is true to the best of my knowledge and belief.

Name (print)	
Position	Person in charge <input type="checkbox"/> Other <input type="checkbox"/>
If you ticked other , please specify your role in the designated centre	
Signed	
Date	
Contact number (during office hours)	

The most secure and convenient way to submit the notification form is through the [HIQA Portal](#).

Should you wish to continue in hardcopy, please return the completed, signed form by email to notify@hiqa.ie or by post to:

Notifications Team

Health Information and Quality Authority

Dublin Regional Office

George's Court

George's Lane

Smithfield

Dublin 7

Tel: 01 814 7400