

# COVID-19 Death Care

## Funeral Directors and Embalmers

Guidance on the safer handling of decedents can reduce the risk of exposure for funeral home staff, health care staff, patients, residents and inmates. The following guidance is based on recommendations from the Ohio Funeral Directors Association, the Centers for Disease Control and Prevention (CDC), and the Ohio Department of Health. Guidance is issued with the understanding that all mentioned resources may not be readily available (such as PPE). **The State of Ohio recommends providing death care as if each decedent could be COVID-19 positive.** Staff should use their best judgement to reduce the risk of exposure when providing death care services.

According to the Centers for Disease Control and Prevention (CDC), bodies of those who die of confirmed or suspected COVID-19 can safely be transported and embalmed. The CDC guidance for funeral home staff emphasizes:

- Use of [Standard Precautions](#)
- Use of [appropriate PPE](#)
- Disinfecting contaminated surfaces using [products with EPA-approved emerging viral pathogens claims](#)

The guidance also notes that if “washing the body or shrouding are important religious or cultural practices, families are encouraged to work with their community cultural and religious leaders and funeral home staff on how to reduce their exposure as much as possible. At a minimum, people conducting these activities should wear disposable gloves. If splashing of fluids is expected, additional personal protective equipment (PPE) may be required (such as disposable gown, face shield or goggles and facemask).”

## Transfers

If you are conducting a removal from a hospital, nursing home, other healthcare facility, or corrections facility, ask about any specific precautions, guidelines or procedures you need to follow beyond what may be outlined below when you arrive. The facility should have the decedent near an exit or in the morgue, ready for transfer. Funeral home staff SHOULD NOT walk through the facility to minimize exposures for patients, facility staff and funeral home staff.

*Note: In coroner cases, funeral homes should seek permission from the coroner’s office prior to using any disinfectant on the remains themselves.*

Perform hand hygiene by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water is not available. Soap and water should be used if the hands are visibly soiled.

1. Follow Standard Precautions, including [donning PPE](#) (e.g., mask, eye protection, gloves, disposable gown).
  - i. If you anticipate splashing or aerosolization of fluids, consider additional PPE (e.g., faceshield or goggles and facemask; respiratory protection).
  - ii. See [CDC recommendations about selecting appropriate PPE](#).
2. Cover the nose and mouth of the decedent with a cloth, soaked with disinfectant.
3. Carefully place body into a body bag, taking care to prevent splashing or aerosolization of fluids, and close it.
4. Disinfect the outside of the bag with a [product with EPA-approved emerging viral pathogens claims](#).
5. [Doff \(take off\)](#) your PPE.

6. Perform hand hygiene by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water is not available. Soap and water should be used if the hands are visibly soiled.
7. The decedent can be moved out of the facility using nitrile gloves.
8. After the decedent is placed in the removal vehicle, remove your gloves and dispose of them immediately. Wash your hands with soap and water for at least 20 seconds or use hand sanitizer.
9. Use nitrile gloves to transfer the decedent from the removal vehicle into the funeral home.
10. After the decedent is in your prep room, remove your gloves and dispose of immediately.
11. Perform hand hygiene by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water is not available. Soap and water should be used if the hands are visibly soiled.

## Embalming

1. Perform hand hygiene by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water is not available. Soap and water should be used if the hands are visibly soiled.
2. Follow [standard precautions](#), including [donning PPE](#) (mask, gloves, disposable gown).
  - i. If you anticipate splashing or aerosolization of fluids, consider additional PPE (e.g., faceshield or goggles and facemask; respiratory protection).
  - ii. Wear appropriate respiratory protection if any procedures will generate aerosols or if required for chemicals used in accordance with the manufacturer's label.
  - iii. Wear heavy-duty gloves over nitrile disposable gloves if there is a risk of cuts, puncture wounds, or other injuries that break the skin.
  - iv. See [CDC recommendations about selecting appropriate PPE](#).
3. Prepare and embalm (e.g., preliminary disinfection, washing, setting features, arterial embalming and aspiration/cavity treatment as needed), taking care to minimize splashing and aerosolization of fluids.
  - i. Take steps to safely conduct aerosol-generating procedures; see [CDC Postmortem Guidance](#).
  - ii. Having all instruments, fluids and equipment out and ready prior to embalming will prevent cross contamination of handles on drawers, cabinets, etc.
  - iii. Place the deceased with the head at the foot end of the table. This will allow drainage to be taken closer to the point of exiting the table. Use of a drain tube is highly recommended. Attach enough hose to reach into the sink, etc. to avoid splashing.
  - iv. Solution strength should be strong. According to a page found on the CDC website, the strength should be between 2-8%
  - v. Pretreat thoracic cavity with cavity fluid or disinfectant. Let sit for 10-15 minutes undisturbed. Thoroughly aspirate thoracic cavity. Reinject cavity fluid.
4. [Doff \(take off\)](#) your PPE.
  - i. Fresh PPE should be donned for other preparation and for cleaning the prep room after embalming has taken place.
5. Perform hand hygiene by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water is not available. Soap and water should be used if the hands are visibly soiled.
6. For other preparation (e.g., dressing, styling hair, applying cosmetics and casketing), appropriate PPE should be used.

## Cleaning Your Prep Room After Embalming

1. Perform hand hygiene by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water is not available. Soap and water should be used if the hands are visibly soiled.
2. Follow [standard precautions](#), including [donning fresh PPE](#) (mask, gloves, disposable gown).
  - i. See [CDC recommendations about selecting appropriate PPE](#).
3. Cleaning should be conducted in accordance with manufacturer's instructions. Products with [EPA-approved emerging viral pathogens claims](#) are expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).
4. [Doff \(take off\)](#) your PPE.
5. Perform hand hygiene by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water is not available. Soap and water should be used if the hands are visibly soiled.

### Other Recommendations

- Embalming experts Wally Hooker and Matt Smith shared recommendations for transfers and embalming for COVID-19 patients; You may view their videos [here](#). Their personal recommendations include guidance that go above and beyond CDC recommendations.

The [CDC guidance](#) represents the *minimum precautions* a funeral professional should take while caring for the body of someone who died of confirmed or suspected COVID-19. You should use your best professional judgement to determine whether you should take additional precautions beyond what is recommended by the CDC.

## Cremation

1. Perform hand hygiene by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water is not available. Soap and water should be used if the hands are visibly soiled.
2. Require identification tag on the outside of the cremation container.
3. Do not open the container to check for jewelry or a pacemaker.
4. Follow [standard precautions](#), including [donning PPE](#) (mask, gloves, disposable gown).
  - i. If you anticipate splashing or aerosolization of fluids, consider additional PPE (e.g., faceshield or goggles and facemask; respiratory protection).
  - ii. Wear appropriate respiratory protection if any procedures will generate aerosols or if required for chemicals used in accordance with the manufacturer's label.
  - iii. Wear heavy-duty gloves over nitrile disposable gloves if there is a risk of cuts, puncture wounds, or other injuries that break the skin.
  - iv. See [CDC recommendations about selecting appropriate PPE](#).
5. Once the cremation process is complete, the cremated remains are sterile and can be handled as usual.

## Funeral/Memorial Services

Since the pandemic began, there have been reports of some individuals becoming ill from attending funerals. No Public Health Order throughout the pandemic has limited or prevented the gathering size for funeral or memorial services, as such each provider has the ability to set their own standards. It is recommended that family and providers practice special precautions to limit the spread of disease. The below strategies are recommended to reduce exposure at these activities.

- Inform the family members that they can consider modified funeral arrangements, such as limiting attendance at funerals held shortly after the time of death to a small number of immediate family members and friends; and then holding additional memorial services when social distancing guidelines are less restrictive.
  - Offer to record and/or live stream events for increased visitor inclusion (music and web casting license available to all funeral homes regardless of membership status through NFDA).
  - At-need and preneed arrangement conferences should be made via telephone calls or other electronic means. In person arrangements should be limited to two people.
- Cemeteries may have established their own requirements/restrictions for graveside service. We strongly encourage communication and coordination with the cemetery.
- Practicing social distancing by maintaining at least 6 feet between attendees, facility staff, and clergy or officiants when in-person services are held. It is not necessary to separate family members who reside in the same household.
  - Educate families and visitors on best practices for social distancing and viral control etiquette (i.e. no hugging, kissing or shaking of hands; creating personal space of 6'; cough into crook of elbow).
  - Utilize rope and stanchion to aid in visitor flow and barrier for family, if desired.
  - Separate chapel chairs for the safety of each attendee.
- Considering modifications to funeral rites and rituals (for example, avoid touching the deceased person's body or personal belongings or other ceremonial objects) to make sure of everyone's safety.
- Wearing cloth face coverings while around others and outside of your home.
  - All funeral home employees must wear face coverings, unless exempted by a medical, safety or practicality concern. Document exemption and maintain in employee file for verification, if challenged.
  - Funeral home visitors are encouraged to wear a face covering, unless specifically documented legal, life, health or safety considerations and limited documented security considerations exist.
  - Funeral homes are not required to provide families/visitors masks, but if supplies can be obtained distribution of masks is encouraged.
- Establish separate funeral home entry and exit doorways.
- Post signs at entrances listing virus symptoms and request those feeling the effects to pay their respects in an alternate manner (i.e. email, written note, phone call to family).
- Place hand sanitizing stations throughout funeral home.
- Limit public calling hours. Provide separate time frame for elderly or immune compromised visitors.
- Temporarily cease catering, food, drinks and receptions. If applicable, remove candy or novelty gifts to keep hands from gravitating to a central dish.
- Restrict access to common areas, such as lounge or reception hall to prevent congregation.
- Sanitize, sanitize, sanitize

## Resources

- Ohio Funeral Directors Association
  - [OFDAonline.org](https://ofdaonline.org)
  - 1-800-589-6332
- National Funeral Directors Association
  - [nfda.org/covid-19/technical-information](https://nfda.org/covid-19/technical-information)
- Centers for Disease Control and Prevention
  - [COVID-19 and Funerals FAQs](#)
  - [Postmortem Guidance](#)
- Ohio's Emergency Operations Center (EOC)
  - 614-799-6500
- Contact your local EMA to request PPE, body bags and other resource assistance
  - [Local Emergency Management Agencies](#)