

TO ALL SMS MEMBERS/ CHIEF DIRECTORATES / DIRECTORATES / REGIONAL / DISTRICT OFFICES, SUB-STRUCTURES / ALL FACILITY MANAGERS/ MUNICIPALITIES / HIGHER EDUCATION INSTITUTIONS / PRIVATE SECTOR

Circular H85 of 2020 Guide on taking fingerprints of decedents with suspected or confirmed COVID-19

1 Introduction

Fingerprints are used in the identification process of decedents. In South Africa, provision is made for fingerprints on the death notification form (DHA-1663) issued by the Department of Home Affairs (DHA).

Transmission of the SARS-CoV-2 (novel coronavirus) can occur in various ways with droplet spread being the most common among the community. However, surfaces can become contaminated with the virus and contribute to the spread. The exact behaviour of SARS-CoV-2 on various surfaces is not clearly documented, and inferences are made from similar viruses such as SARS-CoV. A study has shown that SARS-CoV can be present on paper for four to five days, and SARS-CoV-2 on cardboard for 24 hours. Decontamination of paper is not as easy as other surfaces. It is therefore recommended to limit the use of paper documents where applicable. Proper and safe infection prevention and control procedures can limit the risk of infection from paper documents where there are no alternatives.

In light of the COVID-19 pandemic, the death notification form (DNF) is one of those paper documents that are mandatory and cannot be replaced. Fingerprints on this document are needed for the proper death registration processes to be followed.

This document establishes guidelines on the proper infection prevention and control measures for taking fingerprints of decedents with suspected or confirmed COVID-19 for death notification and registration.

2 Important notice and safety precautions

1. Proper hand hygiene after touching paper documentation is crucial.
2. Alcohol-based hand sanitisers must be available where paper documentation is handled.
3. Gloves can contribute to cross-contamination and is not recommended when handling paper documentation in administrative areas. This does not pertain to the DNF and fingerprint procedures when performing decontamination processes on the body.
4. There should not be any issues with the risk of transmission from the DNF after the decontamination process of the deceased has been done and procedures followed as below ([Annexure A](#)).

3 Requirements: Equipment and Materials

1. A4 sheet protectors/plastic sleeve document cover with a window cut over the thumbprint area ([Annexure B](#)).
2. Body bags.
3. Clipboard.
4. Death notification books/forms (DHA-1663).
5. Disinfecting solution: 70% alcohol for the fingerprints (0.5% hypochlorite (bleach) solution can be used for decontaminating the body).
6. Fingerprint ink, pad or related items.
7. Paper towels - to dry the hands and thumbs before fingerprint procedure.
8. Personal Protective Equipment (PPE).
9. Plastic arm sleeve cover.
10. Plastic sheet or similar.
11. Red medical waste bags.

4 Death notification forms and books

Death notification books containing DNFs (DHA-1663) are available from the DHA. Death notification books are issued from the front offices at the DHA. There are strict control measures around the issuance of these documents. Books are only issued to a registered medical practitioner who visits the front office of their magisterial district with their appointment cards reflecting their practice number.

Should the medical practitioner not be able to present themselves to the front office a representative with a proxy letter from the registered doctor may retrieve new stock while at the same time returning used books.

Dedicated death notification books or forms (where books are not available) should be used for decedents with suspected or confirmed COVID-19.

5 Death notification form preparation

Before commencing with the fingerprint procedure as discussed below the DNF should be appropriately prepared.

1. The authorised person can complete the DNF before placing it in the plastic cover sleeve.
2. Place the DHA-1663 in the A4 sheet protector or plastic cover sleeve.
3. Ensure that there is a rectangular opening over the two thumbprint blocks on the right side of the page ([Annexure B](#)). The closed edge can be used to fold the plastic flap to the inside of the cover sleeve.
4. Where possible the DHA-1663 should be issued on site.
5. If a DHA-1663 cannot be issued on-site, the document is protected by the plastic cover sleeve which can be decontaminated.
6. Wait for the ink to dry on the DHA-1663 before closing the plastic flap or taking the DNF from the plastic cover sleeve. If this is not done the ink will smear rendering the thumbprint useless.
7. When decontaminating the plastic cover sleeve ensure that the rectangular opening is secure to prevent fluid from staining the document. This can be achieved by pinching and lifting the plastic cover near the closed edge of the rectangular opening. The flap will then close. The opening can then further be closed with masking tape/sellotape or similar if needed.
8. Do not douse the plastic cover sleeve in disinfectant solution when the DHA-1663 is in it. Put the disinfectant on a paper towel and then wipe the outside of the cover sleeve. The contact time of disinfectant on the surface should be at least 1 minute.
9. The plastic cover sleeve can be discarded to decrease the risk of contamination.
10. The DNF should be taken out of the plastic cover sleeve when in an intermediate zone.
11. Do not use the same plastic cover sleeve that was used with the body decontamination procedures in the clean administrative areas.
12. Do not handle the DNF with contaminated gloves.

6 Fingerprint procedure

Fingerprints are taken as part of the management of decedent's protocol of decontamination and double-bagging. Thumbprints shall be taken before double bagging to avoid body bags being reopened for this purpose. This can be done by authorised Forensic Pathology Service staff, healthcare workers or undertakers.

A dedicated ink pad or set should be used for suspected or confirmed COVID-19 cases.

Steps:

1. Before handling the body, ensure that all personnel involved are wearing the appropriate Personal Protective Equipment (PPE) as for the management of decedent bodies with suspected or confirmed COVID-19.
2. Spray down the front, back, and sides of the body (and clothing/gown) with the alcohol or bleach solution.
3. Place a plastic sheet on the body to avoid recontamination of the hand while taking the fingerprint.
4. Put a plastic sleeve protector on the arm to prevent contamination of the form from the forearm.
5. The hand and fingertips, especially the thumb, should be manoeuvrable. This might not be easy if rigor mortis (post-mortem stiffening of the body) is present. If rigor mortis is present, it needs to be broken by forcefully straightening the fingers. This can also be achieved by pressing on the finger above the knuckle. The wrist can be bent further towards the inner forearm and pressing the fingers on at a time towards the palm or wrist.
6. A 70% alcohol disinfectant spray/alcohol swab or similar must be available for the fingerprint process. Do not use the bleach solution as this can cause the ink to fade.
7. Ensure that the whole hand of the finger to be printed are thoroughly disinfected.
8. Do one hand at a time.
9. At least two people are needed for the process.
10. Wait for the hand to air dry. This will take approximately 1 minute for alcohol disinfection.
11. Ink the thumb and place the thumbprint on the document.
12. Do the same for the opposite hand.
13. Decontaminate the outside of the plastic cover sleeve containing the DHA-1663.
14. Hand the DHA-1663 over to person wearing clean PPE attire.
15. Place the body in a body bag and seal and continue as per provincial guidelines.
16. Perform hand hygiene

7 References

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Yours Sincerely



DR K CLOETE
HEAD OF DEPARTMENT: HEALTH
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Annexure A: Process of decontamination and the DNF



