

AlfredHealth

Alfred Sandringham Caulfield

Unit:

REQUEST FOR A NON CORONIAL AUTOPSY

UR

Family Name

Given Names

Address

Date of Birth Sex

Female Male Other

Date of Death: / /	Location of Death	<i>Mortuary Use Only</i> CASE NO:
Time of Death: : hrs	Campus:	
	Ward:	Pathologist: Registrar

The Request for Non Coronial Autopsy form is made up of three parts.

Part A is completed by the requesting medical officer and signed by the Person Responsible. It documents formal consent by the Person Responsible to an autopsy request. Autopsy options are explained in detail on page 6. Verbal consent is permitted but the requirements for informed consent still apply.

Part B is completed by the requesting medical officer and provides clinical details for the pathologist.

Part C is completed by the pathologists and documents final authorisation.

Part A: AUTOPSY CONSENT

There are three options concerning an autopsy. Select ONE option only

- Option 1 – Consent to a full autopsy without conditions
- Option 2 – Consent to an autopsy with conditions (tick only those that apply)
- Condition A - Limited autopsy with restricted organ examination

Restrict examination to: <i>Only these organs will be examined or</i>	<input type="text"/>
Exclude examination of: <i>All other organs will be examined</i>	<input type="text"/>

- Condition B - Full autopsy / Limited autopsy on condition of no organ retention
- Condition C - Full autopsy / Limited autopsy on condition of no tissue donation

- Option 3 – No consent to autopsy

Person Responsible Consent: (medical officer must complete if verbal consent is obtained)

Name of the person asked to grant consent (Use block letters)	Relationship to deceased	Date: / /
		Time: : hrs
Signature of the person asked to grant consent (Person Responsible)	Details must be completed by the doctor if verbal consent <input type="checkbox"/> Unable to sign. Verbal consent obtained.	
Consent to an autopsy has been granted by the Person Responsible named above. Autopsy options have been fully explained. Adequate time has been provided to discuss this request. The post mortem process, the reasons for them and the possible outcomes have been explained.		
<input type="checkbox"/> I request a copy of the autopsy report be provided to the family doctor. Provide family doctor details on page 2		

Witness Statement by Requesting Medical Officer

Name of the medical officer witnessing or obtaining consent (Use block letters)	Pager number:
	Telephone:
Signature of medical officer witnessing or obtaining consent	Date: / / Time: : hrs
The Person Responsible has consented to an autopsy. I confirm the options available, the post-mortem process and possible outcomes have been fully explained. I believe the person giving consent has understood my explanation	<input type="checkbox"/> Verbal / Telephone Consent: I confirm verbal consent for the autopsy was obtained. Consent was informed and the person granting consent was unable to sign

Interpreter

Name of professional interpreter, if utilised to obtain consent	<input type="checkbox"/> In person <input type="checkbox"/> Telephone <input type="checkbox"/> Video
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Part B: CLINICAL DETAILS

Requesting Medical Officer Details:

Name of requesting medical officer (In block letters)	Medical Unit
Pager number:	Location (Name of Hospital)
Telephone:	

UR

Family Name

Given Names

Address

Date of Birth Sex Female Male Other

Report Distribution: Report to be sent to

Primary report to: <i>Include full name, unit location and full address if not Alfred Health staff</i>	
Family doctor nominated by Person Responsible: <i>Include full name & practice address</i>	
Additional Copy to:	

Clinical Summary (Provide details & specific questions relating to the death)

Indicate any potential hazards to staff performing the autopsy:			
<input type="checkbox"/> Infectious	<input type="checkbox"/> Radioactive implant	<input type="checkbox"/> Pacemaker	<input type="checkbox"/> Other
Details:			
Clinical sequence of events leading to death:			
1.			
2.			
3.			
4.			
5.			

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Family Name

Given Names

Address

Date of Birth

Sex

Female

Male

Other

Part B: CLINICAL DETAILS Cont.

Specific questions for the pathologist

1.

2.

3.

4.

5.

Provide a summary of the clinical history below including any previous biopsy details

*Advice is available from the duty pathologist in Anatomical Pathology during routine hours Mon – Fri (ph 9076 3150).
Direct general enquiries to the Mortuary (ph 9076 2684) Mon – Fri, 7:30am to 4:30 pm.
Send the autopsy request to the Mortuary as soon as possible. Autopsies are performed Mon – Fri*

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UR	<input type="text"/>
Family Name	<input type="text"/>
Given Names	<input type="text"/>
Address	<input type="text"/>
Date of Birth	<input type="text"/>
Sex	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other

Part C: DESIGNATED OFFICER AUTHORISATION

FOR PATHOLOGY DEPARTMENT USE ONLY

To be completed and signed by the Pathologist Reviewing the Request and Authorising the Autopsy

I, Dr _____,

as Designated Officer of Alfred Health authorise an autopsy on the deceased identified as:

Full Name of Deceased	Date of Birth:	Sex
Family Name: / /	<input type="checkbox"/> Female
Given Names:		<input type="checkbox"/> Male
		<input type="checkbox"/> Other

I acknowledge the autopsy option selected by the Person Responsible is:

- Option 1 – Consent to a full autopsy without conditions
- Option 2 – Consent to an autopsy with conditions
- Condition A Limited autopsy with restricted organ examination
 - Condition B Full Autopsy / Limited Autopsy with no organ retention
 - Condition C Full Autopsy / Limited Autopsy with no tissue donation
- Option 3 – No consent to an autopsy

I am satisfied that consent from a Person Responsible has been appropriately documented on the autopsy request form and that on the information provided to me in the clinical summary this is not a reportable death.

Signature of Authorising Pathologist	Date: / /
	Time: : hrs

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UR	<input type="text"/>
Family Name	<input type="text"/>
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Date of Birth	<input type="text"/>
Sex	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other

General instructions to the medical officer

- Confirm the death is not a reportable death.
- Ensure the person being asked to consent to the autopsy is fully informed about the autopsy procedure and post mortem process. A patient information sheet on hospital autopsy should be provided to the Person Responsible to assist understanding of what is being asked.
- Discuss the autopsy options with the Person Responsible. Ensure it is clear they are free to select option 1, option 2 or option 3 from the autopsy options available to them.
- Document the agreed option on page 1.
- Conditions applying to the autopsy must be clearly indicated. Where a condition on organ retention (condition B) or donation of tissue (condition C) applies please strike out "Full Autopsy" or "Limited Autopsy" to clearly indicate the extent of the autopsy examination agreed to.
- Provide details of doctor(s) to whom copies of the post-mortem report should be sent. Where a family doctor has been nominated by the Person Responsible, please ensure the full name and practice address is provided.
- Ensure consent and witness statements are complete. Verbal (telephone) consent by the Person Responsible is permissible, but the requirements for informed consent still apply. Adequate time and information must be provided to enable the Person Responsible to reach an informed decision. Where verbal consent is obtained, ensure the appropriate boxes have been checked on page 1.
- Complete the death certificate. An autopsy cannot proceed without a signed death certificate being available to the authorizing pathologist.
- Ensure this form and any relevant medical notes are delivered promptly to the Mortuary.

General information about autopsy

- **Benefits gained from an autopsy:** An autopsy provides detailed information about the factors that contributed to the death. Autopsy allows a more complete assessment of a patient's illness and response to treatment. Even where the cause of death seems clear, the deceased may have had medical conditions that were not known during life. The autopsy may identify an undiagnosed infection or cancer, a genetic disorder, complications of treatment, limitations of diagnostic procedures, or side-effects from new therapies.

The information obtained through an autopsy can be important for family members trying to come to terms with the death of their loved one, assists in advancement of medical knowledge and leads to improvements in disease management and treatment.

- **Retention of tissue samples:** In every autopsy, small samples of tissue are taken for microscopic examination by the pathologist. Tissue sampling is an essential part of diagnostic testing. These small tissue samples form part of the medical record and must be retained by pathology.

- **Retention of organs:** In a routine autopsy whole organs are removed and retained to allow for thorough examination. Organs are usually not returned to the body at the end of the autopsy. The Person Responsible can elect to apply a condition on organ retention if they do not want organs to be kept by pathology. This is achieved by selecting option 2 and indicating a condition on organ retention applies.

- **Donation of tissue for medical research:** Sometimes it is very helpful for tissue removed at autopsy to be used later for medical research, education or other medical and scientific purposes. Autopsy tissue donated for such use is governed by strict hospital research and ethics guidelines. Donated tissue will always be treated respectfully and with anonymity. The Person Responsible can elect to apply a condition that retained tissue is for diagnostic purposes only. This is achieved by selecting option 2 and indicating a condition on tissue donation applies.

- **The Person Responsible does not have to consent to autopsy:** A non coronial autopsy is only performed at the request of the family. If the Person Responsible does not want an autopsy to proceed they are able to indicate this by selecting option 3.

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REQUEST FOR A NON CORONIAL AUTOPSY

Autopsy options explained

Option 1 - Consent to autopsy without conditions

Provides consent to a full autopsy without any conditions. All organs will be examined by the pathologist, removed organs may be retained and tissue is donated for potential use in medical research, teaching or other medical and scientific purposes.

In selecting option 1, the Person Responsible acknowledges they;

- Consent to a full autopsy being carried out on the body of the deceased having no reason to believe the deceased expressed an objection to an autopsy on their death.
- Understand the reason for the autopsy examination is to further explain the cause of death and study the effects of disease and treatment.
- Understand that it is necessary for the pathologist to take and retain small samples of tissue or bodily fluids for testing and these are retained by pathology as part of the medical record.
- Understand that in a full autopsy without conditions, organs such as the brain and internal organs, once removed, are retained by the pathologist to enable thorough examination and testing. Organs removed for examination may not be returned to the body.
- Consent to tissue samples, body fluids and organs being removed, examined, tested and retained as required for a thorough post-mortem examination of the deceased.
- Consent to donate any retained tissue, organs or body fluids to the hospital for use in medical research, education or other medical or scientific purposes.

Option 2 - Consent to autopsy with conditions

Provides consent to an autopsy where the Person Responsible elect to apply conditions to the autopsy. Three different conditions can be applied. These conditions are independent of each other. Conditions must be clearly indicated on page 1 of the autopsy form.

Limited Autopsy: Consent to a limited autopsy allows for only nominated organs to be removed and examined. For example, a condition of the autopsy may be to restrict the autopsy to the heart and lungs only. Alternatively consent to a limited autopsy may identify specific organs that are not to be removed or examined. For example all organs can be examined except the brain.

No Organ Retention: Consent to either full autopsy or limited autopsy can impose a condition on the retention of organs by the pathologist. i.e. organs must be returned to the body at the end of the autopsy. Organs must still have small samples taken for testing but only these samples will be retained.

No Donation of Tissue: Consent to either full autopsy or limited autopsy can impose a condition where any organ or tissue removed cannot be used for medical research, teaching or other medical and scientific purposes. Tissue samples will only be used for diagnostic testing.

In selecting option 2, the Person Responsible acknowledges they;

- Consent to an autopsy but with the conditions indicated on page 1 of the autopsy form.
- Have no reason to believe the deceased expressed an objection to an autopsy on their death.
- Understand the reason for the autopsy examination is to further explain the cause of death and study the effects of disease and treatment.
- Understand that where examination is restricted to select organs this may limit the information about the cause of death, the extent of disease and effects of treatment.
- Understand that where return of organs immediately to the body is a condition of autopsy the pathologist may be compromised in the extent of their examination and testing.
- Understand that it is necessary for the pathologist to take and retain small samples of tissue or bodily fluids for testing and these are retained by pathology as part of the medical record.
- Understand that if they choose not to donate tissues or organs the hospital will only use tissue and organs for diagnostic purposes.

UR	<input type="text"/>
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Sex	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other