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## **AP10-01.100 Client Resource – Autopsy Requests Guideline**

### **1. APPLICABILITY**

This document applies to all autopsy requests made by physicians, acute care sites, auxiliary hospitals, Continuing Care, Supportive Living and Facility Living Programs in Alberta.

### **2. PURPOSE**

This document outlines the steps that staff must follow when requesting an autopsy and preparing bodies to be transported to the University of Alberta (UAH), Royal Alexandra (RAH), Foothills Medical Centre (FMC), Alberta Children's Hospital (ACH) or Red Deer Regional (RDRH) hospitals for autopsy services. Refer to provincial and site-specific resources for suspected/confirmed CJD cases.

### **3. PROCEDURE**

#### **3.1. Completing a Digital Request for Autopsy and Consent for Autopsy in Epic**

- A digital Autopsy Request and separate Consent for Autopsy process using Epic is available for requestors of Pediatric and Adult Autopsies at Connect Care facilities in the province of Alberta.
  - For requestors at non-Connect Care facilities, a combined paper consent and test requisition form is manually completed for all autopsies (Refer to 3.2. below).
  - Epic digital ordering is not currently available for Perinatal Autopsy (Refer to 3.2. below).
1. Open the patient chart and select the 'Discharge as Deceased' tab. This will launch the Discharge as Deceased Navigator. This functionality is also available in Outpatient Encounters.
  2. Review and complete eligibility criteria for organ or tissue donation, medical examiner notification, and autopsy.
  3. Click on 'Autopsy Offer Documentation' and indicate that the family accepts the offer for autopsy. This will cause the 'Autopsy Consent Required' and 'Autopsy Order Required' options to populate.
  4. Click on 'Autopsy Consent Required' and complete the digital consent form:
    - i. Add a new digital consent form by clicking on '+ Consent Autopsy'.
    - ii. Click on 'E-Sign', which will open the digital consent form.
    - iii. Complete the form in coordination with the Authorized Representative (next of kin) of the deceased.
    - iv. Obtain digital signatures from the Authorized Representative of the deceased, one Witness, and translator (if applicable). A second Witness is required for telephone consent.
    - v. Digitally sign the form as Requesting Physician/Designate.

- vi. Select the 'Print' icon at the bottom of the form and then click 'Accept'. The print preview window will open. Print a copy of the consent form through the print preview window. Note: A printed copy of the consent form must accompany the decedent to the autopsy facility.
  - vii. Once completed, the digital consent form can be reviewed, edited, and deleted as required. The consent form can be reprinted by reopening the document, selecting the 'Print' icon and closing the document.
  - viii. Return to the Edit Eligibility Considerations section and click the refresh button at the top right.
5. Click on 'Autopsy Order Required' and complete the digital autopsy order:
- i. Prior to entering the order, review the following information using the available links:
    - a. Autopsy Consent and Request workflow
    - b. Autopsy Request Documentation
    - c. Autopsy Consent Documentation
    - d. Autopsy hazards (microbiologic and medication)
  - ii. Enter the Autopsy Request Order
    - a. Complete all available and required fields.
    - b. Clearly state questions to be elucidated at autopsy. Note: Failure to provide adequate information may delay or cancel a request for autopsy.
    - c. For Suspected Infectious Diseases, known infections will be listed in the Autopsy hazards link (see above). List any possible suspected infectious diseases that may not be flagged in Epic.
    - d. Accept and Sign the order. Close the Order Set window.

### 3.2. Completing Paper Consent and Request for Autopsy

- A complete [Autopsy Consent and Consultation Request](#) form is required when requesting an autopsy from a non-Connect Care facility and for all Perinatal Autopsies.
- **Both pages of the form must be signed by all parties after the patient is deceased or stillborn/fetus delivered, not before. Signing prior to patient death will result in the consent being invalid.**
- In order to be accepted the form **must** include the following information:

#### Page 1

1. Include the demographics of the deceased including 2 unique identifiers (see below for acceptable identifiers).
2. Include the ordering physician's name and address where the report should be sent, as well as the name and address of any other physician(s) that would like a copy of the report under "Copy to" if applicable.
3. Indicate date and time of death. Note: for stillbirth this is the date and time of delivery.
4. Complete the Fatalities Inquiry Component.
5. Indicate the relationship of the Authorized Representative (next of kin) to the deceased.
6. Indicate whether a complete or partial examination is requested (examples of partial examinations include: brain only, abdomen only, lungs only etc.) Please be specific.
7. Have next of kin complete the consent for retention of organs/tissue for education and research section.

**Page 2**

1. Include the demographics of the deceased including 2 unique identifiers (see below for acceptable identifiers).
2. Be signed and dated by the legal next of kin of the deceased as listed in order of authority within section II of the information section of the autopsy consent (page 3).
3. Be signed by a witness; two witnesses are required for consent obtained over the phone. Due to concerns regarding conflict of interest, the ordering physician cannot sign as a witness.
4. Include a summary of relevant clinical history and any clinical questions to be elucidated from autopsy.
5. Include information about any communicable diseases the patient may have had such as HIV, Hepatitis, TB, or suspected prion disease.
6. Be signed and dated by the ordering physician.

**3.3. Additional Required Paperwork**

- Copies of the following documents **must** be sent with the body at the time of transport:

<b>Case Type</b>	<b>Required Documents</b>
Perinatal (up to 28 days following birth regardless of gestational age)	<ul style="list-style-type: none"> <li>• Registration of stillbirth (if applicable)</li> <li>• Medical certificate of stillbirth (if applicable)</li> <li>• Physicians Notice of Live birth or Stillbirth</li> <li>• Registration of Death (if live birth)</li> <li>• Medical certificate of death (if live birth)</li> <li>• Consent for Hospital Burial (if Applicable)</li> <li>• Patient care records (If not available in Connect Care)               <ul style="list-style-type: none"> <li>○ Ultrasound reports</li> <li>○ Prenatal records for current pregnancy</li> <li>○ Labor and delivery records</li> <li>○ Mother's hospital chart for current admission</li> <li>○ Infant's hospital chart (if live birth)</li> <li>○ Relevant laboratory investigations (if performed) including: maternal type and screen, maternal serology, maternal serum screen, cytologic testing, gestational diabetes screen, group B strep screen, Fetal/maternal quantification test, hemoglobin A1C, TORCH screen, hemophilia workup</li> </ul> </li> <li>• The <b>original Autopsy Consent and Consultation Request Form</b></li> </ul>
Pediatric (17 years of age or younger)	<ul style="list-style-type: none"> <li>• Medical certificate of Death</li> <li>• Patient Care record (if not available in Connect Care)</li> <li>• The <b>original Autopsy Consent and Consultation Request Form</b> for paper (non-Connect Care) requests or a printed copy of the digital consent form for digital orders.</li> </ul>
Adult (18 year of age and older)	<ul style="list-style-type: none"> <li>• Medical Certificate of Death</li> <li>• Patient care records (if not available in Connect Care)</li> <li>• The <b>original Autopsy Consent and Consultation Request Form</b> for paper (non-Connect Care) requests or a printed copy of the digital consent form for digital orders.</li> </ul>

### 3.4. Identification

- In accordance with the Alberta Health Services Patient Identification Policy, two (2) or more patient identifiers shall be used to verify the patient's identity prior to a health service being provided to verify that the correct patient receives the intended health service.
- In respect to bodies for autopsy, two unique identifiers from the list below need to be attached to the body on a single toe tag, wrist bracelet, or ankle bracelet **before the deceased is transferred from the place of death**. The same 2 unique identifiers should also be present on a label attached to the zipper of the body containment bag before the deceased is transferred from the place of death.
- Acceptable unique identifiers include:
  - The patients first and last name (considered 1 identifier)
  - Unique Lifetime Identifier (ULI)
  - Personal Health Number (PHN)
  - Medical Record Number (MRN)

#### 3.4.1 Identification for Perinatal Cases

- A live born baby shall be labelled with the baby's demographics label on both the baby and the body bag/outer packaging. An additional label including the mother's demographics (name and ULI) indicating "Baby of" should be included on the body bag/outer packaging.
- A stillborn baby or a fetal demise with a requested autopsy is labelled with either:
  - The mother's demographic label indicating "Baby of" or "fetus of" on both the baby and the body bag/outer packaging.
  - Or
  - A stillborn baby may have a generated ULI and can be labelled with their own demographic information on both the baby and the body bag/outer packaging. The naming convention may follow the mother's name with "stillborn of" or baby's given name (if applicable). An additional label including the mother's demographics (name and ULI) indicating "Baby of" should be included on the body bag/outer packaging.

**Note:** For smaller babies a demographic wrist band placed around the abdominal area works well.

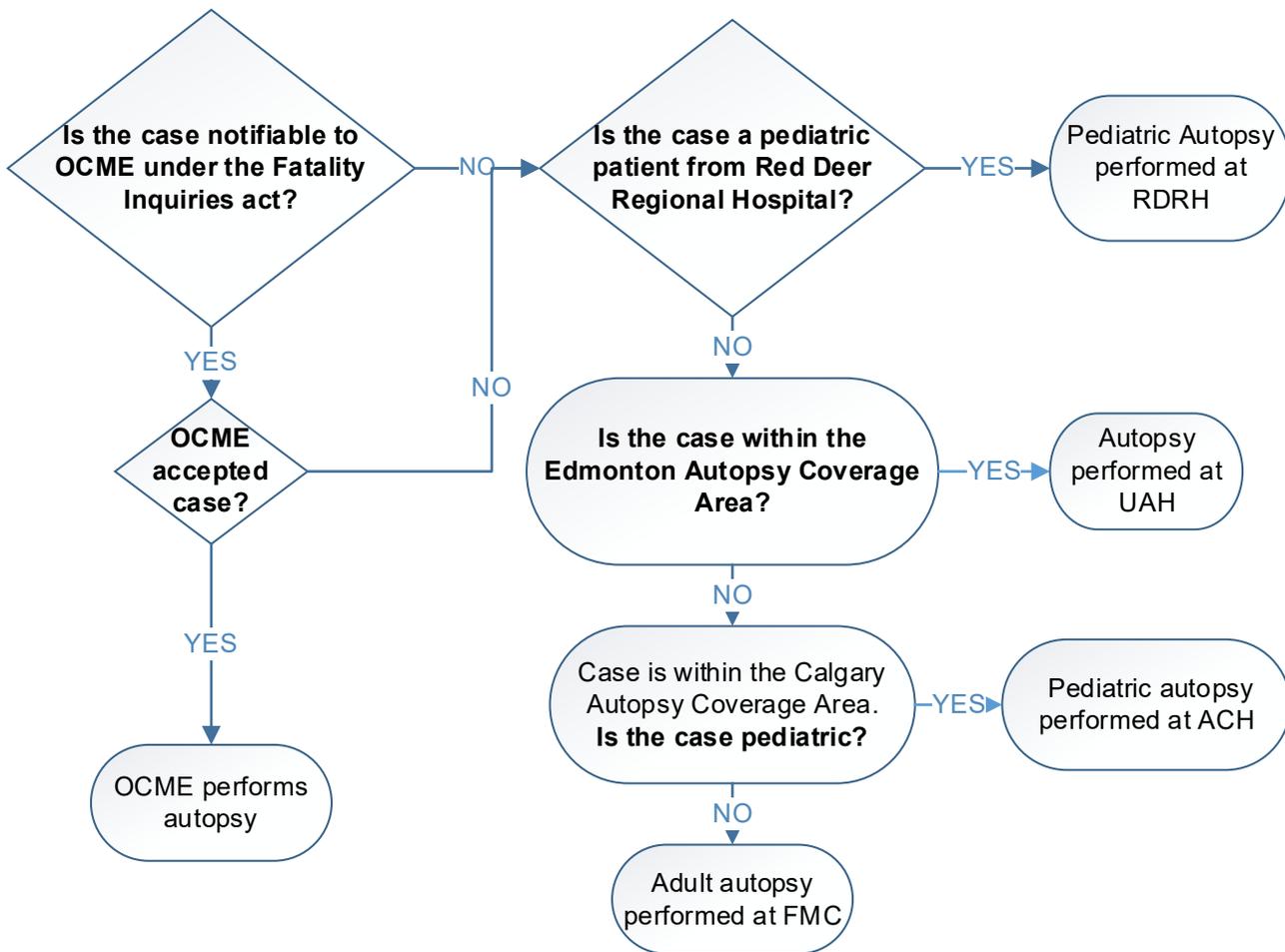
### 3.5. Preparation for Transport

- According to the Bodies of Deceased Persons Regulation under the Public Health Act, bodies must be enclosed in a container as soon as practically possible after the time of death. The container used must be suitable to the condition of the body to contain all body fluids. According to AHS regulations the appropriate container for routine deaths is a body containment bag. The deceased must be placed in a body containment bag at the site of death before transport to any other location.
- Please see AHS *Care of the Deceased: Summary Sheet for Different Types of Body Preparation* or refer to the *Bodies of Deceased Persons Regulation* for instructions on handling non-routine deaths such as Schedule 1 and 2 infectious deaths, and Medical Examiners cases.

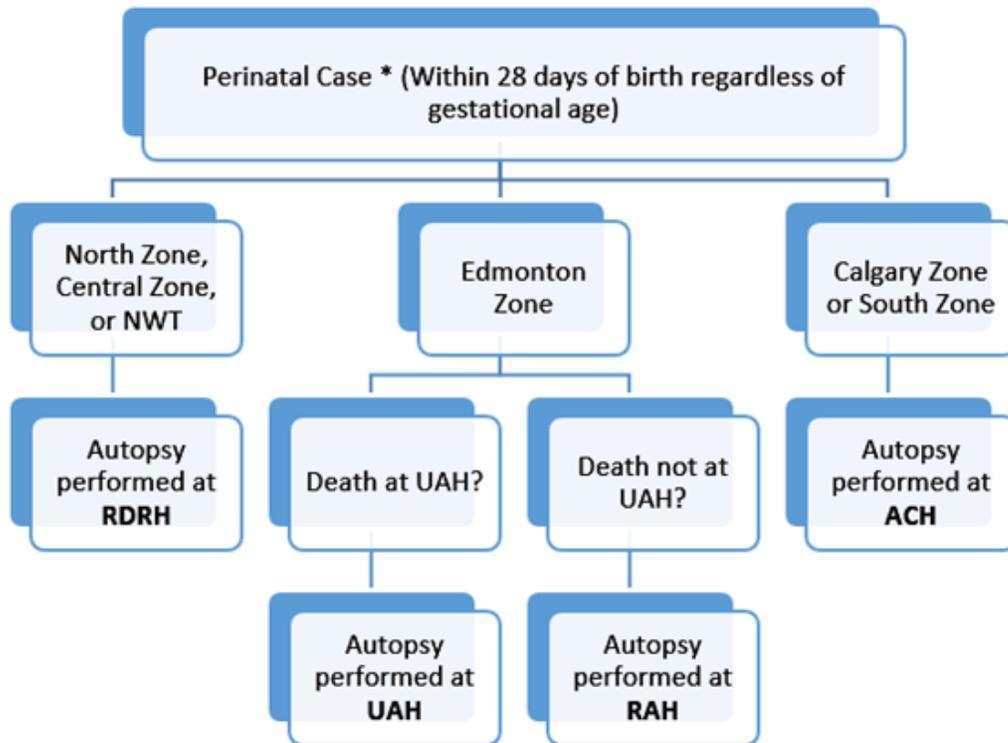
**If there is a patient for autopsy:**

1. Requestor or the Health Information Management (HIM) department (aka: Registration, Admitting, Patient Placement, Vital Statistics) at the originating site to coordinate release of body to autopsy facility. Determine the location where the autopsy will be performed. Refer to below flowcharts *3.4.1.1 Flowchart for Autopsies on Adult and Pediatric Patients* and *3.4.2 Flowchart for Autopsies on Perinatal Patients*.
2. Requestor/HIM at originating site to notify HIM at autopsy facility by phone of incoming autopsy (refer to 3.6 Contact Information).
3. Once confirmation is received from autopsy facility, HIM at originating site to arrange transport of the body with required paperwork to the autopsy facility. If originating site does not have a HIM or patient registration department, the HIM department at the autopsy facility will arrange transportation. Capital Transport Service is used for transport from acute care facilities. The receiving (autopsy) facility will be invoiced for one way transport to their location.
4. After completion of the autopsy, the family of the deceased is responsible for arranging a funeral home to pick up the deceased from the autopsy facility. HIM at the autopsy facility will contact the funeral home when the deceased is ready for pickup.

**3.5.1. Flow Chart for Autopsies on Adult and Pediatric Patients**



### 3.4.1 Flow Chart for Autopsies on Perinatal Patients



#### Additional Information for Perinatal Cases

- **Please send all fetuses under 20 weeks gestation to the laboratory for the appropriate data entry.**
- Fetus 20 weeks gestation and over - Admitting at the performing site (or unit as per site workflow) will complete appropriate data entry. Contact transport service (North 780-444-6799) (South 403-237-8552) or funeral home of choice for transport to appropriate autopsy site.
- Any special testing that requires fresh placenta (ie. Cytogenetics, microbiology, stillbirth protocol) must be collected at the time of delivery and processed at the laboratory at the originating site or wherever the originating site routinely submits such specialty testing.
- The placenta is labelled with the mother's patient demographics, the specimen site (placenta), a biohazard formalin label (if applicable), and sent to Anatomical Pathology at the site performing the autopsy according to the following:
  - ACH: Keep refrigerated until it can be sent fresh.
  - RDH: Send in 10% formalin. If formalin unavailable, keep refrigerated until it can be sent fresh.
  - RAH: Send in 10% formalin. If formalin unavailable, keep refrigerated until it can be sent fresh.
- Indicate within the "Clinical Information" section on the paper requisition or within the "Pathology Comments" section in the EPIC order that an autopsy has been requested.
- A surgical pathology order must be placed for the placenta under Mom's ULI.

## Handling Instructions for Fetus and Placenta:

If	Then	
Fetus with/without placenta 20 weeks gestation and over	<b>If</b> Autopsy requested	<b>Then</b> Complete an <a href="#">Autopsy Consent and Consultation Request form</a> and fax the completed consent form to the performing autopsy site. Refer to <a href="#">Test Directory</a> to determine appropriate performing autopsy site. Create a surgical pathology order for the placenta and fetus.  Transportation of the fetus and placenta is arranged via the delivery unit/security/admitting of the sending facility. Should not be received in laboratory or sent to Edmonton base lab or Calgary DSC.
	Autopsy is not requested	Create a surgical pathology order for the placenta and forward the specimen to the lab.  For fetus: follow release protocols as per parents' wishes to either community burial program or release to a funeral home.
Fetus with/without placenta less than 20 weeks gestation	<b>If</b> Autopsy requested	<b>Then</b> Complete an <a href="#">Autopsy Consent and Consultation Request form</a> and fax the completed consent form to the performing autopsy site. Refer to the <a href="#">Test Directory</a> to determine appropriate performing autopsy site. Send the fetus and placenta to the laboratory. Create a surgical pathology order for the placenta and fetus.
	Autopsy is not requested	Create a surgical pathology order for the placenta and forward the specimen to the lab.  For fetus: follow parents' wishes for release. If there are no release requests, then both the fetus and placenta can be sent together to the laboratory.
The originating site is <b>not</b> live on Connect Care	Complete a paper <a href="#">Anatomical Pathology Requisition (Consultation Request)</a> and send with the placenta to the AP department at the site performing the autopsy	

### 3.6. Contact Information

#### 3.6.1 HIM Registration/Admitting (Vital Statistics) Department Contacts

First point of contact for requests for and questions regarding Adult, Pediatric, and Perinatal autopsy.

Site	Phone	After Hours
UAH	780-407-8422	780-445-8422
RAH	780-735-4120	780-735-4120
RDRH	403-343-4777	403-343-4422
ACH	403-955-2530	403-955-7212
FMC	403-944-1689	403-944-1483

#### 3.6.2 Alberta Precision Laboratories Autopsy/Pathology Department Contacts

For questions regarding autopsy not answered by HIM, call the performing site Autopsy/Pathology Department Monday through Friday during regular working hours. For after-hours calls, leave a message and staff will return your call during regular working hours (see note for ACH below regarding after-hours inquiries).

Site	Phone	Fax	Pager	Email
UAH	780-407-8936	780-407-3009	780-445-5374	<a href="mailto:Autopsy.UAH@albertahealthservices.ca">Autopsy.UAH@albertahealthservices.ca</a>
RAH	780-735-4629	N/A	780-445-5281	<a href="mailto:Autopsy.RAH@albertahealthservices.ca">Autopsy.RAH@albertahealthservices.ca</a>
RDRH	403-343-4729	403-358-4307	N/A	N/A
ACH	403-955-7305	403-955-7025	N/A	N/A
	ACH - For any inquiries outside of regular working hours and on weekends, please contact the Pediatric Pathologist on call by calling the ACH switchboard at (403-955-7211)			
FMC	403-944-1369	403-944-5050	N/A	<a href="mailto:APL.Calgaryautopsy@albertaprecisionlabs.ca">APL.Calgaryautopsy@albertaprecisionlabs.ca</a>

## 4. REFERENCES

1. [PS-06 Alberta Health Services Patient Identification Policy](#)
2. [Public Health Act - Bodies of Deceased Persons Regulation \(Alberta Regulation 135/2008\)](#)
3. Care of the Deceased: Summary Sheet for Different Types of Body Preparation

## 5. RELATED DOCUMENTS

- [Autopsy Consent and Consultation Request](#)
- [Genetic Investigation of Stillbirth or Fetal Loss Information for Ordering Physicians \(albertahealthservices.ca\)](#)
- [Anatomical Pathology Requisition \(Consultation Request\)](#)

6. APPENDIXES

6.1. Adult Autopsy Coverage Map:

