



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 the Edmonton and North Zones.

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), or Red Deer Regional (RDRH) hospitals for autopsy services.

Procedure

Consent

A complete *Autopsy Consent and Anatomic Pathology Autopsy Consultation Request* form is required when requesting an autopsy. In order to be accepted the form must include the following information:

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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 physicians that would like a copy of the report under "Copy to" if applicable.
3. Indicate date and time of death.
4. Complete the Fatalities Inquiry Component.
5. Indicate the relationship of the 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.

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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 consents 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 suspect prion disease.
6. Be signed and dated by the ordering physician.

Both forms 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.



Additional Required Paperwork

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

Case Type	Required Documents
Perinatal (up to 30 days following birth regardless of gestational age)	<ul style="list-style-type: none"> • Registration of stillbirth (if applicable) • Medical certificate of stillbirth (if applicable) • Physicians Notice of Live birth or Stillbirth • Registration of Death (if live birth) • Medical certificate of death (if live birth) • Burial Permit • Burial Consent for Stillbirth and Neonatal (if applicable) • Consent for Hospital Burial (if Applicable) • Patient care records (If not available in Connect Care or autopsy is taking place at RDRH) including: <ul style="list-style-type: none"> ○ Ultrasound reports ○ Prenatal records for current pregnancy ○ Labor and delivery records ○ Mother’s hospital chart for current admission ○ Infant’s hospital chart (if live birth) ○ Relevant laboratory investigations (if performed) including: maternal type and screen, maternal serology, maternal serum screen, cytologic testing, gestational diabetes screen, group B strep screen, Kleihauer-Betke test, hemoglobin A1C, TORCH screen, hemophilia workup • The original autopsy consent form
Pediatric (17 years of age or younger)	<ul style="list-style-type: none"> • Medical certificate of Death • Patient Care record (if not available in Connect Care) • The original autopsy consent form
Adult (18 year of age and older)	<ul style="list-style-type: none"> • Medical Certificate of Death • Patient care records (if not available in Connect Care) • The original autopsy consent form

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, 2 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:

1. The patients first and last name (considered 1 identifier)
2. Unique Lifetime Identifier (ULI)
3. Personal Health Number (PHN)
4. Medical Record Number (MRN)



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 is labelled with the Mother's demographic label indicating "Baby of" on both the baby and the body bag/outer packaging. For smaller babies a demographic wrist band placed around the abdominal area works well.

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.

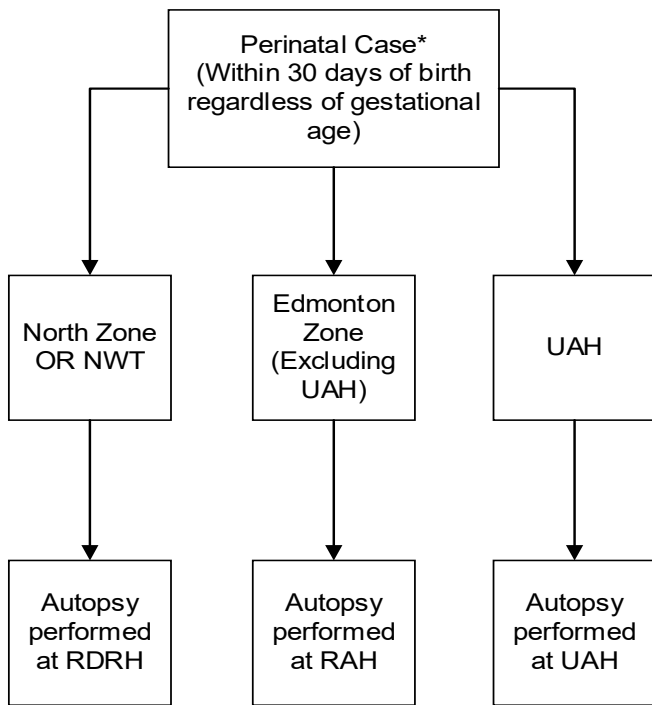
Please see AHS *Care of the Deceased: Summary Sheet for Different Types of Body Preparation* or refer to the *Bodies of Deceased Persons Regulation* for instructions on handling non-routine deaths such as Schedule 1 and 2 deaths, and Medical Examiners cases.

Transportation will be arranged by the originating site once confirmation is given by autopsy staff. The originating site will be billed for the cost of transportation. If there is a patient for autopsy:

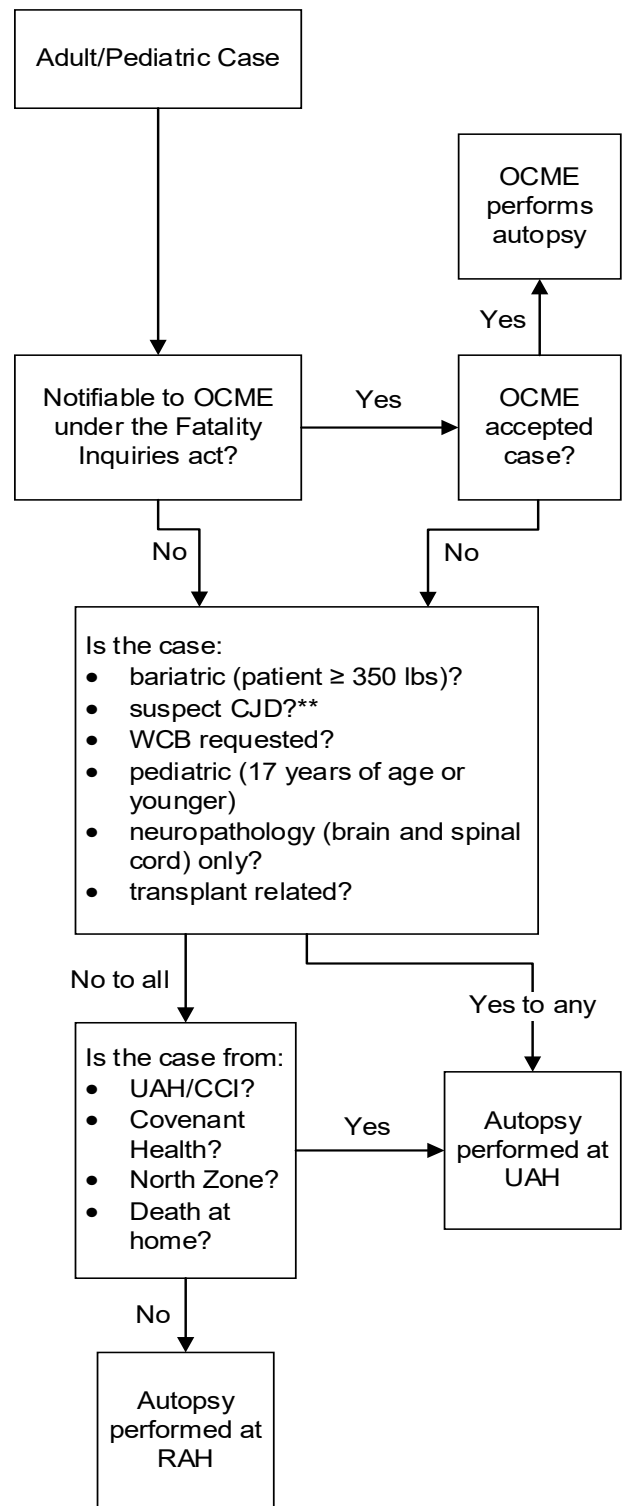
1. Determine the location where the autopsy will be performed (see flowchart below).
2. Call the performing site and notify of autopsy case.
3. Fax the completed *Autopsy Consent and Autopsy Consultation Request* form to performing site.
4. Once confirmation is received from autopsy staff, arrange transport of the body to the performing site.



Autopsies are assigned using the following flowchart:



*See next page for additional information for perinatal cases





Additional Information for Perinatal Cases

For perinatal cases, the placenta should also be sent to the laboratory. Any special testing (ie. Cytogenetics, microbiology, stillbirth protocol) that the attending physician wants performed on fresh placenta 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 should then be placed in formalin, labelled with the mother’s patient demographics label, the specimen site (placenta), a biohazard formalin label, and sent to Anatomical Pathology at the site performing the autopsy. A surgical pathology order must be placed for the placenta under Mom’s ULI:

If:	Then:
The originating site is live on Connect Care and sending the placenta to UAH or RAH	Place an order for the placenta for surgical pathology in EPIC as per your routine processes.
The originating site is not live on Connect Care and is sending the placenta to UAH or RAH	Complete a paper Anatomical Pathology Requisition and send with the placenta to the AP department at the site performing the autopsy
The placenta is being sent to RDRH	An Anatomical Pathology Requisition is not needed. Prepare the placenta according to the additional information above. Send to the AP department at RDRH along with the body for autopsy.

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.

Contact Information

During working hours (0800-1615, Monday through Friday)

Site	Phone	Fax	Pager
UAH	780-407-7444	780-407-2131	780-445-5374
RAH	780-735-4629	780-735-6776	780-445-5281
RDRH	403-343-4729	403-358-4307	N/A

Outside of working hours (1615-0800 M-F, weekends and statutory holidays)

Site	Contact Information
UAH / RAH	Call UAH switchboard (780-407-8822) and ask for Resident on call for Anatomic Pathology.
RDRH	Contact accession room (403-343-4729) and leave a message. Staff will return your call during regular working hours Monday to Friday 0730 – 1545.

References

Alberta Health Services Governance Documents

Alberta Health Services Patient Identification Policy (#PS-06)

Care of the Deceased: Summary Sheet for Different Types of Body Preparation

Autopsy Consent and Autopsy Consultation Request (CH-0275)

[Regional Edmonton and North Zone Autopsy Triage Process \(RAPAU00006MUL\)](#)

Non-Alberta Health Services Documents

Public Health Act - Bodies of Deceased Persons Regulation (Alberta Regulation 135/2008)