

Name of Policy: <u>Indications for Autopsy</u> Policy Number: 3364-100-53-17 Department: Hospital Administration Medical Staff Approving Officer: Chief Executive Officer Chief of Staff Responsible Agent: Vice President Clinical Services Scope: The University of Toledo Medical Center and its Medical Staff	 <p>Effective Date: 4/1/2019 Initial Effective Date: October 9, 1996</p>
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Major revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy	

(A) Policy Statement

Medical staff members are required to attempt to secure permission to perform autopsies in certain cases. In all other cases there shall be general guidelines used to identify deaths for which an autopsy is recommended. Permission to perform an autopsy must be documented and the attending physician must be notified of when the autopsy will be performed.

(B) Purpose of Policy

To identify requirements and guidelines for when an autopsy should be performed, to define how to document permission to perform the autopsy, and to require that the attending physician be notified of when the autopsy will be performed.

(C) Procedure

(1) The following indications for autopsy shall be observed pursuant to policies, procedures, and protocols as established by the University of Toledo Medical Center (UTMC) in general, and/or the Department of Pathology in particular.

- a. Deaths in which an autopsy could explain unknown or unanticipated medical complications.
- b. All deaths in which the cause is not known with certainty on clinical grounds.
- c. Deaths in which an autopsy could allay concerns of the public/family regarding death to provide reassurance to them regarding the same.
- d. Any unexplained/unexpected deaths from any dental, medical or surgical diagnostic procedures and/or therapies.
- e. Deaths of patients who participated in clinical trials approved by the Institutional Review Board.
- f. Unexplained/unexpected deaths apparently natural and not subject to a forensic medical jurisdiction.
- g. Natural deaths which are subject to and waived by a forensic medical jurisdiction such as:
 - i. Persons arriving DOA at the hospital;
 - ii. Deaths occurring in the hospital within 24 hours of admission;
 - iii. Deaths in which a patient sustained or apparently sustained injury while in the hospital.
- h. Deaths resulting from high risk, infectious and contagious diseases.
- i. All neonatal and pediatric deaths.
- j. Death at any age when an autopsy could disclose a known or suspected illness which also may have a bearing on survivors or recipients of transplanted organs.
- k. Known or suspected deaths arising from environmental or occupational hazards.
- l. Any death in which an autopsy could contribute to further understanding of disease processes of the patient or to the further evaluation of medical care received by the patient.

- (2) Medical staff members are required to attempt to secure permission to perform autopsies in all cases of:
- a) unusual deaths;
 - b) medical-legal interest; and
 - c) educational interest.
- (3) Permission to perform an autopsy shall be documented using UTMC’s Authorization for Post Mortem Examination, which is UTMC form number PL001.
- (4) The pathologist, or designee, will notify the patient's attending physician, or designee, when the autopsy will take place.

<p>Approved by:</p> <p><u>/s/</u> _____ <u>05/30/2019</u> Daniel Barbee, MBA, BSN, RN, FACHE Date Chief Executive Officer</p> <p><u>/s/</u> _____ <u>05/30/2019</u> Samer Khouri, MD Date Chief of Staff</p> <p><i>Review/Revision Completed By:</i> HAS Pathology Chief of Staff</p>	<p>Review/Revision Date: 4/11/01 7/13/04 8/8/07 10/12/2010 10/12/2012 4/1/2016 4/1/2019</p> <hr/> <p>Next Review Date: 4/1/2022</p>
<p>Policies Superseded by This Policy: 7-53-17</p>	