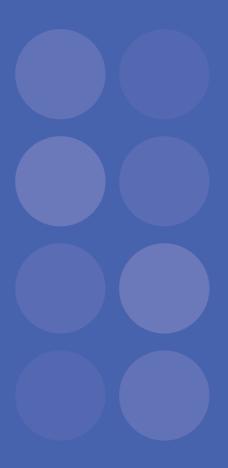


Post-Mortem Examination of an Adult

Information Leaflet



Summary

The post-mortem examination is an important medical investigation to try to find the cause of a person's death.

The person's own wishes should take priority about whether or not post-mortem examination takes place.

If the person asked someone else to make such decisions (a nominated representative), he or she will be asked to consider authorising a post-mortem examination.

If the deceased left no instructions and there is no nominated representative, the nearest relative will be asked whether he or she wishes to authorise a post-mortem examination. There are rules that set out who the nearest relative is.

Ideally, the post-mortem examination should take place within two or three days of death.

The person's face, hands and feet are not normally affected by the post-mortem examination.

Relatives should be able to see the body again after the post-mortem examination.

The final results of the examination should be available in 30 days in the majority of cases and a copy of the pathologist's report is sent to the deceased's general practitioner. Unless the deceased did not wish this, a copy of the pathologist's report can be requested by the nominated representative or nearest relative.

Whole organs will only be kept if the deceased person authorised this or there is authorisation from the nominated representative/nearest relative.

If the nominated representative/ nearest relative does not wish to authorise a full post-mortem examination, there may be other tests that could be done. This should be discussed with hospital staff.

Ask as many questions as you wish.

Information about post-mortem examinations

We understand that this is a very difficult time for you and it may be hard to think about a post-mortem examination. This leaflet has been written (with the help of other bereaved relatives) to give you clear information about the reasons for carrying out a post-mortem examination, and what you would need to decide.

About the authorisation form

The authorisation forms are based on the requirements of the Human Tissue (Scotland) Act 2006. Unless the postmortem examination has been ordered by the Procurator Fiscal, authorisation is needed for a post-mortem examination to be carried out. If the deceased was an adult, or a child aged 12 or over, and has left clear instructions that he or she authorises a post-mortem examination saying what can be done with his or her body, these instructions must be respected. If he or she had authorised a post-mortem examination, the law in Scotland now allows it to take place, whatever views others may have.

The deceased may have chosen what the 2006 Act calls a nominated representative to make such decisions instead. If the hospital knows who this person is, he or she will be asked whether or not a post-mortem

examination should go ahead. The nominated representative has the right under the law to authorise a post-mortem examination whatever views others may have.

If the deceased left no instructions and did not nominate someone else to make these kinds of decision, the nearest relative (or a person with parental rights and responsibilities in the case of a child aged 12 or over) will be the person who is asked to consider authorising a post-mortem examination. There are rules which set out who the nearest relative is, and these will be explained to you. You should let hospital staff know if you think there is a nearer relative than you, or if there are other people who you think should be involved in making this kind of decision.

If you have been given this form, it is because the hospital thinks you are the deceased's nominated representative or nearest relative and that you are the person who should be asked whether or not to authorise a post-mortem examination. The form means there is written record of your decisions, making it clear to everyone what you have, or have not, agreed to. If you change your mind before the post-mortem has taken place, you can withdraw your authorisation, even after signing. The hospital staff will tell you how much time you have in which to do this, and who you should contact.

Important: before reading any more of this leaflet, are you sure you are the person who should be asked to authorise the post-mortem examination? If you are not sure you are the person's nominated representative or nearest relative, please check with hospital staff.

What do I need to know?

People have different views on how much or how little information they want about a post-mortem examination. It's up to you.

You may not want to know anything about the post-mortem examination. This leaflet gives basic information. But if you would like more detail, you can have a discussion with a health professional, such as a pathologist. Or there is a second leaflet with more detailed information about what is involved in post-mortem examinations. Let us know if you want to see this.

Why carry out a post-mortem examination?

A post-mortem examination can provide information about the illness or other cause of a person's death. Sometimes families ask questions that can only be answered with information from a post-mortem examination. It is also possible that the information from it may benefit other families who suffer from similar problems in the future. The post-mortem findings are also very important for the

staff who cared for the person who has died. They can use the knowledge to learn about disease and possibly help others in the future. A post-mortem examination cannot always provide a reason for the death, but the main reasons for performing one are to:

- discover the nature of the illness if this is not already known;
- give more information about the cause of death;
- identify conditions that may not have been diagnosed;
- identify complications or side effects of treatments and drugs; and
- diagnose conditions that might affect other members of the family.

When is a post-mortem carried out?

Post-mortem examinations are usually carried out within 1-3 working days of death occurring. They take place in the mortuary. If because of the person's religion a funeral must take place within 24 hours, please let us know and we will try to undertake the post-mortem within this time.

The notes below follow the order of the sections in the authorisation form for post-mortem examination.

Section 1

Authorisation of a post-mortem examination

What happens in a full post-mortem examination? (Section 1A)

A full post-mortem examination includes an external and an internal examination. It is done with the same care that would be used if the person were having an operation. Small tissue blocks and slides, photographs and X-rays are made and will be kept as part of the medical record. The person's face, hands and feet will not be affected by the examination and you should be able to see the body afterwards if you wish.

Are there different options available? (Section 1B)

If you do not want to agree to a full postmortem examination, you might consider a limited examination. The doctor or other health professional who discusses the post-mortem with you will be able to explain what the options are. Usually, it means that only certain parts of the body are examined, and the form sets out the choices. Tissue blocks and slides, photographs and X-rays may be made in the same way as for a full post-mortem examination.

However, limited examinations provide only limited information about cause of death or illness. A full post-mortem examination will always provide more information

Since the person's own wishes about what he or she wished to happen have most importance, you will be asked if you know whether the deceased left any instructions about post-mortem examination, or if you think he or she would have objected to it. If there were instructions, these will be checked and if the deceased objected then the post-mortem examination would not take place.

What can be done with the medical record?

Tissue blocks and slides, photographs, X-rays and other images taken during the post-mortem examination will form part of the person's medical record. Unless the deceased had objected to information being shared with the family, they may be useful for the family in the future, perhaps to diagnose conditions in other family members or if more information becomes available about the condition the person had.

The medical record can also be used for education and audit. Education includes teaching and training doctors, nurses and professionals so they can provide the best care for patients in the future. Audit means checking the quality of care, procedures and tests to make sure they continue to meet the highest standards.

The medical record can also be used for research that may benefit other patients. For example, when a new disease or health problem emerges, examining tissue on a wide scale may provide clues about how and why the disease emerged and how to respond.

If any photographs could identify the person, they will not be used unless the deceased person had already authorised this use, or you give your authorisation. If extra tissue or images are requested specifically for education, audit or research, you will be asked to give separate permission for this, again unless the deceased person had already authorised this to be done.

What are tissue samples, blocks and slides?

Some information can be obtained from looking directly at organs and tissues in a post-mortem examination, but often the only way to understand properly what has happened is to look at small tissue samples under the microscope. These samples are very small, slightly thicker but usually no larger than a postage stamp.

Section 2

Retention and examination of whole organs

Will any organs be kept?

There may be benefits in keeping a whole organ to carry out a more detailed examination. This will usually be the case if there is an abnormality of the brain or if the deceased person had suffered from a brain disorder or dementia. Sometimes the pathologist may need to examine a brain or other organs with an inborn abnormality. Organs will not be retained unless the deceased authorised it, or you give your authorisation.

If this is discussed with you, there are a number of other points to consider. The form sets out the types of organ that could be kept, and the ways in which they could be used. If the person left instructions about these matters, the hospital will follow these instructions.

Where organs are not being kept indefinitely, the person discussing the form with you will explain any wishes the person left, or, if there were none, will ask you what should happen.

Section 3

Other requests or conditions

Can I make any conditions?

If you wish to make any special request or condition, please say so. For example, there may be religious obligations that you need to have followed, or you may wish to allow organs to be used for some sorts of research but not others.

General Questions

What happens after the examination has been completed?

Great care is taken during and after the examination so that the body can be seen, dressed in his/her own clothes. The skin and colouring will naturally change after death, even if a post-mortem examination has not been carried out.

Can I find out the results of the post-mortem?

Yes, unless the deceased wished his or her medical information to remain confidential. The pathologist will write a preliminary report within 2 days and will aim to send a final report to the doctor who had been caring for the person within 30 days. This may take longer in complex cases. A copy will go to the deceased's general practitioner (GP). You may be offered an appointment to discuss the results, or you

may wish to see the GP. You can ask for a report written in language you can understand.

What should I know before deciding?

The hospital staff should make sure you have enough information to decide if you wish to give your authorisation. They will discuss the choices with you. It is important that you understand what is involved, and come to your own decision. They will ask you to say whether you have understood the information you have been given and feel able to make a decision. If you are not sure, please say so.

What if I change my mind?

If you change your mind before the postmortem has taken place you can withdraw your authorisation, even after signing the form. Ask the hospital staff to tell you how much time you have in which to do this. If you authorise the use of the medical record or organs, that authorisation can be withdrawn at any time unless the medical records or organs have already been used for authorised purposes.

How long do I have to decide?

You should take as much time as you need to make a decision, although there is a time limit because of changes that take place after death naturally. You may wish to discuss things with your spiritual adviser. There are also some tests that are better done sooner rather than later.

We hope this information is helpful but please ask if there is more information you need.

