

End-of-Life
Care Resources

Post Mortems



The information below is from the Hospice Friendly Hospital Programme's *Map for End-of-Life Care*

Post Mortems

A post mortem (also called an autopsy) is the medical examination of a person that takes place after death. There are two types of PM examinations:

A Hospital PM

- Carried out by the hospital pathologist
- Usually initiated by a request from the medical team
- In some cases, requests may be initiated by the family themselves
- Consent is required – this must also cover possible organ/tissue retention

Communicating with families should include:

- Consent
- Reason for the request for the PM
- Where the PM will take place, how long it will take and whether it will delay the funeral
- Families may request a limited PM confined to certain areas
- Possibility of and reason for organ and/or tissue retention (e.g. for a more detailed examination) & how they will be informed of any such retention – note consent is required
- What might be contained in the PM record e.g.
 - Tissue samples on slides/wax blocks
 - X-rays/clinical photographs
- How the deceased person will look after the procedure
- Options regarding the return of organs/tissues to families or respectful disposal by cremation/burial by the hospital (see Code of Practice for options)
- How the death is registered
- When the results will be available
- PM report - the family should be offered a meeting with the hospital team/consultant requesting the PM

A Coroner's PM

- Carried out by a pathologist who acts as the Coroner's agent
- Consent is not required (as this is a compulsory PM under the law). However families will be asked to complete an acknowledgement form in relation to the information they have been given
- Formal identification must be carried out by a member of the family (or a designated family member) to the Garda Síochána
- All medical equipment must be left on the patient's body, unless permission to do otherwise is given by the Coroner

Communicating with families should include:

- Garda involvement – see above
- Coroner's reason for ordering the PM
- Where the PM will take place, how long it will take and whether it will delay the funeral
- Possibility of and reason for organ and/or tissue retention (e.g. for a more detailed examination) & how they will be informed of any such retention
- What might be contained in the PM record e.g.
 - Tissue samples on slides/wax blocks
 - X-rays/clinical photographs
- How the deceased person will look after the procedure
- Options regarding the return of organs/tissues to families or respectful disposal by cremation/burial by the hospital (see Code of Practice for options)
- How the death is registered by the Coroner
- When the results will be available
- PM report – contact the Coroner's office re. local arrangements
- Also. the family can request the Coroner's report from the Coroner is sent to the GP

Apart from informing families regarding the possibility re. organ/tissue retention, it may not be appropriate to give all of this information at one time. A contact person should be identified who can support the family through the whole process.

Records of discussions & information given should be documented in the patient's healthcare record.

When to report a death to the coroner *

- The general rule is that all sudden, unexplained, violent deaths and death which is due directly or indirectly to any unnatural cause must be reported to the Coroner
- If a doctor has any doubt in the matter, contact the district coroner
- Refer to the HSE's Code of Practice for Post Mortem Services for full details on reportable deaths

* Please note that reporting a death to a coroner does not necessarily mean a post mortem examination will be carried out.

Insert
hospital specific
information