CLINICAL POLICY
Autopsy Services

A. **EFFECTIVE DATE:**
   July 30, 2020

B. **PURPOSE:**
   To clarify areas of responsibility at time of death to ensure that autopsy services are carried out.

C. **POLICY:**
   The pronouncing physician, APRN or PA is responsible for evaluating whether the death falls within the domain of the Medical Examiner, and if not, to determine if a hospital autopsy is to be performed.

D. **SCOPE:**
   This policy applies to all Inpatient, ED, Perioperative, and Ambulatory Procedure Locations

E. **DEFINITIONS:**
   NA

F. **MATERIAL(S) NEEDED:**
   Permission for Autopsy Form (HCH-129)

G. **PROCEDURE:**
   1. Upon the death of a patient, the pronouncer should determine whether the case might fall within the domain of the Medical Examiner. (See HAM #07-011).

   2. If it is determined that the Medical Examiner need not be notified, or the Medical Examiner refuses the case and/or certifies the case without their office performing an autopsy, the family should be asked by the pronouncer if they wish to consent to a hospital autopsy.

   3. If two or more persons assume custody of the body, consent by one is sufficient. There is no charge for the autopsy performed by our staff at UConn Health. If the family exercises their right to have the autopsy performed in a non-affiliated institution or if the family decides to have the autopsy done here, but by a non-affiliated physician, the family will incur any cost related to that autopsy.

   4. In compliance with Public Act 99-72, any person authorized to consent to an autopsy under Section 19a-286 of the general statutes, may require that if an autopsy is performed, it be performed by, or attended by a physician who is not affiliated with the institution where the deceased expired. Public Act 01-122 also gives the authorized person the right to have the autopsy done at a non-affiliated...
institution. The person giving consent for the autopsy may give consent in writing or via telephone, electronically, by mail, or by courier and this is documented and filed in the medical record of the deceased. The record of the telephone consent and the acknowledgement of receipt of the hospital’s Patient Bill of Rights is included on the Permission for Autopsy form (HCH-129). In the event of telephone consent, a witness must be present with their signature included on the form.

5. If the family consents, the Permission for Autopsy Form must be properly completed (HCH-129). Any restrictions must be noted on the autopsy permission form. If the family agrees to an unrestricted autopsy (complete autopsy), the word "NONE" must be placed in the space indicating restrictions.

6. The physician or APRN completes the death certificate and nursing services completes body release form. The body release form identifies the funeral home and responsible relative. Both forms and the patient record must accompany the body to Pathology.

7. The Nursing Manager/Nursing Administrative Manager will notify the pathology department regarding the autopsy request. During off-shifts and weekends, an email may be sent to the on-call pathologist. Except in cases of emergency situations requiring immediate autopsy, permission obtained after 9 am will result in autopsy by the next business day. Notify the pathologist or PA with any questions.

8. The deceased will be autopsied immediately if religiously necessary.

9. If the physician themselves are requesting the autopsy, and after due inquiry and diligence, is unable to find any person authorized to give consent, the physician must follow the procedures delineated in Policy #07-018, Post Mortem Authorization in Unclaimed Individuals.

H. ATTACHMENTS:
   Autopsy Criteria

I. REFERENCES:
   Public Act No. 99-72
   Public Act 01-122 (An Act concerning Autopsy Arrangements and Standardized Informed Autopsy Consent)

   CROSS REFERENCE:
   Death of a Patient, Policy #07-010 Medical Examiner's Cases Policy, #07-011 Post Mortem Authorization in Unclaimed Individuals, Policy #07-018

J. SEARCH WORDS:
   Autopsy
   Autopsy Services

K. ENFORCEMENT:
   Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.

L. STAKEHOLDER APPROVALS:
M. COMMITTEE APPROVALS:
None

N. FINAL APPROVAL:

1. Andrew Agwunobi, MD, MBA (Signed)_______________________ 08/28/2020
Andrew Agwunobi, MD, MBA
UConn Health Chief Executive Officer

2. Anne D. Horbatuck, RN, BSN, MBA (Signed)_______________________ 08/25/2020
Anne D. Horbatuck, RN, BSN, MBA
Clinical Policy Committee Co-Chair

3. Scott Allen, MD (Signed)_______________________ 08/25/2020
Scott Allen, MD
Clinical Policy Committee Co-Chair

4. Caryl Ryan, MS, RN (Signed)_______________________ 08/17/2020
Caryl Ryan, MS, RN
VP Quality and Patient Service & Chief Nursing Officer

O. REVISION HISTORY:
Date Issued: 1/68
Date Reviewed: 12/94, 5/97, 10/05, 8/09, 10/15, 05/18