

# Hospital Post-Mortem Examination (Autopsy)

## Relatives Information Sheet

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## What is a post-mortem examination?

A post-mortem examination is the examination of a body after death and can also be called an autopsy. Post-mortem examinations are carried out for two main reasons:

1. At the request of a Coroner, because the cause of death is unknown, or when a death happens unexpectedly or suddenly, this is referred to as a coroner's post mortem.
2. At the request of a hospital, to provide information about an illness or cause of death, or to advance medical knowledge, this is referred to as a hospital post mortem.

## The reasons for a hospital post-mortem examination

- When a person has recently died, a post-mortem examination can give valuable information about an illness and its effects on the body.
- The examination may also help to contribute to medical knowledge.
- It may help give more information about precisely why a person died, although, a post-mortem examination may not answer every question that may be asked.
- The information found at a post-mortem examination may help the relatives come to terms with the death of the person.

## Types of post-mortem examination

### Coroner's post-mortem examination

This examination is required by law and **does not** need a person's consent.

This examination is performed to investigate:

- Sudden and unexpected deaths.
- Deaths where the cause is unknown and the doctor cannot issue a death certificate.
- Deaths where the cause is known or suspected to be from a cause which is not a natural disease; for example an accident or industrial disease.

### Hospital post-mortem examination

This examination is usually performed at the request of the doctors who have been caring for the patient, or sometimes by the relatives who may wish to find out more information about the cause of death or the illness. A hospital post-mortem can only take place with consent which must be given in writing using the hospital post mortem consent form. Sometimes the person may have given consent before they died. Where this is not the case a person close to them, in a qualifying relationship can give consent. Before a hospital post mortem can take place the death must be registered. If you are asked to consent to a hospital post mortem the Human Tissue Authority (HTA) recommends that you should be given 24 hours to consider your decision about the examination, and that you will be given the details of someone to contact if you change your mind.

## What happens during a hospital post-mortem examination?

A post-mortem examination will always be carried out with respect for the deceased and is usually carried out as soon as possible, usually within 2 or 3 working days. When a religious observance requires that the funeral is carried out within 24 hours every effort will be made to carry out the examination within this period.

A hospital post-mortem examination may either be:

- **A Full Examination:** meaning that all the internal organs are carefully removed, examined in detail and then returned into the body.
- **A Limited Examination:** a relative may feel uncomfortable with a full examination and may wish to limit the post-mortem to the organs that appeared to be directly involved with the illness. However, this may mean that some other information, which could be found in some of the other organs, would not be found.

The examination will be carried out in a post-mortem examination room, rather like an operating theatre, which is licensed and inspected by the HTA. A doctor known as a pathologist carries out post-mortem examinations and is assisted by trained technicians.

At first a careful external examination of the deceased's body is performed. Photographs or X-rays may also be taken. After this the internal examination is performed. An incision (large cut) is usually made down the front of the body to allow the internal organs to be removed for examination. Very occasionally, a previous surgical scar may be used. If the brain needs to be examined an incision is made in the hair at the base of the head. Small tissue samples may be taken from organs that have been examined for further assessment and investigation using a microscope.

## What are organs and tissue?

Organs and tissue are made up of cells. **Tissue** is a collection of cells with a specific role.

Tissues include blood, blood vessels and muscle. Small samples or biopsies taken from organs are often classed as tissue. **Organs** are made up of more than one type of tissue and have a specific role in the body. They also have their own structure and blood supply. The body has many organs including the brain, heart, lungs, kidneys and liver.

## Why do organs and tissue need to be retained?

In around 20% of adult post-mortem examinations and in most paediatric post-mortem examinations, disease processes are not immediately obvious without a more detailed examination of small pieces of tissue using a microscope. The Pathologist may also need to retain a whole organ for a full assessment to allow an accurate diagnosis to be made. For example, this may be the brain in cases where there has been a head injury or the possibility of a complex disease like Alzheimer's disease, or the heart to confirm disorders like congenital heart conditions. When this happens the organ or tissue is normally sent to a specialist unit.

## Preservation of samples

If whole organs, part of an organ, or tissue are needed for more detailed examination, they will normally be treated with a chemical that preserves them. Samples of the organ (small tissue pieces) may then be processed into blocks made from paraffin wax.

The wax blocks are sliced into very thin layers, which are about ten times thinner than a hair.

These slices are placed onto glass slides and stained with a special dye to allow the cells to be studied under a microscope.

With your consent, the tissue blocks and slides may be stored as part of the record of the post mortem examination, sometimes called the pathology or medical record, in case they are useful to your family in the future.

The samples may also be useful for one or more of the following:

- Teaching
- Research
- Clinical audit
- Quality Assurance

(This list is not exhaustive)

These small tissue samples can be a very valuable resource that helps answer important medical questions and improve patient care for others. However, for them to be kept and used for these purposes, your consent must have been given during completion of the hospital post mortem consent form.

Where consent is not given for storage of organs or tissue samples they are disposed of in a timely and respectful manner.

## Disposal options in relation to tissue blocks and slides

If consent is not given to retain the tissue blocks and slides there are a number of disposal options available to you which will be discussed and agreed during the consent process:

- The organisation where the examination is carried out may dispose of the blocks and slides
- If a funeral has already taken place, then the tissue from the blocks and slides can be returned to you, usually through your funeral director. It is advisable to discuss this with your funeral director when the funeral is arranged as there may be a charge for this. There may also be health and safety issues that may prevent this option
- The tissue from the blocks and slides may be returned with the body before the funeral. It is important to realise that choosing this option could significantly delay the funeral.

## Whole organ and tissue samples

Organ and tissue samples that are not used as part of the microscopic examination cannot be stored as part of the medical record in the same way that tissue in blocks and slides can. They may be re-united with the body, disposed of by the hospital Trust performing the examination or buried or cremated separately by the family.

After the examination is complete a post-mortem report will automatically be sent to the consultant who was in charge of the deceased's care. A report may also be sent to the deceased's General Practitioner (GP). By the nature of the report a lot of medical terminology is used and if the relatives wish for an explanation in terms that they understand they will need to make an appointment with the Consultant or the General Practitioner. A pathologist may be able to make a report available to you in non-medical language.

## Who can give consent?

The most important wishes to consider are those of the person who has died. If it is known that the person who has died gave consent or specifically did not want to give consent to the retention of tissue samples or organs, then those wishes must be respected.

If their wishes are not known, then a person nominated by them when they were alive, someone in a relationship with them or someone closely related, must give consent. The Human Tissue Act defines a list of 'qualifying' relationships, which are ranked as follows:

1. Spouse or partner (including civil or same sex partner). The HT Act states that, for these purposes, a person is another person's partner if the two of them (whether of different sexes or the same sex) live as partners in an enduring family relationship
2. Parent or child (in this context a child may be of any age and means a biological or adopted child)
3. Brother or sister
4. Grandparent or grandchild
5. Niece or nephew
6. Stepfather or stepmother
7. Half-brother or half-sister
8. Friend of long standing

The person nearest the top of the list should be approached to give consent for the examination. The decision of this person cannot be overturned by someone below them on the list. If there is more than one person at the same level, for instance there may be two or more siblings, consent is only required from one of them.

## What is the role of the Human Tissue Authority?

With the interests of the public and those that they regulate at the centre of their work, the HTA aim to ensure that human tissue is used safely and ethically, and with proper consent. In England, Wales and Northern Ireland, all hospital and local authority mortuaries where post-mortem examinations take place are licensed and inspected by the HTA and must show that they meet the published standards. If HTA standards are not met, the HTA will take action which ranges from providing advice and guidance, restricting activity in a mortuary or, in extreme cases, asking an establishment to stop working until the standards are met.

## How do I make a complaint?

If you have any complaints or allegations about your experience at our organisation, please raise the issue directly with us first to allow us the opportunity to deal with your concern. If you are not satisfied with the response, you can contact the independent complaints handling channels such as the Parliamentary and Health Service Ombudsman at [www.ombudsman.org.uk](http://www.ombudsman.org.uk) or by calling 0345 015 4033.

The HTA will assess any allegations (including whistle blowing) made to them according to the risk of not meeting the requirements of the Human Tissue Act 2004 (the Act) or their licensing standards. If you have an allegation about a licensed establishment please e-mail: [enquiries@hta.gov.uk](mailto:enquiries@hta.gov.uk) or telephone 020 7269 1900.

## Further information and support

If you have any other questions which are not covered in this information sheet, please feel free to ask a member of staff or contact us by telephone on 0151 430 1336. If this person is unable to help they will find a person who can answer your questions.

**St Helens and Knowsley Teaching Hospitals provides an interpretation service. Please do not hesitate to ask a member of staff if you need an interpreter. This leaflet can be made in alternative languages/ formats on request.**

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