

# Agreeing to a hospital post-mortem examination on the body of your relative

Department of Cellular Pathology

Information for Patients

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## Introduction

Thank you for thinking about giving your permission for a hospital post-mortem examination (also called an autopsy) to be held on the body of your relative. We know that this will be a difficult decision for you. This leaflet explains the examination.

A post-mortem can help:

- doctors improve treatment for future patients.
- you to understand the illness your relative had. As a relative you may need to know about something that could affect your own health. Some illnesses run in families and the post-mortem examination may give you this information.

There is an explanation of words used (glossary) on pages 5 to 7 to help you, but please ask the person who gave you this leaflet if there is something you are not clear about or would like explained in more detail. It is important that you feel you have enough information before making a decision about whether to agree to a post-mortem examination, or to the keeping of any samples.

## What is a post-mortem examination?

A hospital post-mortem examination is the final step in the investigation of your relative's illness. It is a careful external and internal examination of someone who has just died. It can give valuable information about an illness and its effects on the body. It may tell us more clearly why your relative died. However, even the most detailed examination may not answer all questions.

A hospital post-mortem is carried out by a doctor who specialises in the laboratory study of disease and of diseased tissue (pathologist). A technician who has had special training will also help the pathologist with this work.

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A post-mortem is carried out with dignity in special facilities which are in the hospital mortuary. It is done to a set of standards which are set by the Royal College of Pathologists. These standards include carrying out the examinations in a respectful manner and with regard for the feelings of bereaved relatives:

1. The pathologist carries out a careful external examination of the body. Photographs, X-rays or CT scans are sometimes taken for a more detailed study.
2. The internal part of the post-mortem examination then begins. A cut (incision) is made down the front of the body and internal organs are taken out for a detailed examination. Sometimes this can be done through a previous surgical incision.
3. When the brain is to be examined, a cut is made in the hair at the base of the head. Small tissue samples are usually taken for further investigation under a microscope.
4. When a detailed laboratory investigation needs large pieces of tissue, whole organs or body parts are kept for some time. You will be asked to give your written agreement. The form you sign must show if you agree to such parts being kept, and if so, for what purpose and how you wish them to be dealt with when the examination is complete.
5. Samples of body fluids may also be taken for analysis. If any fluid remains once an investigation is complete, they will be disposed of in the same way as samples from living patients.

## What are the benefits of a hospital post-mortem examination?

A hospital post-mortem can give valuable information about an illness and its effects on the body, and it may explain why your relative died. This information may help you and other family members to come to terms with the death.

Post-mortems can provide valuable information to help doctors treat other patients with the same kind of illness, and can provide vital information for research. They can also help with teaching of medical students and recently qualified doctors.

If you agree to a hospital post-mortem examination the doctor will issue the medical certificate of death (death certificate) before the post-mortem, so you can make arrangements for the funeral.

### There are 2 types of hospital post-mortem examinations:

- **Full** - this involves a detailed examination of all the internal organs including the brain, heart, lungs, liver, kidneys, intestines, blood vessels and small glands. They are removed and examined in detail, then put back into the body.
- **Limited** - you may not want to agree to a full post-mortem. If so, you may be asked to consider agreeing to a limited post-mortem. This could involve only the organs directly involved in your relative's illness. For example, if someone has died of a stroke, then only the brain and blood vessels supplying the brain may be examined. It is important to remember that the pathologist will only examine parts of the body which you have agreed to. This may, however, mean that no information will be available about possible abnormalities such as cancer, present in other parts of the body, which may have contributed to the death of your relative.

## **Some questions are answered below which may help you:**

### **When will the hospital post-mortem be carried out?**

The first part of the post-mortem is carried out as soon as possible after death, often the next day and usually within 2 to 3 days. You will be given time to talk about the request to carry out a post-mortem examination.

When there is a religious requirement for a funeral to take place within 24 hours, every effort is made to carry out the post-mortem within that period. The examination can take up to 3 hours, some may take longer, particularly if large tissue samples, organs or body parts are kept for a detailed examination. The funeral would only be delayed if you want the parts to be reunited with the body before burial or cremation. Laboratory investigations carried out on samples taken during a post-mortem may take several weeks.

### **Will a hospital post-mortem delay the funeral?**

As the hospital post-mortem is normally carried out within 2 to 3 working days after death, funeral arrangements should not need to be delayed. Your relative's body is usually ready to be released to the undertaker on the same day of the post-mortem. If the post-mortem is carried out late in the afternoon, it will usually be released the next morning.

However, rarely large tissue samples, organs or body parts need to be kept for detailed examination. Such examinations may take several days or weeks. This will only take place if you agree to it, and will only delay the funeral if you wish the organs to be reunited with the body before burial or cremation.

### **Will the appearance of the body change after a post-mortem?**

After a post-mortem the technician will prepare your relative's body for you to see again, should you wish. The internal examination involves an incision down the front of the body, which cannot be seen when your relative is dressed. If the brain has been examined there will also be an incision under the hair at the back of the head.

### **Do relatives have to give their agreement to a post-mortem examination?**

Unless the post-mortem is directed by law at the request of the Coroner, we must get your agreement before any investigation is carried out. Relatives do not have to give their agreement unless they wish to.

You should only make a decision after you have had enough time to ask questions and the reasons for a post-mortem have been explained to you. You may need time to think about whether to give your agreement and to talk to other family members. You should not give your agreement if you know that another close relative would object, or has already objected to a post-mortem.

## Can relatives change their mind?

If you give consent to a post-mortem and then change your mind, or wish to talk about the process further, then you should contact Bereavement Services immediately. If the Bereavement Services office is closed, then please leave a message on the Mortuary answer phone 0116 258 7275. Telephone numbers are also given on the Post-Mortem Consent Form.

## Why are relatives asked if some organs can be kept?

When we first talk to you about a hospital post-mortem, you may be asked whether the pathologist can keep a specific organ such as the heart, to allow medical staff to carry out a more detailed examination. The pathologist, on behalf of the hospital, would become custodian of the organ and be responsible for keeping it in a safe and secure condition in the hospital. The identity of the organ and the diagnosis would be confidential, treated in the same confidential way as all medical records.

Sometimes the doctors would like to keep an organ indefinitely for the purpose of research or teaching. This gives medical staff the chance to learn important information about the underlying condition and its treatment, both now and in the future. If you agree to an organ being kept indefinitely, you will be asked to confirm your agreement in writing. Should the organ no longer be needed it will be disposed of lawfully by the hospital, by incineration. You will not be notified that this has been done.

The reasons why the pathologist may wish to keep any large tissue samples, organs or body parts must be explained to you.

These reasons may include :

- to provide further information about the cause of death.
- to investigate other conditions also present.
- specific current research projects.
- archiving for future research projects.
- education and training of medical students and doctors.
- to help discussions between other doctors and pathologists.

If you do not want us to keep an organ indefinitely, you will be asked whether you agree for us to keep it for several weeks so that the pathologist can examine it in detail before issuing the post-mortem report. We can then respectfully dispose of the organ or return it to you for cremation or burial as you wish.

If you do not wish for us to keep large tissue samples, organs or body parts at all, it is important that you tell us when we ask permission to carry out a post-mortem. It is important that you record on the consent form what you agree to. You will be given a copy of the consent form to keep.

## Will relatives be able to find out the results of a post-mortem?

A report on the hospital post-mortem examination will automatically be sent to the doctor who requested the report. This may be the consultant who looked after your relative or the medical examiner. A report may also be sent to your relative's GP. As these reports are usually written in medical language it may be helpful to have the results explained to you. You can make an appointment with the consultant or medical examiner, or with your relative's GP, to talk about the results. The pathologist will also produce a report in non-medical language which will be sent to the consultant and/ or GP, specifically for you.

If you need help to arrange an appointment with the consultant or medical examiner, or would like to raise any further questions about hospital care, the Bereavement Support Nurses are here to help. Please contact them on 0116 258 4380 or 0116 258 6776.

## Glossary of terms

### Archiving:

Archiving is the long-term preservation of tissue or organs.

Archives are important and useful because:

- the preserved tissue or organ can be re-examined if new methods or knowledge about a disease might give a clearer explanation of the illness.
- they help the education and training of medical students and doctors, as they can see for themselves what happens inside the body in disease.
- research using archived tissues and organs can help in the diagnosis and treatment of future patients.

### Body parts:

Body parts are groups of organs, or a limb, or part of a limb.

### Coroner:

The Coroner is required by law to investigate deaths due to unnatural, suspicious or unknown causes. In some cases the Coroner may hold an inquest. The Coroner is assisted by a Coroner's Officer.

### Coroner's post-mortem examination:

Most post-mortem examinations in the UK are performed at the request of a Coroner. The agreement of relatives is not required. Attendance at an inquest is necessary in only a minority of cases.

## **Fixing:**

Before organs or tissues can be examined in detail, particularly with a microscope, they have to be hardened by immersion in a chemical. This chemical is usually formaldehyde. This is known as fixing. The complete process may take several weeks.

## **Full post-mortem examination:**

A full post-mortem examination involves examination of the brain and of all the contents of the chest and abdomen.

## **Hospital post-mortem examination:**

A post-mortem examination done with the agreement of relatives is called a consented or hospital post-mortem examination.

## **Incision:**

An incision is a cut in the skin, allowing the body to be opened. The incision in a post-mortem is made in the same way as for a surgical operation. The incision is sewn up when the post-mortem is completed.

## **Limited post-mortem examination:**

A post-mortem can be limited, in a consented examination. Relatives can limit the examination, to one body cavity (for example, the chest). This may not provide all possible information about the cause of death.

## **Medical Certificate of Cause of Death (death certificate):**

The death certificate is a document required by law. It allows the Registrar of Deaths to issue a form permitting disposal of the body. It also gives the cause of death. This is important for recording the incidence of diseases in the UK, but research has shown that up to 30% of the information on a death certificate may be wrong unless it is based on findings from a post-mortem examination. Information available after a post-mortem is available to the Office of Statistics.

## **Mortuary:**

The mortuary is a group of rooms, usually in a hospital (those outside hospitals are called public mortuaries), where bodies are respectfully kept in purpose-built refrigerators before collection by undertakers. The mortuary also includes a room where post-mortem examinations are done.

## **Organ(s):**

The body contains many organs such as the brain, heart, kidneys, lungs and liver. Each organ carries out different functions. The organs are connected in the body by nerves, blood vessels and fibres.

## **Pathologist:**

A pathologist is a medical doctor trained in the diagnosis and study of disease. Pathologists who perform post-mortem examinations usually work in hospitals and are also involved in the diagnosis of disease in living patients; these pathologists are called histopathologists. Pathologists follow standards laid down by the Royal College of Pathologists.

## **Technician:**

A technician is a person, often a scientist, who has had special training to assist pathologists in the diagnosis of disease. Some technicians help the pathologist carry out the post-mortem examination, others prepare any tissue that has been kept for study using a microscope.

## **Tissue:**

Organs contain tissue, collections of cells which give organs their special functions. For example, the heart contains muscle tissue, composed of cells which contract to pump the blood. During a post-mortem samples of tissue, typically about ¼ inch thick and the size of a postage stamp are usually taken for further examination. This involves treating the tissue with chemicals and embedding it in a block of wax so that very thin slices can be cut from it. These slices are then mounted onto glass slides, stained with dyes and examined under a microscope. Wax blocks and glass slides can then be kept safely and securely so they can be re-examined later if needed.

## **Tissue and organ bank:**

A tissue and organ bank will store tissue samples or whole organs for use (e.g. stored for an organ transplantation), or for use in research.

## **Custodian:**

A custodian is a person who looks after something for another person. When a post-mortem is done and organs are kept for more detailed tests, the pathologist is the person in the hospital who is responsible for keeping the organs safe.

## Contact details

We appreciate that this is a lot of information to take in. If you wish to discuss any of this information please contact the Bereavement Support Nurses on 0116 258 4380 or 0116 258 6776.

If you have any questions write them down here to remind you what to ask when you speak to the doctor, nursing team, or a member of the Bereavement Team:

[illegible]

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔  
على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

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ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

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