

Title: Autopsies Criteria

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Location: Saint Joseph Regional Medical Center (SJPMC)		Department: Centralized Credentials

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POLICY:

1. DEATHS IN WHICH NOTIFICATION OF THE CORONER IS REQUIRED:
 - A. Cases required by Indiana Statute Law.
 - 1) Accidents (Motor vehicle, falls, drowning, drug overdose, poisoning, burns or scalds, that result in death, gunshot wounds, stabbings, etc.)
 - 2) Suicides
 - 3) Homicides (Any death with suspicion of foul play – shootings, stabbings, beating, etc.)
 - 4) Fire deaths (burns or smoke inhalation)
 - 5) Death without previous medical attention or without being seen by a physician in the past two years.
 - 6) Death from suspected abuse or neglect (child or adult)
 - 7) Sudden Infant Death Syndrome
 - 8) Death while under anesthesia; in surgery; or in recovery
 - 9) Death following a traumatic injury, whether it is the direct or indirect cause
 - 10) Any sudden death of an apparently healthy person
 - 11) D.O.A. unless it is a medical cause and the physician agrees to sign the death certificate
2. DEATHS IN WHICH AN AUTOPSY SHOULD BE ENCOURAGED:
 - A. Deaths in which autopsy may help to explain unknown and unanticipated medical complications to the attending physician.
 - B. All deaths in which the cause of death is not known with certainty on clinical grounds.
 - C. Cases in which autopsy may help to allay concerns of and provide reassurance to the family and/or the public regarding the death.
 - D. Unexpected or unexplained deaths occurring during or following any dental, medical or surgical diagnostic procedures and/or therapies.
 - E. Deaths of patients who have participated in clinical trials (protocols) approved by institutional review boards.
 - F. Unexpected or unexplained deaths that are apparently natural and not subject to a forensic medical jurisdiction.
 - G. Natural deaths that are subject to, but waived by, a forensic medical jurisdiction, such as person dead on arrival at Saint Joseph Regional Medical Center – South Bend Campus; deaths occurring in hospital within 24 hours of admission; and deaths in which the patient sustained an injury while hospitalized.

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- H. All obstetric deaths.
 - I. All neonatal deaths.
 - J. Deaths in which it is believed that autopsy would disclose a known or suspected illness that may have a bearing on survivors or recipients of transplant organs.
 - K. Deaths known or suspected to have resulted from environmental or occupational hazards.
3. AUTOPSY RESULTS WILL BE INCLUDED IN QUALITY OF CARE REVIEWS.

References/Standards:

- Policy Origin Date: January 1996
- Review Date: December 2009, December 2012, December 2015, December 2018
- Revised Date:
- Effective Date: November 1998
- Reviewed/Recommended By: Medical Executive Committee
- Policy 67