SCOPE

This policy applies to all deaths of clients residing at the Residential Habilitation Centers (RHCs), including those components certified as nursing facilities, operated by the Division of Developmental Disabilities (DDD).

PURPOSE

This policy describes the rationale and process for obtaining a post mortem examination or autopsy. The terms "post mortem examination" and "autopsy" are used interchangeably throughout the policy. The autopsy may be general or specific to certain organ(s).

Refer to DSHS Administrative Policy 9.03, Administrative Review - Deaths of Residential Clients, for additional guidance and requirements regarding client deaths.

POLICY

When a person dies while in the care of an RHC, it is sometimes legally required and sometimes valuable to obtain a post mortem examination/autopsy. Post mortem examinations may be mandatory or elective.

A. Autopsies are mandated by law when a death is:

1. Within 24 hours of admission to the facility;
2. The result of homicide;
3. The result of suicide;
4. Accidental; and
5. Otherwise unusual, unexpected, or suspicious.

B. Autopsies are elective when a death is from any cause not enumerated in A. above and:

1. The attending or on duty (OD) physician believes valuable information pertaining to medical care may be obtained (Note: OD physicians include physicians contracted by DDD); or

2. The physician desires clarification of the circumstances of the death; or

3. The person's guardian and/or family desires an autopsy.

PROCEDURES

A. Following certification of a client's death, the physician shall determine if an autopsy is mandatory or elective.

1. If an autopsy is mandatory:
   a. The physician shall obtain confirmation from the county medical examiner/coroner that the autopsy is legally required; and
   b. The physician shall inform the guardian and/or family an autopsy is necessary. This should be done at the time of initial notification of the death.

2. If an autopsy is elective:
   a. The physician will notify the superintendent that he/she believes an autopsy is desirable; and
   b. During the death notification call to the guardian and/or family, the physician will request permission for an autopsy; or
c. The physician may receive a request from the guardian and/or family to obtain an autopsy. If the request is received by the social worker or other team member, they shall notify the physician immediately. The physician shall notify the superintendent of the request.

d. In the event of conflicting recommendations between physicians on the desirability of obtaining an autopsy, the superintendent shall make the final decision.

B. Consent for Elective Autopsy

1. Consent is required whenever an autopsy is elective.

2. The physician shall inform the guardian and/or family as soon as possible when he/she feels an autopsy is indicated, or in the alternative, the guardian and/or family will inform the physician why they believe an autopsy is necessary.

3. To confirm consent has been received, two staff members (the physician and another professional staff) will speak to the guardian and/or family either in person if they are on the premises, or by telephone. If by telephone, consent shall be considered witnessed via the monitored phone call. If in person, consent shall be obtained in writing.

4. The physician and one other professional staff shall fully document in the client's record that consent to an autopsy has been received or refused, and what reasons or justification is given to or by the guardian and/or family. All participants involved in the consent conversation shall be identified in the respective record notes. All participants shall make separate entries in the client's record.

C. Arrangements for Autopsy

If an autopsy is to be performed, the physician shall make all necessary arrangements, including contact with the county medical examiner and other actions as specified in sections A and B of this policy.
D. Autopsy Expense

1. If the autopsy is mandatory, the county coroner's policy shall prevail regarding payment.

2. If the autopsy is elective, all costs shall be assumed by DDD, regardless of whether the request for the autopsy came from the physician, guardian, and/or family.

E. Documentation

The original autopsy report shall be considered confidential and shall be filed in the person's official record.

EXCEPTIONS

Any request for an exception to policy shall be submitted to the division director for approval.

SUPERSESSION

None

Approved: /s/ Norm Davis
Date: 8/20/96
Director, Division of Developmental Disabilities