

DIVISION OF DEVELOPMENTAL DISABILITIES Olympia, Washington

TITLE:	CLIENT AUTOPSY	POLICY 9.10

Authority: Chapters 68.50 and 71A RCW

PURPOSE

This policy describes the rationale and process for obtaining a post mortem examination or autopsy. 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.

SCOPE

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

POLICY

When a client dies while in the care of an RHC, an autopsy may be required by law and/or deemed medically valuable to obtain a post mortem examination. Autopsies may be mandatory or elective.

- A. Autopsies are mandated by Washington State 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 section A. above and:
 - 1. The attending or on-duty physician believes valuable information pertaining to medical care may be obtained; **or**
 - 2. The physician desires clarification of the circumstances of the death; or
 - 3. The client's legal representative or family want an autopsy performed.

Note: On-duty physicians include physicians on contract with DDD.

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 client's legal representative 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 client's legal representative and/or family, the physician will request permission for an autopsy; or
 - c. The physician may receive a request from the legal representative and/or family to obtain an autopsy. If the request is received by the social worker or other team member, he/she must notify the physician immediately. The physician must 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 or recommendation to the legal representative or family.
- B. Consent for Elective Autopsy
 - 1. Consent is required whenever an autopsy is elective.
 - 2. The physician must inform the client's legal representative and/or family as soon as possible when an autopsy is indicated. Alternatively, the client's legal representative and/or family will inform the physician why they believe an autopsy is necessary.
 - 3. To confirm consent has been received, the physician and another professional staff will speak to the legal representative and/or family either in person or by telephone. If in person, consent must be obtained in writing. Otherwise, consent shall be considered witnessed via the monitored phone call.
- C. Arrangements for Autopsy

If an autopsy is to be performed, the physician, or nursing supervisor in coordination with the physician, shall make all necessary arrangements, including contact with the county medical examiner/coroner or, if the coroner declines to perform the autopsy, the contracted autopsy provider, and other actions as specified in sections A and B above.

- D. Autopsy Expense
 - 1. If the autopsy is mandatory, the county medical examiner/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, legal representative, or family.
- E. Documentation

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

EXCEPTIONS

Any exception to this policy must have the prior written approval of the division director.

	CHAPTER 9	
DDD POLICY MANUAL	3 OF 4	ISSUED 11/07

SUPERSESSION

DDD Policy 9.10 Issued February 27, 2003

DDD Policy 9.10 Issued August 20, 1996

Approved:

/s/ Linda Rolfe

Director, Division of Developmental Disabilities

Date: November 1, 2007