**Consent**

In Australia, post mortem examinations fall into two groups – coronial and non-coronial.

A coronial post mortem occurs when someone dies suddenly of an unknown cause, within 24 hours of an invasive procedure, such as an operation, or due to an unnatural or unusual cause. Because the post mortem is a legal requirement in these circumstances, it can be undertaken without your consent. In Canberra these Coroner’s post mortems are usually performed within three days of death. For more information about coronial post mortems please contact the Coroner’s office on 6207 1290.

A non-coronial post mortem occurs when a health professional caring for your baby/child has asked for a post mortem to try and obtain further information regarding the death of your baby/child. Your consent is required for this examination. Consent should be given in writing, although legal consent may be given over the phone to your doctor.

Thinking about whether to consent to a post mortem is a difficult issue. It is important that you discuss the examination with the doctor who has been caring for you and your baby/child. You might also want to seek advice from a social worker, religious leader, other family members or your local GP. It is important that you feel you have enough information before making a decision about whether to agree to either a full or limited post mortem examination.

**Post mortem report**

A preliminary report, outlining the initial findings will be available within one week and a full report in 6 to 12 weeks for non coronial post mortems. Coronial reports usually take longer. The timing of the final results will depend on the various tests requested by the pathologist. Your doctor will meet with you to give you the final results when they are available and to answer any questions you may have. Many parents find it helpful to write a list of questions to ask. Your doctor will call you to arrange this meeting.

**Contact Numbers**

<table>
<thead>
<tr>
<th>Doctor:</th>
<th>Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Worker:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Chaplain:</td>
<td>Phone:</td>
</tr>
</tbody>
</table>

**Accessibility**

The ACT Government is committed to making its information, services, events and venues as accessible as possible.

If you have difficulty reading a standard printed document and would like to receive this publication in an alternative format such as large print, please phone 13 22 81 or email HealthACT@act.gov.au

If English is not your first language and you require the Translating and Interpreting Service (TIS), please call 13 14 50.

If you are Deaf, or have a speech or hearing impairment and need the teletypewriter service, please phone 13 36 77 and ask for 13 22 81.

For speak and listen users, please phone 1300 555 727 and ask for 13 22 81. For more information on these services visit http://www.relayservice.com.au

© Australian Capital Territory, Canberra, August 2014

Enquiries about this publication should be directed to ACT Government Health Directorate, Communications and Marketing Unit, GPO Box 825 Canberra City ACT 2601 or email: HealthACT@act.gov.au


Enquiries: Canberra 13ACT1 or 132281 | Publication No 14/1015

A post mortem, also known as an autopsy, is an examination by a doctor, usually a pathologist, of a body after death.

Pathologists are doctors who specialise in the study of disease.
Why is a post mortem examination important?

A full post mortem:
• will help you obtain more information about medical conditions that may have caused death;
• may provide information that will help confirm or rule out a particular condition – this information may be important for your family as it relates to future pregnancies or potentially other family members, particularly if the condition is likely to be inherited;
• may help those that cared for your baby/child and provide information that may be used to help other children in the future.

A post mortem may leave some questions unanswered and does not always find the cause of death. Although this can be distressing, it can reassure you that a treatable illness did not cause the death.

What happens to your baby/child during a post mortem?

There are two types of post mortems, a limited post mortem and a full post mortem.

A full post mortem includes a careful external examination as well as an examination of internal organs. X-rays and photographs may also be taken to assist with diagnosis.

A full post mortem is a surgical procedure somewhat like an operation.

The pathologist will usually make two incisions, one down the front of the body and another across the back of the head. This allows the pathologist to examine all the major organs. Samples of tissue and fluids will usually be taken for microscopic examination, other tests that identify infections, or in special cases for genetic testing.

To get the most information about an organ, it is sometimes necessary to retain it for further examination.

The organs most likely to be kept are the heart (when there is a complicated problem) and the brain. Your doctor will discuss the reasons with you and provide you with several choices including:
• not giving your consent;
• consenting for the organ to be disposed of by the hospital after testing is complete;
• consenting to the temporary removal of the organ and making arrangements for it to be returned for burial or cremation after further testing. In some cases, a short delay in the funeral arrangements may enable the organ to be returned before burial. Occasionally for complicated brain problems the brain may need to be sent to a neuropathologist and the examination may not be complete for some months.

A limited post mortem also provides some answers although it may not fully explain the reasons for your baby/child’s death.

A limited post mortem may involve an external examination only, an external examination and some tissue samples or, an external examination with an internal examination, limited to one particular area.

After a full or limited post mortem, any incisions will be carefully closed and you and your family can then see and hold your baby/child again if you wish.

The appearance and colour of your baby/child’s skin will change naturally after death. This will happen whether a post mortem occurs or not.

Due to the temperature at which the body is kept after death, your baby/child may also feel different to hold.

The face and hands of your baby/child should not be disfigured. Embalming of your child’s body can still be carried out after an autopsy.

When will a post mortem be done?

A post mortem will be carried out as soon as possible after consent has been given – usually 24 to 72 hours after death.

If you wish to see your baby/child prior to the post mortem, this can be arranged through the social worker or nursing staff.

The post mortem can be delayed for a short period, but it is best done within 48 hours.

Occasionally, where a particular condition is suspected, samples may need to be taken a few hours after death to ensure appropriate tests can be completed. If this is the case, your doctor will discuss this with you.