

DEVELOPMENTAL DISABILITIES ADMINISTRATION Olympia, Washington

TITLE: CLIENT AUTOPSY POLICY 9.10

Authority: RCW 68.50.010 Human Remains

<u>Chapter 71A RCW</u> Developmental Disabilities

PURPOSE

This policy establishes a process for obtaining a post mortem examination or autopsy. Refer to DSHS Administrative Policy 9.03, *Administrative Review - Death of a Residential Client*, for additional guidance and requirements regarding a client's death.

SCOPE

This policy applies to all deaths of clients residing at the Residential Habilitation Centers (RHCs), including clients who have temporarily transferred to a hospital or nursing facility.

POLICY

- A. If a client dies while in the care of an RHC, an autopsy may be medically valuable to obtain a post mortem examination, required by law, or both.
- B. An autopsy may be mandated by a coroner under RCW 68.50.010.
- C. An autopsy is elective if the coroner declines jurisdiction and:
 - 1. The attending Medical Provider believes valuable information pertaining to medical care may be obtained; or
 - 2. The Medical Provider desires clarification of the circumstances of the death after discussing the case with:
 - a. The Superintendent; or
 - b. The client's family or legal representative.

PROCEDURES

- A. Following verification of a client's death, the physician shall determine if an autopsy is mandatory or elective.
 - 1. If an autopsy appears mandatory:
 - a. The Medical Provider must obtain confirmation from the county medical examiner or coroner that they have assumed jurisdiction; and
 - b. The Medical Provider or designee must inform the client's family or legal representative that the medical examiner or coroner may perform an autopsy; and
 - c. The Medical Provider may help the medical examiner or coroner obtain consent for the autopsy.
 - 2. If an autopsy is elective:
 - a. The Medical Provider will notify the superintendent that they believe an autopsy is desirable; and
 - b. The physician must request permission for an autopsy when they notify the client's family or legal representative that the client has died.
- B. Consent for Elective Autopsy
 - 1. The Medical Provider must obtain consent from the client's family or legal representative for an elective autopsy.
 - 2. The physician must obtain consent from the client's family or legal representative in person or by telephone.
 - a. If the physician obtains consent by telephone, the physician must obtain consent with a witness present via a monitored phone call.
 - b. If the physician obtains consent in person, the consent must be recorded in writing.
- C. Arrangements for Autopsy

If an autopsy will be performed, the Medical Provider, or nursing supervisor in coordination with the Medical Provider, must make all necessary arrangements, including contact with the county medical examiner or coroner (or, if the medical examiner or coroner declines to perform the autopsy, the contracted autopsy provider,) and perform

other actions as specified in Sections A and B above. Coordination with any tissue donation may also be required in accordance with the client's family or legal representative.

D. Autopsy Expense

- 1. If the autopsy is mandatory, the county medical examiner or coroner's policy prevails regarding payment.
- 2. If the autopsy is elective, all costs shall be assumed by DDA if not covered by the county medical examiner or coroner.

E. Documentation

The autopsy report is confidential and must be filed in the client's official medical record. Copies are usually not authorized due to confidentiality, therefore DDA staff should record any findings from the autopsy report into the client's Incident Report Investigation.

EXCEPTIONS

Any exception to this policy must have the prior written approval of the Deputy Assistant Secretary.

SUPERSESSION

DDA Policy 9.10 Issued June 15, 2010

Approved: /s/ Donald Clintsman Date: November 1, 2017

Deputy Assistant Secretary

Developmental Disabilities Administration