



Laboratory Service Manual

Test Availability: Daily, 24 hours; performed 8AM – 5PM unless by special arrangement

Turnaround Time: Preliminary autopsy diagnosis 2 days.

Final report for routine cases: 30-60 days

Final report for complicated cases: 90 days

Special Instructions: Minneapolis Campus

Please complete an “Authorization/Denial of Autopsy Form” noting any restrictions. A complete autopsy (restrictions = None) will involve examination of all organs of chest and abdomen, and brain.

The following cases should be reported to the Medical Examiner’s Office (612-347-2125)

Deaths meeting the requisite criteria occurring in Hennepin County should be reported whether the injury was sustained in Hennepin County or elsewhere. Conversely, deaths occurring outside of the county need not be reported even if the injury causing death occurred within the county limits.

All sudden or unexpected deaths and all deaths which may be due entirely, or in part, to any factor other than natural disease must be reported. These include, but are not limited to:

Unnatural deaths including violent deaths (homicidal, suicidal, or accidental)

Deaths associated with burns or chemical, electrical, or radiational injury.

Maternal deaths due to abortion.

Deaths under suspicious circumstances.

Deaths of inmates of public institutions who have not been hospitalized primarily for organic disease, and deaths of persons in custody of law enforcement officers.

Deaths that occur during, in association with, or as the result of diagnostic, therapeutic, or anesthetic procedures.

Deaths due to neglect

Stillbirths of 20 weeks or longer gestation unattended by a physician

Sudden deaths of person not disabled by recognizable disease.



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Unexpected deaths of persons notwithstanding a history of underlying disease.

Deaths of persons to be cremated if an autopsy was not performed.

Deaths in which a fracture of a major bone (femur, humerus, tibia, etc.) has occurred within the past six months.

Deaths occurring outside of a hospital or nursing home.

Any death of a person who has not been seen by a physician within 90 days must be reported.

Any death in which there is doubt as to whether it is a Medical Examiner's case should be reported and discussed with the Medical Examiner's investigator.

Patients who are expected to die at home and are registered with an official hospice program may be reported to the Medical Examiner's Office prior to their demise. Pre-reporting will help expedite matters once death occurs; the death must still be reported.

Occupationally associated deaths attributable entirely or in part to external workplace factors should be reported.

Death not included in the above specifically listed categories need not be reported regardless of the brevity of hospitalization. Contrary to common belief, hospital deaths occurring within 24 hours of hospitalization need not be reported unless they meet other criteria of reportability.

ST PAUL CAMPUS

Please complete an "Authorization/Denial of Autopsy Form".

The following are guidelines for reporting a death to the Medical Examiner. Deaths at Children's Health Care, St, Paul that would fall into these guidelines may be reported to the Ramsey County Medical Examiner's Office (651-224-7627) by the nursing staff, emergency department staff, the patient's physician, or laboratory staff.

The office of the Ramsey County Medical Examiner is charged with the responsibility of investigating deaths due to other than natural causes. Authority for such action is granted under Minnesota Statutes Chapter 390.006.

When a death occurs in Ramsey County by other than natural means, that death becomes a reportable case and the Ramsey County Medical Examiner's Office should be notified. Examples of these types of death include, but are not limited to:



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Violent deaths whether homicidal, suicidal, or accidental

Deaths associated with burns, chemicals, electrical, or radiation injury

All maternal deaths due to abortion

Deaths under suspicious circumstances

Deaths of inmates of public institutions, not hospitalized primarily to organic disease

Deaths of persons in custody of law enforcement offices

All deaths that occur during, in association with, or as the result of diagnostic, therapeutic, or anesthetic procedures

Any death due to neglect

All sudden deaths of persons not disabled by recognizable disease

All deaths in which a fracture of a major bone (femur, humerus, tibia, etc.) has occurred within the past six months

Any death in which there is doubt as to whether it constitutes a Medical Examiner's case shall be reported and discussed with the Medical Examiner's Office

Reporting of Stillbirths

Any stillbirth of 20 weeks or more gestation or >500 grams. These include all intrauterine fetal deaths, whether or not the mother has received prenatal care and/or physician attends delivery. When reporting the case to the Medical Examiner, be prepared to answer the following:

Do you suspect maternal drug and/or alcohol abuse?

Was there any trauma involved?

Was a drug screen or alcohol level obtained on the mother and/or fetus?

Is the placenta available?

Name of attending physician?

Responsibility

It is the responsibility of the laboratory to check with Labor and Delivery



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and/or the Medical Examiner's Office before performing the autopsy, especially in cases which meet the above criteria and documentation of death reporting is absent or unclear.

Specimen

Specimen Type:

Properly identified body, with properly completed and signed "Authorization/Denial of Autopsy" forms.