



**FACULTY OF
PATHOLOGY**

ROYAL COLLEGE OF
PHYSICIANS OF IRELAND

Recommendations Relating to Post-Mortem Examination Practice during the Covid-19 Pandemic

May 2020

Contents

Foreword	2
Why these guidelines are necessary	3
General principles underpinning these guidelines	4
Recommendations	5
1. Mortuary Pathology Teams to meet daily.....	5
2. Discuss each case with the local Coroner.....	5
3. Testing protocols should be agreed locally, with full PPE for staff	5
4. No open cavity post-mortem examinations if Covid-19 status is unknown	5
5. Continue to follow universal standard precautions and procedures.....	5
Supplemental safety precautions.....	6
When an assumed Covid-19 negative natural death turns out to be positive	6
Useful Links	7

Foreword

In response to the Covid-19 pandemic, the Faculty of Pathology at the Royal College of Physicians of Ireland (RCPI) is working very closely with the Coroner's Society of Ireland, the Department of Health, the Department of Justice, the Department of Housing, Planning and Local Government, and the HSE.

Histopathologists and state pathologists in Ireland perform approximately 5,000 post-mortem examinations per year on behalf of coroners to identify a cause of death. Given the hazardous nature of the Covid-19 virus and the risk to the mortuary staff, anatomical pathology technicians and pathologists carrying out post-mortem examinations at this time, these guidelines have been developed by the Faculty of Pathology.

In line with international best practice, our guidelines recommend that each unit hold multi-disciplinary team conferences with the coroner. Each death must be assessed in great detail and in the context of clinical, radiologic and laboratory findings to ensure that an accurate cause of death is ascribed, with the consideration of the need for a post-mortem examination for this determination.

In Covid-19 positive cases requiring post-mortem examination, transfer to one of the two specialised mortuaries in Ireland is required to ensure that the post-mortem examinations are performed in facilities appropriately equipped for this purpose. Clear guidelines for this process are outlined to minimise delays for bereaved families at this difficult time.

Our detailed recommendations are listed on page 5. These guidelines will be continually reviewed. Our aim at all times is to ensure that our histopathologists and state pathologists can investigate all deaths fully, respectfully, and with full empathy for the families of the deceased.

Why these guidelines are necessary

The performance of post-mortem examinations by pathologists remains a crucial component of the work of the Departments of Justice and Health, providing support to coroners investigating death, as well as underpinning hospital audit and clinical governance structures.

Post-mortem examinations pose a risk to healthcare staff who may contract infectious diseases while completing the examination. Pathologists mitigate these risks with the use of PPE, vaccination and, on occasion, post-exposure prophylaxis. In some clinical circumstances, the risk of infection is so great that post-mortems are undertaken only in special post-mortem examination facilities where isolation and air-handling afford an additional layer of protection for staff.

Covid-19 is a recently recognised potentially fatal disease for which there is currently no vaccine or effective medical treatment. The performance of post-mortem examinations on patients who die from Covid-19 therefore poses a substantial risk to staff. As there are only two mortuaries in Ireland where these risks can be appropriately mitigated, post-mortem examinations on patients who have died from Covid-19 need to be restricted to these locations.

Recognising the challenges imposed by these circumstances, the Faculty of Pathology engaged with relevant health authorities (including the HSE, Expert Advisory Group, Public Health, and the National Mortality Oversight Group) and the Coroner's Society of Ireland to produce these guidelines to ensure service continuity while minimising risk to staff.

General principles underpinning these guidelines

During infectious outbreaks such as the present Covid-19 pandemic it is prudent to review all procedures to ensure the safety of staff. Although universal standard precautions are routinely applied at all times during post-mortem examination practice, it is also important during this pandemic to ensure that appropriate risk assessments for Covid-19 are performed before the post-mortem examination to minimise the risk of transmission of SARS-CoV-2 to staff.

Close working relationships and communication with the Coroners is imperative during this period and they strongly support the approach that we are recommending.

The Histopathology Working Group (endorsed by the Board of the Faculty of Pathology) has put together a pragmatic, principle-based approach to dealing with mortuaries/post-mortem examinations during this period and for use within this jurisdiction.

These guidelines are based on present information regarding the virus/infection, with the knowledge that these guidelines may change as further information dictates this.

Recommendations

1. Mortuary Pathology Teams to meet daily

All units should form Mortuary Pathology Teams (MPT) to deal with risk assessments of deceased patients on a daily basis. These teams are to include a Pathologist and mortuary staff.

2. Discuss each case with the local Coroner

Discuss each case with the local Coroner(s) to deliver a multidisciplinary team approach to the Covid-19 risk evaluation and plan for testing as required. The HSE has prioritised post-mortem Covid-19 swabs for laboratory testing to facilitate timely management of these recommendations.

The decision whether to proceed with a post-mortem examination will be made by the coroner based on the multidisciplinary team discussions and clinical input – cases may therefore be signed off without a post-mortem examination. If the case is to proceed to post-mortem examination, discussion needs to include if this is to require a full or limited post-mortem examination.

3. Testing protocols should be agreed locally, with full PPE for staff

Testing protocols should be agreed locally with full PPE available for staff performing this testing. The protocols should state who performs the test, the turnaround time for results from the laboratory, etc.

4. No open cavity post-mortem examinations if Covid-19 status is unknown

No open cavity post-mortem examination should be undertaken without performing a Covid-19 swab first, during this pandemic period.

5. Continue to follow universal standard precautions and procedures

All post-mortem examinations (assumed to be Covid-19 negative), carried out during this time should follow universal standard precautions and procedures. The following personal protective gear should be worn:

- Surgical scrubs

- Eye protection
- White coverall suit or surgical gown
- Plastic apron
- Double gloving (possibly with chain mail glove)
- FF2/3 mask

We recommend proper don and doff techniques and a shower after a post-mortem examination.

Supplemental safety precautions

It is becoming clearer that there is a prevalence of Covid-19 in our community, with many asymptomatic and pre-symptomatic individuals. At present, this prevalence is simply not known. These individuals, although positive for the virus, can die from non-Covid-19 diseases such as stroke, injury, myocardial infarction, etc.

We are advising that a swab is performed in all potential open cavity post-mortem examinations as a supplemental safety precaution. This will also help inform public health regarding the prevalence of the virus in the community.

When an assumed Covid-19 negative natural death turns out to be positive

There will be cases where the coroner and pathologists agree to do a post-mortem examination in a patient who was assumed to be Covid-19 negative natural death, and the safety swab turns out to be positive. In this scenario, we recommend that a second multidisciplinary meeting occurs between the pathologists, the coroner, clinicians/GP, depending on the circumstances. The purpose of this second meeting is to again assess critically the requirement for an open cavity post-mortem examination, and assess if a clinical cause of death can be reliably assigned if other supplemental investigations were considered, including a CT scanning, toxicology sampling and an external examination.

If, however the coroner requires an open cavity post-mortem examination after all these considerations, the body should be transferred to an appropriate facility as per the protocol previously disseminated.

Useful Links

[Health Protection Surveillance Centre](#)

[Coroner's Society of Ireland Guidance in relation to Deaths due to Covid-19 Infection \(PDF\)](#)