

# DPM, POST MORTEM RISK ASSESSMENT

FOR-APMO-003

Issued 9<sup>th</sup> September 2025 Approved by: A McDonald

Place patient bradma if available or autopsy label here

Place primary label here

Completed by (Treating team): \_\_\_\_\_

QUESTION	Y/N	ACTION
Do the clinical circumstances suggest that the death is reportable?		
Has the consent form been completed and signed?		
Has consent for autopsy been obtained from the Senior Next of Kin? (Refer to front of death certificate for definition)		
Have you ascertained whether the autopsy is full or limited, and what restrictions have been placed on the retention of tissue?		
Is the patient known to have positive HIV, hepatitis C, hepatitis B or viral haemorrhagic fever serology? (check)		
Did the patient have microbiological evidence of influenza / COVID? (check)		
Does the patient have a history of tuberculosis, or was tuberculosis considered as a clinical possibility (including on the basis of radiological findings)?		
Did the patient die from a community acquired respiratory illness of undetermined cause?		
Did the patient die in the setting of rapidly progressive dementia (raising the possibility of CJD or other spongiform encephalopathies)?		
Is the case suitable for research/ laboratory donation (consent without conditions, no known infectious hazard)?		
Is the case suitable for attendance by medical students (non-infectious)?		
Is the patient bariatric (In excess of 150kg) ?		

Director of Anatomical Pathology (Austin) or their delegate  
signature: \_\_\_\_\_

Date: \_\_\_\_\_