

Description of the Autopsy Exercise

Scheduling Considerations for Galveston-based students:

- Students will be scheduled for their autopsy exercise by the Senior Surgery Clerkship Coordinator (Sommer Madrigal, x20676).
- Surgery Coordinator or autopsy staff will contact students from the list by pager when there is an autopsy. A maximum of 3 students will participate in each adult autopsy, 2 for each pediatric autopsy.
- Students will be excused from their assigned rotation for the day of the autopsy. If the autopsy is completed before the end of the day, they should use that time to begin writing the brief required report. Students are required to attend the entire autopsy. Failure to do so will result in repeat of the exercise.
- Students will report to the autopsy area (Clinical Science Building 512 or 519) no later than 9:15 and ask for Judy Smith or Joy Hackman. After a brief orientation, the students will review the medical record before the autopsy. Students will observe and participate in the gross dissection as appropriate or desired, working with the Pathology resident assigned to the case. At the end of the prosection, the gross findings will be reviewed with the attending pathologist.
- Students will each prepare an individual report, described below. A group of students who attend the same autopsy may discuss the case, but each student must submit an individual, personally written report.
- The report will be turned in to Judy Smith in the Autopsy office to be distributed to the appropriate pathologist for evaluation. Reports may also be faxed (772-9350) or emailed (judsmith@utmb.edu). Reports must be submitted no later than the end of the period in which the autopsy was performed.
- Grading will be Satisfactory/fail. A passing grade must include an adequate effort on each component of the report. Graded reports will be returned to Sommer Madrigal (Surgery clerkship coordinator), who will distribute copies with comments to student mailboxes.
- Grades will be reported as a part of the Senior Surgery Clerkship grade.
- If the report has not been completed by the end of the period, a grade of “Incomplete” will be issued. The students will then have 30 days to complete the report. Any student who has not completed the report within this time frame will receive an “F” and will be required to repeat the surgery rotation.

Components of the report:

Student Autopsy Reports will include:

- 1) **Autopsy number and date** for identification.
- 2) **Summary of clinical history.** This should be concise but informative. There should be sufficient detail to allow specific correlation of clinical, lab, and radiographic findings with pathologic findings. Avoid unnecessary abbreviations.
- 3) **Gross description:** Using your own words, describe each organ system, including size and weight of the organ as a whole, and any focal lesions (color, size, consistency, relationship to surrounding normal tissue). For diffuse lesions, describe general appearance, including color, consistency, relationship to organs in the vicinity, appearance of the capsule of the organ, etc. Do not copy the resident's work—this defeats the purpose of the exercise. You will be penalized for doing this!
- 4) **Clinicopathologic Correlation:** This section should include a discussion and explanation of what the gross pathologic findings mean in the context of this patient's clinical course. This should be geared to the physician taking care of the patient—what information would the clinician need from the autopsy? You will need to anticipate clinical questions, discuss unexpected findings, relate the pathology to lab, physical exam, and radiographic abnormalities, and explain the pathogenetic sequence of events leading to the patient's death. This is the most important part of the report that we generate. You may cite references in this section as appropriate, but this is not a requirement of this exercise. Because you will be participating only in the gross pathology examination and will not be required to review the microscopic findings, this section may be somewhat limited in certain cases.
- 5) **Summary and Reflection:** Compose a paragraph that states what you learned about the patient from the autopsy, what questions remain unanswered at the completion of the gross autopsy, what your reaction was to the autopsy procedure, and any other comments of a reflective nature. (There is no right or wrong “answer” here! We are interested in your reactions and analysis).
- 6) **Mock Cause of Death Worksheet:** You should complete, in consultation with your faculty, the cause of death worksheet, which is the template used for the death certificate (this is for an exercise only. The real death certificate on your patient will be completed by the certifying physician. Do not copy what that M.D. has written!) You should ask your faculty to help you with the cause of death worksheet at the time of the autopsy. The important features of this are: (1) question 35 part 1, in which you will list the immediate cause of death (item a) followed by the sequential events or disease processes that led to the immediate cause of death (b-d). This is not a problem list! It should be a list that explains the sequence of events leading to death. All elements on this list in part 1 should be related pathophysiologically to the cause of death. (2) question 35 part 2, in which you should list other diseases or processes that contributed to death, but are not part of the sequence described in part 1 and (3) question 40, which concerns the manner of death. Be sure you discuss this concept with your faculty and understand it. For more information and tutorials on completing death certificates/cause of death statements, please consult the following web site through the Texas Department of Health:

http://www.tdh.state.tx.us/phpep/cme/cme_dc/tutorial.html