



In cases that involve the collection of trace evidence (eg, sexual assault, pedestrian struck by motor vehicle, strangulation) appropriate evidence is collected.

NOTE: Appropriate hair samples, swabs, nail clippings/scrapings, and trace evidence are collected for the decedent. Bite marks must be processed according to the procedure consistent with current forensic odontology practice.

REFERENCES

- 1) National Association of Medical Examiners. NAME Inspection and Accreditation Checklist for Autopsy Services. February 2013.

ANP.36025 Specimen Collection

Phase II



Specimens are routinely collected and retained for toxicology, potential DNA analysis, and histological examination, as applicable.

NOTE: In cases of delayed death in hospitalized victims, the earliest available appropriate specimens should be obtained from the hospital, as applicable.

ANP.36050 Unidentified Bodies

Phase II



The laboratory has defined actions to be taken prior to the disposition of unidentified bodies (eg, finger printing, photographs/images, radiographs, dentition, DNA sample storage, medical history/devices) to allow for potential future identification.

ANP.36075 Photographs

Phase II



Photographs are taken, as appropriate, to include:

- Evidence, foreign material, blood patterns, injuries, and other items pertinent to determining the cause and manner of death or necessary for medicolegal interpretation or presentation
- Orientation photographs and close-ups of injuries with measurement scales
- Identification photographs of decedent.

NOTE: The identifying label must be placed in a location that does not obscure the identifying features of the decedent.

ANP.36100 Autopsy Notes and Photographs

Phase I

Written notes and photographs are taken to an extent that would allow reconstruction of the autopsy report if dictations are lost or damaged.

ANP.36125 Record and Material Retention - Forensic Autopsy

Phase II



Forensic autopsy pathology records and materials are retained for an appropriate period.

NOTE 1: There must be a written policy for protecting and preserving the integrity and retrieval of forensic autopsy service materials and records. The retention period shall be sufficient for use of the materials in the institution's quality improvement activities (eg, morbidity and mortality conferences). Policies for retention of records and materials must comply with federal, state (or provincial), and local laws and regulations, and with the retention periods listed in the table below, whichever is most stringent.

Forensic Autopsies

Type of Record/Material	Retention Period
Body transfer and disposition records	Indefinitely
Wet tissue (stock bottle)	1 year
Paraffin blocks	10 years
Glass slides	50 years or 30 years if a DNA sample is available
Autopsy reports	Indefinitely
Gross photographs/images	Indefinitely
Body fluids and tissues for toxicology	1 year
Sample suitable for DNA analysis	Indefinitely

NOTE 2: For autopsy paraffin blocks, the CAP recommends extending the required retention period to indefinitely or for at least a generation (approximately 20 years); however, it is not a requirement of accreditation. These blocks represent the last opportunity for tissue-based biomarker, genetic, and other testing in the interest of family members and public health. Strategies, such as retaining even a select number of blocks from each case permanently or partnering with a regional biorepository for permanent storage may be considered.

NOTE 3: The wet tissue (stock bottle) refers to small portions of organs that are saved in a small container. There is no CAP requirement or recommendation for retention of whole or large portions of organs.



REFERENCES

- 1) College of American Pathologists. Guidelines for the retention of laboratory records and materials. Northfield, IL: CAP, current edition
- 2) National Association of Medical Examiners. NAME Inspection and Accreditation Checklist for Autopsy Services. February 2013.
- 3) College of American Pathologists. CAP Policies and Documents Pertaining to the Autopsy. In: Collins KA, ed. *Autopsy Pathology and Reporting*. 3rd ed. Northfield, IL: College of American Pathologists: 2017; chap 5

ELECTRON MICROSCOPY

If the electron microscopy service is a separate and distinct laboratory in the Anatomic Pathology section, the inspector may find it more convenient to use an additional copy of the Anatomic Pathology Checklist for the inspection, answering all applicable requirements.

Inspector Instructions:

	<ul style="list-style-type: none"> Sampling of EM policies and procedures
	<ul style="list-style-type: none"> Select a representative EM sample and follow the entire process from specimen receipt to final result reporting