This form should be completed by the pathologist who did the autopsy. All dates should be recorded in Ethiopian Calendar. The pathologist should review the obstetric form and the clinical forms to get necessary information.

|  |
| --- |
| **SECTION 1. General gross appearance** |
| 1. DATE OF AUTOPSY: |\_\_|\_\_|-|\_\_|\_\_|-|\_\_|\_\_|\_\_|\_\_| (DD – MM – YYYY)(Ethiopian Calendar) 2. Is this standard autopsy (CDA)1  Yes 2  No 3. Is this Minimally invasive Tissue Sampling (MITS)1  Yes 2  No 4. Are there gross abnormalities seen externally1  Yes 2  No   If yes, describe  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **SECTION 2. Common conditions** |
| 1. Respiratory distress syndrome(RDS).1  Yes 2  No   If yes Tick all that apply:  5.1Collapsed air-spaces alternating with hyper-expanded areas:  5.2 Waxy appearing layers of hyaline membranes. composed of fibrin, cellular debris, red blood cells, rare neutrophils and macrophages 5.3 Vascular congestion 5.4 Structural immaturity, as manifest by decreased number of gas-exchange units and thicker walls 5.5 Other findings: SPECIFY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Intraventricularhaemorrage (IVH).1  Yes 2  No   If yes Tick all that apply: 6.1Intraventricularhaemorrage –acute or old, in sections of the cerebrum, at deeper level  6.2Extensive matrix infarction 6.3  Leakage of blood into the ventricles 6.4 Brain congested with characteristic –infarction of the subepydymalmatrixtissue 6.5 Necropsy reveals organic changes associated with systemic circulatory failure elsewhere, including swelling of the liver, spleen, other viscera, lung  6.6Other findings: SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Perinatal asphyxia with multiple organ involvement (HIE).1  Yes 2  No   If yes Tick all that apply:   * 1. scattered hyperintensity of both hemispheres of the telencephalon with blurred border zones between cortex and white matter, indicating diffuse brain injury;   2. parasagittal hyperintensity extending into the corona radiata, corresponding to the watershed zones; |   3. hyper-and hypointense lesions in thalamus and basal ganglia, which relate to haemorrhagic necrosis or iron deposition in these areas;   4. periventricular hyperintensity, mainly along the lateral ventricles, i.e. periventricular leukomalacia (PVL), originating from the matrix zone;   5. small multifocal lesions varying from hyper-to hypointense, interpreted as necrosis and haemorrhage;   6. periventricular centrifugal hypointense stripes in the centrum semiovale and deep white matter of the frontal and occipital lobes.   7. Others: SPECIFY|­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Necrotizing enterocolitis (NEC)1  Yes 2  No   If yes Tick all that apply:  8.1abdominal distension  8.2  intestinal necrosis and hemorrhage   8.3 peritonitis due to perforation    8.4Other findings: SPECIFY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Sepsis1  Yes 2  No   ***If yes, tick that apply:***   * 1. Endothelium of blood vessel of small-medium size   ***9.1.1*** Endothelial damage: nuclear swelling, detachment, apoptosis  ***9.1.2*** Perivascular edema  ***9.1.3***  Congestion  ***9.1.4*** Intravascular coagulation  ***9.1.5***  Thrombosis   * 1. Kidney      1. Endothelial damage      2. Interstitial edema      3. Blood extravasation into the interstitium      4. Glomerular damage      5. Loss of podocytes      6. Acute tubular necrosis of proximal tubules   2. Lung      1. Endothelial damage      2. Alveolar damage      3. Neutrophil leukocytes, erythrocytes and edema into alveolar spaces      4. Apoptosis of respiratory epithelium   ***9.4*** Heart  ***9.4.1***  Endothelial damage of coronary arteries and veins  ***9.4.2***  Intercellular edema  ***9.4.3***Thrombosis  ***9.4.4***Cardiomyocytes lesions  ***9.4.5***Cytoplasmic vacuolization (intracellular edema)  ***9.4.6***Focal wave arrangement  ***9.4.7*** Other findings: SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. **Pneumonia** 1  Yes 2  No   ***If yes, tick that apply:***  ***10.1*** The stromal tissue of immature lungs have acute inflammatory lesions  ***10.2*** exudate from vessels as yet separated from air spaces would be found   * 1. Occasionally, polymorphs were seen in bronchial lymph nodes, but they were usually in peripheral sinuses and appeared to be effete cells coming in from the alveoli.   ***10.4*** marked fibrino-purulent pleurisy  ***10.5***  Other findings: SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  11.Meningitis1  Yes 2  No  ***If yes, tick that apply***   * 1. edema of the parenchyma with the accumulation of inflammatory cells in the per vascular spaces.   2. The close in view of the exudate reveals that the inflammatory exudate is comprised primarily of polymorphonuclearluekocytes.   3. suppurative meningitis, with inflammatory signs of the meninges   ***11.4***  Other findings: SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Congenital malformations and chromosomal anomalies typical of the following present (circle):   1  Yes 2  No  If yes Tick all that apply:   * + 1. Neural tube defects and hydrocephalus     2. Trisomies-Down syndrome     3. Pierre Robin syndrome     4. Choanal atresia     5. Cleft lip and cleft palate     6. Esophageal atresia &tracheoesophageal fistula     7. Hypospadias     8. Undescended testis     9. Others: SPECIFY   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Is there a congenital heart disease? 1  Yes 2  No   If YES, SPECIFY   1. Transposed great arteries, hypoplastic left heart, 2. total anomalous pulmonary venous drainage, 3. coarctation of the aorta, and 4. interrupted aortic arch. 5. ASD 6. VSD 7. PDA 8. Others: SPECIFY   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Other findings1  Yes 2  No   IF YES, SPECIFY   1. Pulmonary hemorrhage 2. Meconomium aspiration syndrome 3. Congenital syphilis 4. DIC 5. Hyper- bilirubinemia- Acute bilirubin encephalopathy (ABE) 6. Heart failure 7. Renal failure 8. Traumatic injury 9. Hypothermia or cold injury syndrome |
| 1. Summary impressions (List of causes of death in order of likelihood based on chronicity of pathology )   **Time it takes to complete**  **16 MITS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_minutes**  **17.Standard Autopsy \_\_\_\_ minutes** |

|  |
| --- |
| **sECTION 3. fORM completion** Name of person who completed Form:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of PERSON WHO REVIEW FORM:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Completed Form reviewed: |\_\_|\_\_|-|\_\_|\_\_|-|\_\_|\_\_|\_\_|\_\_| (DD-MM-YYYY) |