**PURPOSE:**

All Pathology personnel must observe Standard Precautions and adhere to these guidelines to prevent transmission of potentially infectious diseases. Responsibility for compliance with these guidelines’ rests with the individual. The following policy delineates the minimum responsibilities and procedures for the protection of personnel in the performance of Autopsies

**PROCEDURES:**

**Personal Protective Equipment**

1. All Autopsy material should be considered infectious for both HIV and HBV.

2. All personnel involved in the performance of an Autopsy are required to wear:

a. Scrub Suit

b. Long sleeve fluid impermeable gown

c. Double gloves

d. Mouth and nose cover

e. Head cover

f. Fluid impermeable shoe covers

g. Eye protectors or face shield

3. All personnel involved in the performance of an Autopsy during the performance of aerosol generating procedures on cadavers suspected of or confirmed as being infected with aerosol transmissible must also wear a powered air purifying respirator (PAPR).

a. Please reference Attachment A IC – 704.1 for a list of diseases and pathogens which are considered to be aerosol transmissible pathogens or diseases (as referenced in appendix A of the California **Division of Occupational Safety and Health (**Cal/OSHA) Occupational Exposures to Aerosol Transmissible Diseases Chapter 4, Subchapter 7, Article 109 Section 5199 CCR T8 § 5199)

4. All observers must also comply with the above. Observers, other House Staff, and Attending Physician MUST obtain permission from responsible Pathologist to attend Autopsy.

5. A hands-free phone is available in the Autopsy suite. Do not operate phone with contaminated gloves.

6. Contaminated protective clothing must not be worn outside the Autopsy suite. Remove and place in designated receptacle before leaving.

7**.** Hands should be washed with a germicidal soap. Shower facilities are available and should be utilized upon completion of the Autopsy.

**Maintenance of Working Areas**

1. It is the responsibility of the Autopsy personnel to maintain the Autopsy suite and morgue instruments in a clean and disinfected condition at all times. Detailed procedures are attached for performance of autopsies

2. After dissection of specimens in the autopsy suite, the Pathology staff (i.e.: Pathology Assistant) is responsible for properly cleaning the suite.

**Handling and Disposal of Tissue**

1. All fresh tissues, body fluids, and contaminated materials are to be considered medical waste (refer to IC policy 233.0).

2. Unfixed body fluids and tissues, other than entire limbs, are to be placed in designated freezer for storage until disposal. Disposal is contracted to a licensed disposal company on an as needed basis.

3. Formalin-fixed tissues are to be stored in designated area until licensed disposal company is contacted for removal.

4**.** Needles and syringes are to be placed in a sharp’s container. Do not bend, clip, or recap needle after use.

**Morgue Clean-up After an Autopsy**

1. Place all instruments in a 10% bleach solution and allow soaking from one half to one hour (bleach should be mixed fresh before use since germicidal properties of diluted solutions decrease with time).

2. All towels, gowns, and other linens used in performance of the Autopsy shall be collected in a designated receptacle for autoclaving prior to laundering.

3. Spray working surfaces and contaminated areas with overhead spray unit.

a. Attach bottle of bleach to clear tubing on spray unit.

b. Turn on valve of spray unit.

c. Aim nozzle and squeeze handle dispensing bleach/water mixture.

d. Scrub all surfaces by hand using scouring sponge.

e. Dry all surfaces with a clean towel.

**Notifications of Unusual Infectious Disease**

Pathology team should inform Infection Prevention and Control and the Director of Microbiology, as soon as an unusual infection or Emerging Infectious Disease is suspected in either the autopsy or the surgical pathology setting.

**ATTACHMENTS:**

1. [IC – 704.1 Attachment –Aerosol Transmissible Pathogens](https://secure.compliance360.com/ext/wPiqd1DAvcEFkjyQrWwyqA==)

**REFERENCES:**

1. APIC text of Infection Control and Epidemiology. Chapter 65: Postmortem Care; Chapter 113: Waste Management, 2014.
2. "Guidelines for Laboratory Safety" CAP Environment, Safety and Health Committee, College of American Pathologists, 2009.
3. California **Division of Occupational Safety and Health (**Cal/OSHA) Occupational Exposures to Aerosol Transmissible Diseases Chapter 4, Subchapter 7, Article 109 Section 5199 CCR T8 § 5199)
4. [IC - 233.0 Waterborne Nosocomial Infections, Prevention and Control](https://secure.compliance360.com/ext/3Bv02bJz__R61DRbrjdPlQ==)

**POLICY OWNER:**

*Director, Infection Prevention and Control*