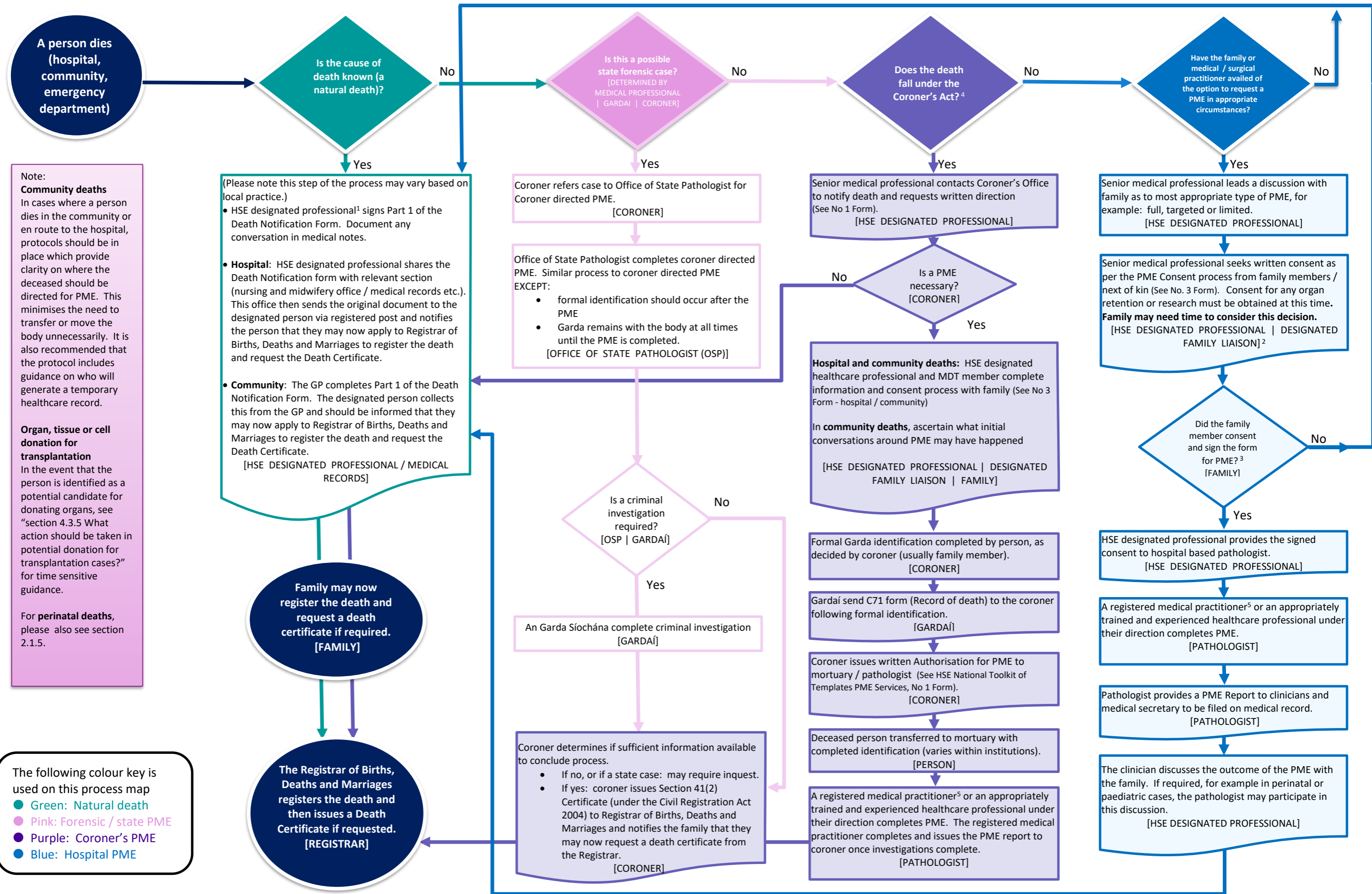


HSE Post Mortem Examination Service Process Map (2023)

Item Type	Other
Authors	HSE Guidelines for Post Mortem Examination Services: Review Group
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Note:
Community deaths
In cases where a person dies in the community or en route to the hospital, protocols should be in place which provide clarity on where the deceased should be directed for PME. This minimises the need to transfer or move the body unnecessarily. It is also recommended that the protocol includes guidance on who will generate a temporary healthcare record.

Organ, tissue or cell donation for transplantation
In the event that the person is identified as a potential candidate for donating organs, see "section 4.3.5 What action should be taken in potential donation for transplantation cases?" for time sensitive guidance.

For **perinatal deaths**, please also see section 2.1.5.

The following colour key is used on this process map

- Green: Natural death
- Pink: Forensic / state PME
- Purple: Coroner's PME
- Blue: Hospital PME

¹ Designated healthcare professional This is usually a consultant or registrar; however, this role may be delegated to another trained healthcare professional. Steps where the responsible person includes the medical professional should also include a member of the multidisciplinary team.
² Designated family liaison includes a member of the multi-disciplinary team for example bereavement support, medical social worker senior nurse or a designated bereavement officer.
³ For information on: Consent see HSE National Consent Policy (2022), Guidelines for Post Mortem Consent and Retention of Samples, RCPI (2000) and the HSE National Consent for Research in Health and Social Care Policy (2022) [In development], Communication and Cultural considerations see Care of the Deceased Guidance (2022) PENDING.
⁴ Please note that this sequence may change depending on local practice.
⁵ For the purposes of this document and in practice, the registered medical practitioner is known as a pathologist.
 See HSE National Toolkit of Templates Post Mortem Examination Services for copies of templates to support the process. For information on the registration of deaths, see <https://www2.hse.ie/services/births-deaths-and-marriages/register/death/>
This is a controlled document and may be subject to change at any time.

Second Schedule, Coroners (Amendment) Act 2019

- (a) Any death that may be murder, manslaughter or infanticide.
- (b) Any death that appears to be connected with a crime or suspected crime.
- (c) Any death, whether or not accidental, caused wholly or partly by stabbing, drowning, poisoning, hanging, electrocution, asphyxia or a gunshot wound.
- (d) Any death where the deceased person is dead on arrival at a hospital.
- (e) Any death which may be by suicide.
- (f) Any death where the body of the deceased person is unidentified.
- (g) Any death where no family member of the deceased person can be traced within a reasonable time of the death.
- (h) Any death where the body of the deceased person is found or recovered in circumstances that indicate that the death may have occurred a considerable period of time previously.
- (i) Any death (other than in circumstances to which paragraph 8 applies) in respect of which the date of death may not be ascertainable.
- (j) Any death caused wholly or partly by any of the following:
 - (a) an incident, whether or not accidental, resulting in any physical injury, including a cut, fracture or contusion;
 - (b) a fall;
 - (c) self-neglect;
 - (d) an eating disorder;
 - (e) exposure or hypothermia;
 - (f) burns.
- (k) Any death which may be by assisted suicide.
- (l) Any death caused wholly or partly by any of the following:
 - (a) an accident arising out of the use of a vehicle in a public place;
 - (b) an incident occurring on a railway;
 - (c) an incident arising on a train, aircraft, ship or other vessel.
- (m) Any death caused wholly or partly by any of the following:
 - (a) a notifiable disease or condition that is, under provisions in that behalf in any other enactment, required to be notified to a Minister of the Government, a Department of State or a statutory body or to an inspector or other officer of a Minister of the Government, a Department of State or a statutory body;
 - (b) an adverse reaction to any drug;
 - (c) a drugs overdose or the presence of toxic substances;
 - (d) in the case of an infant death, maternal drug addiction;
 - (e) an infection contracted as a result of previously contaminated blood product administration;
 - (f) a lack of care or neglect;
 - (g) starvation or malnutrition.
- (n) Any death which may be due to a prion disease.
- (o) Any death caused wholly or partly by an accident at work or due to industrial or occupational injury or disease.
- (p) Any death occurring in a hospital or other health institution—
 - (a) that is unexpected,
 - (b) within 24 hours of presentation or admission, whichever is the later, or
 - (c) of a person transferred from a nursing home.
- (q) Any maternal death or late maternal death.
- (r) Any death of a stillborn child, death intrapartum or infant death.
- (s) Any death occurring in a hospital or other health institution that is directly or indirectly related to a surgical operation or anaesthesia (including recovery from the effects of anaesthesia) or to any other medical, surgical or dental procedure, regardless of the length of time between the procedure and death.
- (t) Any death which may be due to any healthcare acquired infection.
- (u) Any death where an allegation is made or a concern has been expressed regarding the medical treatment provided to the deceased person or the management of his or her healthcare.
- (v) Any death which may be as a result of an unconventional medical procedure or treatment.
- (w) Any death occurring in—
 - an institution for the care and treatment of persons with a physical or mental disability, or
 - any public or private institution for the care of elderly or infirm persons, including a nursing home.
- (x) Any death where the deceased person was at the time of his or her death, or immediately before his or her death, in State custody or detention.
- (y) Any death of a child in care.