

3 *The limits of the post mortem in investigating the conduct of surgery.*

- 3.1 If by the use of the term surgery here, the wider aspects of surgical management are also included rather than the specific technical ones, then some of the limitations have already been outlined in paras. 2.3 - 2.5.
- 3.2 Additionally, it may be of value to illustrate some of the technical aspects of surgery that can be assessed. The post-mortem should confirm the anatomy and that it correlates with the description within the surgical notes i.e. there are no unanticipated structural defects and the various shunts etc communicate appropriately. The integrity of suture lines can be checked and whether they appear to be adequately haemostatic, i.e. there is no excess blood leakage. This includes 'internal' sutures such as those securing an artificial patch over a septal defect.
- 3.3 A judgement as to the patency or otherwise of blood vessels or inflow and outflow tracts is also possible. A difficulty can be that the observation of a narrowing does not by itself indicate that this was of any functional significance and other evidence, especially pre-mortem clinical indications of functional impairment may be necessary. For instance, in many congenital heart operations, the coronary arteries may be grafted to a new location, and it is possible for the origin of these newly placed vessels to appear narrow. Supportive evidence that this is of pathological significance would include injury to the heart muscle in the distribution of a vessel due to lack of blood. Pre-mortem clinical history and evidence of myocardial ischaemia or functional problems consistent with myocardial ischaemia may also be important supportive evidence.
- 3.4 This illustrates the not infrequent situation where the significance of the pathology cannot be fully assessed independent of the clinical history. It is important to recognise that the pathologist at the time of post mortem is often more a member of a team trying to identify the reasons why a particular sequence of events occurred. The pathologist, from the post mortem, provides important information that contributes to that process.