

Consultation paper: *Guidelines for the retention of tissues at post-mortem examination*

- where feasible, organs will be re-united with the body before release for burial or cremation, but this is unlikely to be feasible when a large organ has been retained;
 - where organs cannot be re-united, and unless the relatives wish to make their own arrangements, the organs will be disposed of in accordance with local practice (incineration or maceration) within a specified period after the Coroner's enquiries had been completed;
 - residual tissue (i.e. surplus to that needed for histological processing) will be disposed of in accordance with local practice within a specified period after the Coroner's enquiries have been completed.
- 6.6 In cases where criminal charges have or may be made, then the Coroner should ascertain the advice of the Regional Director of the Crown Prosecution Service before disposal of any samples or tissues. The situation is, however, currently unclear and it could be argued that relevant material must be retained for the full duration of any criminal sentence. This is the advice given by the Crown Prosecution Service, but the legal basis of this advice is open to discussion.
- 6.7 We recommend that, where the body of the deceased has already been buried or cremated, any remaining tissue which is not to be disposed of as clinical waste is, wherever possible, released only to funeral directors chosen by the relatives. Whether this tissue may itself be disposed of by burial or cremation is a matter of law, and the decision will be for the relevant burial or cremation authority, but we understand that the cremation of such tissue may not be unlawful if the body itself has been cremated. We also understand that there appears to be no legal obstacle to reuniting the tissue with the body if it has been buried (subject to obtaining the appropriate prior authority for the disturbance of such remains).
- 6.8 When tissues are released, we recommend that the recipient gives written confirmation that they will dispose of the tissue in the manner selected by the relatives within a reasonable time and that they understand any hazards associated with the tissue and its fixative. This includes seeking an assurance that those receiving chemically-treated (e.g. formalin fixed) tissues are able to handle them under the appropriate COSHH regulations.
- 6.9 As an alternative to disposal either with biopsy or surgically resected tissues or by individual cremation or interment, hospitals should consider emulating some anatomy departments by arranging a religious ceremony and mass cremation (subject to crematoria being permitted to dispose of organs). Relatives may find this an acceptable arrangement.