Oxford Minimally Invasive Autopsy Service

1. Requesting a minimally invasive autopsy (MIA)

Following a request from the family for a MIA, the Coroner must authorise this procedure before the Coroner’s officer contacts the pathologist. On the basis of the clinical history and circumstances of the death, the pathologist will be able to confirm whether a MIA is appropriate. The Coroner’s officer should ascertain whether the deceased is obese (>100kg) which creates difficulty for handling the body in the CT scanner and may be a contraindication to MIA.

A request should be submitted to the pathologist. Contact should initially be by telephone. The service is available Monday to Friday, excluding bank holidays.

Lead pathologist:  Prof Ian Roberts  Office: 01865 222889  
Mobile: 07557 120820  
Email: ian.roberts@ouh.nhs.uk  

Other pathologists:  Dr Sanjiv Manek  Office: 01865 220520  
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Dr Eve Fryer  Office: 01865 222891  
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Email: eve.fryer@ouh.nhs.uk  

Oxford mortuary:  Tel: 01865 220495  
Email: mortuary@ouh.nhs.uk

2. Transfer of the patient to Oxford:

When a MIA has been agreed, the deceased should be transferred to the mortuary at John Radcliffe Hospital, Headley Way, Headington, Oxford OX3 9DU before 4pm on the same day.

3. MIA procedure:

The pathologist will perform an external examination. This will be followed by whole body CT scan ± targeted coronary angiography in the John Radcliffe Hospital, at 7am on the day following receipt of the body in Oxford. If an invasive autopsy is necessary, it will be performed immediately following imaging in the mortuary at JRH. The autopsy will be limited as appropriate, according to the imaging findings. The MIA protocol is summarised below:
Other investigations such as aspiration of fluids for toxicology and biopsy for histology will be performed as required. These may be used to supplement the imaging in order to provide a precise cause of death without need for full invasive autopsy.

The autopsy will be complete by 11am on the day of imaging, unless further investigations, such as toxicology and histology are required in order to ascertain the cause of death. Toxicology specimens will be sent to the Coroner’s normal provider.

4. **Reporting the cause of death and issue of post mortem report:**

Both radiologist and pathologist will attend the MIA and on the basis of the clinical history, external examination and imaging findings, formulate a cause of death or make a decision to proceed to invasive autopsy. The pathologist will provide an immediate cause of death to the Coroner’s office and issue the post mortem report, which will include the imaging findings.

Based on data from the MIA trial for the Oxfordshire Coroner, using the above protocol an invasive autopsy will be required in one third of cases. In the majority this will be limited according to the imaging findings; a full invasive autopsy is required in <10% of cases.

5. **Imaging and mortuary fees:**

The cost of the MIA is £450. This includes staff and non-staff radiology costs, radiologist reporting fee, APT costs and administration costs. The pathologist will invoice the Coroner the standard £96.80 autopsy fee at the time of issuing the final report. There is an additional mortuary charge for autopsy of £100, £50 of which will be paid by the Coroner. The total fee to the family will be £500 (£450 + £50) that will be invoiced to the family’s funeral director. These fees do not include toxicology and histology if required, the costs of which will be met by the Coroner. All Toxicology will be referred to Imperial College Toxicology service, which is contracted by North London Coroner to carry out Toxicology service.

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