

Authorisation for donation of body for anatomical examination

And instructions for next of kin and executor

Contact Details: The Designated Individual (Anatomy)
School of Life Sciences (Floor E)
Medical School
Queen's Medical Centre
Nottingham
NG7 2UH

Tel: (0115) 823 0143 or (0115) 823 0145

Thank you for expressing your wish to bequeath your body for anatomical examination after death: your generous action is greatly appreciated.

Detailed instructions are enclosed. It is most important that you understand the information contained in this booklet before signing the consent forms. If you have any queries or would like any further information, then please contact us on the above telephone number.

Information and instructions

If you wish to bequeath your body for anatomical examination, you need to complete and sign **both** of the attached Consent Forms in the presence of a witness (this may be a next-of-kin, executor, friend, GP, solicitor, etc). One copy should be returned to the Anatomy Office at the address shown on the top of the form. The remaining copy should be retained by you and kept in a safe place (e.g. with your personal papers, your Will, or with your family doctor or solicitor). It is recommended that you inform your next-of-kin or executor(s) and doctor of your intention to donate your body as it is important that whoever will be responsible for your affairs when you die knows about the bequest papers and where they can be found.

If you change your mind in the future and no longer want to bequeath your body, you can withdraw your bequest at any time either by writing to the Designated Individual (Anatomy) at the address on the front page of this booklet or by telephoning the Anatomy Office on (0115) 823 0143 or (0115) 823 0145.

As soon as possible after your death, a telephone call should be made by your next-of-kin, executor or other responsible person to the Anatomy Office (Telephone: (0115) 823 0143 or (0115) 823 0145) during normal office hours. The Anatomy Office is open from 9.00 am to 5.00 pm, Monday to Friday. Outside of these hours (e.g. weekends and Bank Holidays), answer phone messages may be left on (0115) 823 0143 or alternatively an on-call member of staff can be contacted via the Switchboard Operator at the Queen's Medical Centre (Telephone: (0115) 924 9924).

Deaths occurring outside normal office hours (e.g. at night or weekend)

- If death occurs in hospital, there is no need to contact the Anatomy staff at night or during the weekend. A telephone call on the next working day, as soon as possible after 9.00 am, is sufficient.
- If death occurs at home or in a nursing/residential home, in the first instance, arrangements should be made for the body to be moved to a local funeral director for safekeeping (i.e. with a cold room/fridge) and then a call made to the Anatomy Office on the next working day as soon as possible after 9.00 am.
- We do endeavour to have a member of staff on-call out of office hours, who is available to speak to relatives if they are distressed or to provide information to care staff if they have pressing questions/difficulties. This person may be contacted via the Queen's Medical Centre Switchboard on (0115) 924 9924.
- During Bank Holidays and the Christmas and Easter periods when the Medical School is closed, bequests cannot always be accepted and therefore different arrangements may apply. During these times, relatives or executors are asked to telephone the Anatomy Office directly on (0115) 823 0143 where instructions will be given in an answer phone message, or alternatively to contact the Switchboard at the Queen's Medical Centre (0115 924 9924) to be put through to a member of staff on-call.

Please note that no guarantee can be given that a bequest will be accepted. The main reasons for non-acceptance are:

- post mortem examination;
- transmissible disease (e.g. hepatitis (jaundice), HIV, septicaemia);
- deterioration in the body tissues (e.g. varicose ulcers, pressure sores, limb amputation, severe joint deformity);
- recent surgery where the wound has not healed;
- organs donated for transplantation (e.g. kidneys, liver, heart, etc). However, it is possible for you to donate the corneas from your eyes and still donate your body for anatomical examination.

There is no upper age limit for bequeathing a body.

If your body is not suitable for anatomical examination, your next-of-kin or executor will be informed as soon as possible so that they can make funeral arrangements. The cost of these funeral arrangements will rest with your next-of-kin or executor.

If your bequest is accepted, we shall arrange for **our** funeral director to collect your body and bring it to the Nottingham Medical School. This is usually between 2-7 days after your death. If, at the time of your death, it is necessary to transfer your body to a local funeral director for safekeeping, the cost of this initial removal cannot be borne by the Medical School and will need to be met by your Estate. In addition, whilst this School will arrange and pay for a final cremation, your next-of-kin or executor will be asked, if possible, to contribute towards the cost of transporting your body to the Nottingham Medical School dependent on the distance involved.

If you have a pre-paid funeral plan in place or are considering buying one, you may want to check with the Funeral Director that any monies will be refunded to your family if the School is able to accept your bequest.

Initially, your bequest will be received by the University of Nottingham Medical School. However, in addition to Nottingham, the University has another Medical School site based at the Royal Derby Hospital where anatomical teaching also takes place.

As detailed above, **before your death**, you need to complete the **two Consent Forms** in the presence of a witness (this may be a next-of-kin, executor, friend, GP, solicitor, etc). One copy should be returned to the Anatomy Office at the address shown on the top of the form. The remaining copy should be retained by you and kept in a safe place (e.g. with your personal papers, your Will, or with your family doctor or solicitor).

Another form has to be filled in **after your death** and a copy of this is attached at the back of this booklet. **Form HTA(A)1 – Authorisation for use of a body for anatomical examination, education, training and research** is for completion by your next-of-kin or executor. This confirms the consent that you made prior to your death to donate your body and also gives instructions for the disposal of your body after the anatomical examinations are completed.

If your bequest is accepted, the Medical School will be responsible for keeping and preserving your body until such time as your bequest is completed. At completion, the School will arrange to dispose of your body in accordance with the instructions given on the Form HTA(A)1. Where a religion/faith group is indicated, a service will be conducted in the presence of clergy of the appropriate denomination and members of the School. The cremation expenses will be borne by the School provided that there are no special requirements. If other arrangements are requested, the School will carry these out as far as possible, but any extra costs incurred will have to be met by your next-of-kin or executor.

If a request is made for a private burial or cremation, **all** expenses involved in such arrangements will be the responsibility of your next-of-kin or executor. However, the School may be able to contribute an amount to the cost of a private disposal. **NB** – it is important to note that bequests are **not** suitable for burial in Natural/Green Burial Grounds. However, it is possible for a bequest to be cremated and the ashes interred in a Natural/Green Burial Ground.

Notes for completing the Bequest Consent Form

Please read this section carefully as it explains what you may give consent for.

There is no limit on the length of time a donated body can be used by the Medical School. However, if you wish to restrict the time that your whole body or parts of your body are used, you have an opportunity to do so in Part B (section 2) of the Consent Form.

It may be useful for the Medical School to prepare images of parts of your body for teaching, training or research purposes. You are assured that if consent is given to prepare images, you will not be identifiable in these images.

Please ensure that **both** Consent Forms are signed and dated in the presence of your witness otherwise they will not provide valid consent for acceptance of your body for anatomical examination, education, training and research. A witness can be a spouse, next-of-kin, executor, friend, GP, solicitor, etc. One copy should be returned to the Anatomy Office at the address shown on the top of the form. The remaining copy should be retained by you and kept in a safe place (e.g. with your personal papers, your Will, or with your family doctor or solicitor).



Human Tissue Act 2004

Part A: Donor's details - to be completed in BLOCK CAPITALS

Title _____ Surname/family name _____

Forename(s) _____

Address _____

Postcode _____ Tel no _____

Date of birth _____ Religion/faith group (if applicable) _____

I WISH TO DONATE MY BODY AFTER MY DEATH. I UNDERSTAND THAT IT MAY BE USED FOR:

- ANATOMICAL EXAMINATION
- EDUCATION OR TRAINING RELATING TO HUMAN HEALTH
- RESEARCH IN CONNECTION WITH DISORDERS OR THE FUNCTIONING OF THE HUMAN BODY

AT THE TIME OF MY DEATH, I CONSENT TO RELEVANT PARTS OF MY MEDICAL HISTORY BEING PROVIDED BY MY GENERAL PRACTITIONER TO A MEMBER OF ANATOMY STAFF AT THE MEDICAL SCHOOL DEALING WITH MY BEQUEST.

Part B: Consent - please tick as appropriate

1. I do not place any restrictions on the length of time that my body or body parts may be retained.

OR

2. My body can be retained for a maximum of 3 years only and
- a. Parts of my body may be retained for longer than 3 years.
- b. No part of my body may be kept for more than 3 years.

AND

3. I consent to the use of images of my body or body parts.
I understand that I will not be identifiable in these images and that they will be used for:
- a. education or training relating to human health;
- b. research in connection with disorders or the functioning of the human body.

Part C: Witness details

Surname/family name _____ Forename(s) _____

Address _____

Postcode _____ Relationship to donor _____

Part D: Signatures – to be signed and dated at the same time in each other's presence

Signature of donor _____ Date _____

Signature of witness _____ Date _____

Complete both forms. Return one to the address at the top of this page and keep the other with your Will or legal papers.



Human Tissue Act 2004

Part A: Donor's details - to be completed in BLOCK CAPITALS

Title _____ Surname/family name _____

Forename(s) _____

Address _____

Postcode _____ Tel no _____

Date of birth _____ Religion/faith group (if applicable) _____

I WISH TO DONATE MY BODY AFTER MY DEATH. I UNDERSTAND THAT IT MAY BE USED FOR:

- ANATOMICAL EXAMINATION
- EDUCATION OR TRAINING RELATING TO HUMAN HEALTH
- RESEARCH IN CONNECTION WITH DISORDERS OR THE FUNCTIONING OF THE HUMAN BODY

AT THE TIME OF MY DEATH, I CONSENT TO RELEVANT PARTS OF MY MEDICAL HISTORY BEING PROVIDED BY MY GENERAL PRACTITIONER TO A MEMBER OF ANATOMY STAFF AT THE MEDICAL SCHOOL DEALING WITH MY BEQUEST.

Part B: Consent - please tick as appropriate

4. I do not place any restrictions on the length of time that my body or body parts may be retained.

OR

5. My body can be retained for a maximum of 3 years only and
- a. Parts of my body may be retained for longer than 3 years.
- b. No part of my body may be kept for more than 3 years.

AND

6. I consent to the use of images of my body or body parts.
I understand that I will not be identifiable in these images and that they will be used for:
- a. education or training relating to human health;
- b. research in connection with disorders or the functioning of the human body.

Part C: Witness details

Surname/family name _____ Forename(s) _____

Address _____

Postcode _____ Relationship to donor _____

Part D: Signatures – to be signed and dated at the same time in each other's presence

Signature of donor _____ Date _____

Signature of witness _____ Date _____

Complete both forms. Return one to the address at the top of this page and keep the other with your Will or legal papers.

Instructions to next of kin or executor when a donor dies

You should read carefully the information given on the previous pages and then telephone the Anatomy Office at the University of Nottingham Medical School on (0115) 823 0143 or (0115) 823 0145 during normal office hours (Monday to Friday, 9.00 am to 5.00 pm). The Anatomy staff will contact the doctor in charge of the deceased and together they will make a decision on whether or not the donation is acceptable. You will be informed about the decision as soon as possible (normally within a few hours).

No guarantee can be given that a bequest will be accepted.

If the donation is accepted:

1. You will need to register the death with the Registrar of Births & Death and tell him/her of the wishes of the deceased. He/she will issue you with a **Green Certificate** (Certificate of Burial or Cremation) and a **Death Certificate**.
2. You will need to complete the attached form (**HTA(A)1 – Authorisation for use of a body for anatomical examination, education, training and research**). This confirms the deceased's consent* to bequeath their body and also asks for a final decision on funeral arrangements.

* **NB** - If the deceased's witnessed consent is not lodged with the Medical School, a copy of the witnessed consent (e.g. appropriate section of a Will) will need to be faxed to the Anatomy Office **before** the donation can be accepted.
3. You will need to send the **HTA(A)1 Authorisation Form, the Green Certificate and a copy of the Death Certificate** (a photocopy is acceptable) to the Anatomy Office at the University of Nottingham Medical School. **It is very important that these documents are received as soon as possible.**
4. If it has been necessary to transfer the deceased to a local funeral director prior to acceptance, the cost of this initial removal cannot be borne by the Medical School and will need to be met by the Estate of the deceased. In addition, the Anatomy Office will ask, if possible, for a contribution towards the cost of transporting the body to the Nottingham Medical School dependent on the distance involved.

If a donation is not accepted:

You should proceed with normal arrangements for burial or cremation. It is regretted that the Medical School cannot make any financial contribution to these private arrangements.

Human Tissue Act 2004

**Authorisation for use of a body for anatomical examination, education,
training and research**

The deceased

Title _____ Surname/family name _____

Forename(s) _____

Address _____

_____ Postcode: _____

Sex _____ Marital status _____ Date of birth _____

Religion/faith group (if applicable) _____ Date of death _____

Place of death _____

The deceased made a request in writing, which I have no reason to believe was withdrawn.

A copy of the written consent is attached.

or

I have confirmed with the receiving institution that they hold a copy of the written consent.

Grounds for use of body and parts of body

The deceased consented to:

1. No restrictions being placed on the length of time for which his/her body or body parts may be retained.

OR

For option 2, please select either (a) or (b).

2. His/her body being retained for a maximum of 3 years only.

(a) Parts of his/her body being retained for longer than 3 years.

(b) No part of his/her body being kept for more than 3 years.

If you have ticked statements 1 or 2(a) above, please answer the following questions.

Do you want to be notified if parts are retained? Yes No

If parts are retained, do you want to be notified **if** they are eventually cremated (this could be many years)? Yes No

AND

3. Consent is given for images derived from his/her unidentifiable body or body parts being taken and used for the purposes of education, training and research.

Instructions on the disposal of the donated body at the completion of general anatomical examination

Do you wish:

(a) Cremation with arrangements and expenses by the Medical School Yes

or

(b) Private funeral arrangements and expenses by next of kin/executor Yes

NB If you would like other funeral arrangements (e.g. burial), this may be possible in consultation with the Anatomy Office. However, please note that this will incur costs that will have to be met by the next of kin/executor. Please contact the Anatomy Office on (0115) 823 0143 for further details.

*If you have ticked (a) or (b) above please answer **ALL** the following questions and tick relevant box:*

Do you wish to attend the service at cremation? Yes No

Would you like to take possession of the ashes? Yes No

If you have ticked **"No"** to both the questions above, would you like to be informed **after** the cremation has taken place? Yes No

Details of next of kin or executor

Title _____ Surname/family name _____

Forename(s) _____

Address _____

Postcode _____ Tel No _____

Relationship to deceased _____

Signature _____ Date _____

Please send the completed form, together with the:

- **Green Certificate** (Certificate of Burial or Cremation);
- **copy of the death certificate** (a photocopy is acceptable); and
- **copy of the deceased's consent** (where applicable)

without delay to: The Designated Individual (Anatomy)
School of Life Sciences (Floor E)
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Nottingham
NG7 2UH