

# **Guidelines for the Utilization of Pathology Assistants in Medical Examiner Offices**

October 2001

**Leroy Riddick, M.D., Donald Jason, M.D., J.D., MFG Gilliland, M.D., Charles Wetli, M.D., Jeffrey Jentzen, M.D.**

## **Abstract**

The establishment of non-physician providers in anatomic pathology as active participants in medical examiner's offices has resulted in concerns regarding the supervision and medical practice of pathologists' assistants. Forensic pathologists possess the scientific expertise to investigate sudden and violent deaths. Individuals with varying degrees of training routinely assist the forensic pathologist in many aspects of the medical examiner's office including scene inspection, investigation, and autopsy dissection. The National Association of Medical Examiners in accordance with its *Standards of Inspection and Accreditation* maintains that the performance of an autopsy and other medically related duties are considered the practice of medicine. NAME proposes the following as guidelines for the use of trained pathology assistants in medicolegal death investigation systems.

## **Introduction**

In recent years, changes in the pathology workplace increasingly have incorporated non-physician providers in areas related to modern death investigation such as the performance of autopsies, body examination and scene inspection. Pathologists' assistants (PA) are non-physician graduate level providers in anatomic pathology functioning as dependent practitioners under the direction of anatomic pathologists. The first pathologists' assistant (PA) training program was established in 1969 and accredited by National Accrediting Agency for Clinical Laboratory Services. There are currently five accredited programs in the United States. Their duties typically include examination, dissection and processing of tissue samples and autopsy prosection.<sup>1</sup>

In the United States, forensic pathologists perform the majority of autopsies for medicolegal purposes. The practice of forensic pathology incorporates the death scene investigation, clinical investigation, autopsy inspection and assimilation and synthesis of the facts of the case to arrive at a medical decision. The autopsy is the practice of medicine. A medical examiner is defined as a physician-pathologist with special training in forensic pathology preferably certified in anatomic and forensic pathology by the American Board of Pathology.<sup>2</sup> Only those individuals who possess knowledge of pathophysiology learned through clinical as well as laboratory medicine are capable of making medical decisions and diagnosis at a legal standard. Despite their education and experience, forensic pathologists daily confront medical issues and challenges at the autopsy table, never seen or anticipated, that require the expertise of a trained physician. In addition, in performing the autopsy, the pathologist has a moral obligation to the profession of pathology, the decedent's family and the community at large.

The duties of morgue attendants and lay death investigators are detailed in the *NAME Standards for Accreditation*.<sup>3</sup> These duties generally encompass the acceptance and release of bodies, weight and measures, fingerprinting, removal of clothing and obtaining radiographs. Investigative duties relate to the collection of information, scene investigation and evidence collection.

The pathologist-medical examiner may elect to delegate certain aspects of the scene inspection, investigation or postmortem examination to a non-physician or pathologist's assistant under his/her supervision. However, the pathologist-medical examiner must ultimately assume the responsibility for the investigation of deaths and in particular all aspects relating to the scene, body examination and autopsy under his/her jurisdiction. As contained in the *NAME Standards for Accreditation*, "The pathologist should perform the complete examination, personally observing all findings so that his interpretation may be sound." The complete examination includes inspection of the body externally with and without clothing, making the primary incisions, in vitro inspection of all organs, body cavities, and cranium, removal of the organs from the body and ex situ dissection of the organs. The pathologists take tissue for microscopic examination and interpret all slides.

The pathologist creates all autopsy reports, indicating the role the pathologists' assistant played in the examination.

To exclude pathology assistants totally from participation in medical examiner offices at this time would be both economically impractical and professionally unwise.

Pathologist's assistants are currently engaged in a myriad of duties within the medical examiner office and provide essential services. The National Association of Medical Examiners (NAME) therefore presents the following guidelines for the use of trained pathologist's assistants who participate in medical examiner offices. These guidelines do not apply to the activities of dieners, laboratory technicians, mortuary attendants, etc, who have not had formal training and received a degree from an accredited program. These guidelines cover individual pathologists and pathology groups who perform medicolegal autopsies and investigations.

### **Guidelines for Use of Pathology Assistants in Medico-legal Death Investigations**

**Qualifications:** A pathologist assistant (PA) has received advanced training by an accredited program and is certified by the National Accrediting Agency for Clinical Laboratory Services.

**Medical Examiner Office:** For the purpose of these guidelines, a medical examiner office is defined as a public agency that is a governmental agency supported by taxpayers and established by law for the investigation of sudden, unexpected or violent deaths.

**Duties:** The pathologists' assistant (PA) assists the pathologist in the performance of duties related to the inspection, handling, processing and dissection of the body. The following guidelines pertain to the activities of the pathologist assistant.

#### **External Body Examination:**

- A. Prepares and supplies the autopsy suite for examinations.

- B. Adheres to established standards of health and safety with respect to chemical, biological and physical agents established by the various accreditations (CAP, NAME) or governmental agencies (OSHA, NIOSH).
- C. Adheres to safety regulations and has received required training in regards to obtaining radiographs.
- D. Removes clothing and personal effects under the direction and supervision of the pathologist.
- E. Labels containers and specimens for toxicological specimens, trace evidence and tissues under direction of the pathologist. The pathologist maintains the chain of custody.
- F. Assists the pathologist, law enforcement officers and/or other criminalist to observe, document, retain, and if appropriate, store evidence.

**Autopsy Dissection:**

- A. Assists with evisceration under the direct guidance of the pathologist. The pathologist must be physically present at the autopsy table where the procedure is performed.
- B. Incises the scalp, incises the skull and removes the brain under the direction of the pathologist.
- C. Performs additional procedures such as perfusion of lungs, incising of intestine, perfusing coronary arteries and other special procedure under pathologist's supervision.
- D. Takes tissue for microscopic examination under the direction of the pathologist.

**Release of Information:**

- A. In regards to the non-medical aspects of death investigation, the pathologist is responsible to communicate all official autopsy findings to the family, law enforcement, media, and attorneys.

-----

<sup>1</sup> Grzbicki DM, et al., “National Practice Characteristics and Utilization of Pathologists’ Assistants,” *Arch Pathol Lab Med.*, 2001;125:905-912.

<sup>2</sup> Randall BB, Fierro MF, Froede RC, “Practice Guidelines for Forensic Pathology,” *Arch Pathol Lab Med.* 1998;122:1056-1064.

<sup>3</sup> *Inspection and Accreditation Policies and Procedure Manual* (St. Louis, Missouri: National Association of Medical Examiners, 1997).