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## **POLICY AND PROCEDURE**

### **UNIVERSITY OF NORTH CAROLINA HOSPITALS GRADUATE MEDICAL EDUCATION POLICY ON AUTOPSIES AND MORBIDITY/MORTALITY CONFERENCES**

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#### **I. Autopsy**

- a. All patient deaths at UNC Hospitals who receive care by residents and attendings should have an autopsy performed whenever possible and appropriate. All autopsies done at UNC Hospitals are performed in a timely manner.
- b. The attending signs the authorization form for an autopsy and receives the final report of the autopsy.
- c. The attending must review the report with the resident involved in the care of the patient.
- d. Residents involved in the care of the patient should review the gross pathological and/or histological specimens soon after the autopsy is performed. The pathologist will page the attending and/or resident involved in the care of the patient at the beginning of the autopsy.
- e. The computerized Clinical Information System of UNC Hospitals will have the signed autopsy protocol immediately upon sign-out by the resident and attending in Pathology. Once on the clinical workstation the autopsy reports will become fully available to all UNC Hospitals attending physicians and residents for review.
- f. A review of the autopsy report must occur at the departments Morbidity and Mortality Conference.

#### **II. Morbidity and Mortality Conference**

The UNC Hospitals as a Sponsoring Institution for Graduate Medical Education must ensure a formal quality-assurance program related to major morbidities and all deaths from all training programs. The quality assurance endeavor must link morbidities and mortalities with improvement of patient care. The Morbidity and Mortality Conference must be conducted in each department as proscribed by the specialty program requirements. This conference must be attended by a faculty and residents.

- a. A formal attendance list for both residents and attendings must be with each report of the Morbidity and Mortality Conference. Each program may assign an attending responsible for the Morbidity and Mortality Conference.
- b. The residents should present the patients in a formal manner.
- c. All cartoons and/or handouts must have a date as well as the attestation that it is confidential information to include “UNC Liability Insurance Trust Fund” and “Confidential Patient Care Information”.

- d. Significant morbidities may be defined by each department such as unscheduled ICU admissions, bowel, vascular, ureteral injuries, reoperation or readmit, prolonged admission, dehiscence, and unsuspected malignancies.
- e. All mortalities must be presented. Where there is an autopsy it is strongly recommended that the Pathology department be represented to further link quality of care and outcome. Consultants from other departments in the active management of the patient should be invited.
- f. A representative from the risk management department must be invited to each conference.
- g. There should be open and free constructive discussion of the morbidities as well as the mortalities as it relates to quality assurance and improved patient care.

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