



Form B11 - Summary of postmortem findings

Authorisation for Postmortem?	<input type="checkbox"/> Coroner <input type="checkbox"/> Consent of family member
Pathologist conducting postmortem	<input type="checkbox"/> Paediatric pathologist <input type="checkbox"/> General (adult) pathologist <input type="checkbox"/> Forensic pathologist <input type="checkbox"/> Other (specify)
Summary of clinical history from pathologist	
Ancillary investigations carried out	<input type="checkbox"/> Scene/circumstances investigation (specify what, when, by whom and summarise results) <input type="checkbox"/> Xray skeletal survey (specify by whom & results) <input type="checkbox"/> Microbiology (specify what, when & results) <input type="checkbox"/> Virology (specify what, when & results) <input type="checkbox"/> Toxicology (specify) <input type="checkbox"/> Metabolic investigations (specify) <input type="checkbox"/> Cytogenetics (chromosomes) <input type="checkbox"/> Other investigations (specify)

Form B11 - Summary of postmortem findings (cont.)

Summary of Gross (naked eye) pathology findings	
Summary of Histopathology findings	
Summary of Pathologist's conclusions on cause of death and contributory factors	
Cause of Death as given by Pathologist	<input type="checkbox"/> Ia <input type="checkbox"/> Ib <input type="checkbox"/> Ic <input type="checkbox"/> II
Any other relevant information from Postmortem examination	
Name of person completing form Designation	Date / /