



Jewish position on autopsies and interaction with the Coroner's Court

In general, Jewish Law forbids the desecration of the human body unless absolutely necessary and after consultation with Rabbinic authorities.

Prenatal Procedure: With regard to stillborn, premature births and fetuses, disposal is NOT PERMITTED as they require burial under Jewish Law, in such cases we should be contacted and the parents informed accordingly of the procedure as above.

Coronial Investigation (extract from “The Coroners Process”)

MCK takes the role of advising and liaising with the Coroner's Court and assisting next of kin so that the coroner can make a decision as quickly as possible.

Purpose of coronial investigation

The role of coroners is to investigate certain deaths to determine how and why they happened in order to help prevent similar deaths from occurring. It is their role to find out, if possible:

- the identity of the person who has died
- the cause of the death
- how the death occurred and, in some cases, the circumstances surrounding it
- the particulars needed to register a death with the Registry of Births, Deaths and Marriages.

The Coroners Act 2008 requires coroners to investigate all deaths defined as being ‘reportable’ or ‘reviewable’ deaths .

There does not have to be anything suspicious about the death for a coroner to be involved. Many investigations involve people who may have died due to natural causes.

Reportable deaths

Coroners are required to investigate a particular category of death called ‘reportable deaths’. The court must be advised of a reportable death in order for a coroner to investigate.

What is a reportable death?

A death is considered reportable if:

- the body is in Victoria; or
- the death occurred in Victoria; or
- the cause of the death occurred in Victoria; or
- the person ordinarily resided in Victoria at the time of death; and
- the death appears to have been unexpected, unnatural or violent or to have resulted, **directly or indirectly, from an accident or injury (including falls)**; or
- the **death occurred during a medical procedure; or following a medical procedure** where the death is or may be causally related to the medical procedure and a **registered medical practitioner would not, immediately before the procedure was undertaken, have reasonably expected the death to occur**; or
- the identity of the person was not known; or
- a medical practitioner has not signed, and is not likely to sign, a death certificate certifying the cause of death; or

- a death has occurred at a place outside Victoria and the cause of death is not certified and is unlikely to be certified; or
- the person, immediately before their death was a person placed in ‘custody or care’ or
- a person immediately before their death was a patient within the meaning of the Mental Health Act 1986; or
- the person was under the control, care or custody of the Secretary to the Department of Justice or a member of the police force; or
- the person was subject to a non-custodial supervision order under section 26 of the Crimes (Mental Impairment and Unfitness to be Tried) Act 1997.

Who tells the coroner about a reportable death?

Usually medical practitioners or the police report deaths to the coroner.

A member of the community must also notify the court of a reportable death if they have grounds to believe that the death has not already been reported.

Preliminary examinations

Once a person’s death has been reported, a doctor or pathologist will examine him or her to provide information to the coroner. This preliminary examination is minimally invasive and will take place at the Victorian Institute of Forensic Medicine at the State Coronial Services Centre at 65 Kavanagh Street, Southbank, or at a regional hospital location.

A preliminary examination may include one or more of the following procedures:

- a visual examination
- the collection and review of information about the person who has died, including personal and health information
- the taking of bodily fluid such as blood, urine, saliva and mucus — in some cases a small incision may be needed to collect these samples for testing
- the taking of samples from the surface of the body of the person who has died including swabs from wounds and inner cheek, hair samples and samples from under fingernails and from the skin for testing
- imaging of the person who has died such as computed tomography (CT scans), magnetic resonance imaging (MRI scan), x-rays, ultrasound and photography fingerprinting.

The pathologist uses this information to make a recommendation to the coroner about whether further medical investigations, such as an autopsy, are required to help establish the cause of death.

The coroner then considers the pathologist’s recommendation and decides whether further medical investigations are required for their investigation.

Autopsy

What is an autopsy?

An autopsy — sometimes called a post-mortem examination — is a type of medical procedure performed by a pathologist.

A pathologist is a qualified doctor specialising in pathology, which is the science that looks at the effects on the body of disease or damage.

What does it involve?

If the coroner directs an autopsy be performed, a pathologist will carry out an external and internal examination of the body. The person’s body is treated with respect at all times.

Techniques similar to those used in surgical operations are involved. The major organs of the body are examined and specimens are taken for more detailed examination.

These may include tests for:

- infection (microbiology)
- changes in body tissue and organs (histology)
- chemicals, for example medication, drugs or poisons (toxicology and pharmacology).

These tests are carried out on samples of blood or tissue that are taken from the person's body and retained for that purpose.

Who makes the decision for an autopsy?

The coroner makes the decision that an autopsy should be conducted after considering the wishes of the senior next of kin and any information provided by police, pathologists or other scientists.

Why are autopsies necessary in some cases?

The coroner will direct that an autopsy be performed if he or she is satisfied that it will assist in the investigation into a person's death and/or the circumstances surrounding the death.

An autopsy can provide detailed information about the person's health condition and give an understanding of the various factors that may have contributed to their death. Sometimes, even after an autopsy, the cause of the person's death may not be able to be ascertained.

If a coroner directs an autopsy, Coronial Admissions and Enquiries (CA&E) staff will contact the senior next of kin to explain the process, answer any questions, and advise of the right to object to the autopsy.

Objecting to an autopsy

The senior next of kin has the right to object to an autopsy being performed.

If an objection to an autopsy is intended for religious, cultural or other reasons, the senior next of kin will need to put their objection in writing to the coroner and addressed to Coronial Admissions and Enquiries (CA&E) stating their reasons. This can be by email or Fax. **MCK will assist the senior next of kin this process.**

The written objection must be made within 48 hours of a coroner ordering that an autopsy be performed. The autopsy will not go ahead during this time.

The coroner will take these concerns into account and CA&E staff will advise of the coroner's decision.

If, after receiving an objection, the coroner decides an autopsy should still be performed the senior next of kin can apply to the Supreme Court for an order preventing it.

This will be required within 48 hours of being notified that the objection has been refused. It may be appropriate to seek legal advice and assistance before making a Supreme Court application.

The Melbourne Chevra Kadisha is a non-profit religious organisation which provides service 24 hours a day, seven days a week by phoning 9534-0208 .

The Melbourne Chevra Kadisha