



**MORTUARY UNIT  
KANOWIT HOSPITAL**

**GUIDELINES MANAGEMENT OF MORTUARY SERVICES, KANOWIT HOSPITAL.**

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<b>SUMMARY</b>	This policy and procedure outlines current standards of practice for Mortuary Unit and they serve as standard operating procedures to meet the information needs of Kanowit Hospital and consistent with present Regulatory Requirements.
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## **1. INTRODUCTION**

### **1.1 LOCATION**

The Mortuary / Forensic Medicine Unit has its own building which is located adjacent to the hospital's second entrance which is also known as the back entrance of the hospital. It is accessible from both the main entrance and the second entrance of the hospital.

## **2. OBJECTIVES**

To provide Mortuary / Forensic Medicine services that utilize principles of medicine and medical sciences in assisting the legal authorities in the adjudication of justice in accordance with the current quality standard that are independent and impartial and meet the legal aspects of the country.

- 2.1.1 Managing the Death in the Hospital and Brought in Dead (BID).
- 2.1.2 To provide post-mortem examination and assist in the death investigation of clinical autopsy or police cases in a professional, efficient, and effective manner.
- 2.1.3 To provide services in the process of identifying the remains or corpses by the legal next of kin.
- 2.1.4 To ensure the management of forensic medical evidence will comply with the chain of custody and law of evidence.
- 2.1.5 To provide services to manage deaths involving infectious disease outbreaks such as SARS and COVID-19 cases.

### **3. SCOPE OF SERVICE**

The scope of service is to provide forensic medical expertise which covers forensic pathology and clinical forensic medicine, including providing mortuary services. The major components/functions of the Mortuary / Forensic Medicine Service in the Hospital are as follows:

- 3.1.1 Management of the Death in the Hospital.
- 3.1.2 Management of the Brought-in Death.
- 3.1.3 Post Mortem Examination
- 3.1.4 Management of evidence and specimen for medicolegal cases and clinical cases.
- 3.1.5 Management of Medical Report
- 3.1.6 Management of deaths caused by infectious diseases (SARS, COVID-19) in collaboration with the Assistant Environmental Health Officer (PPKP).

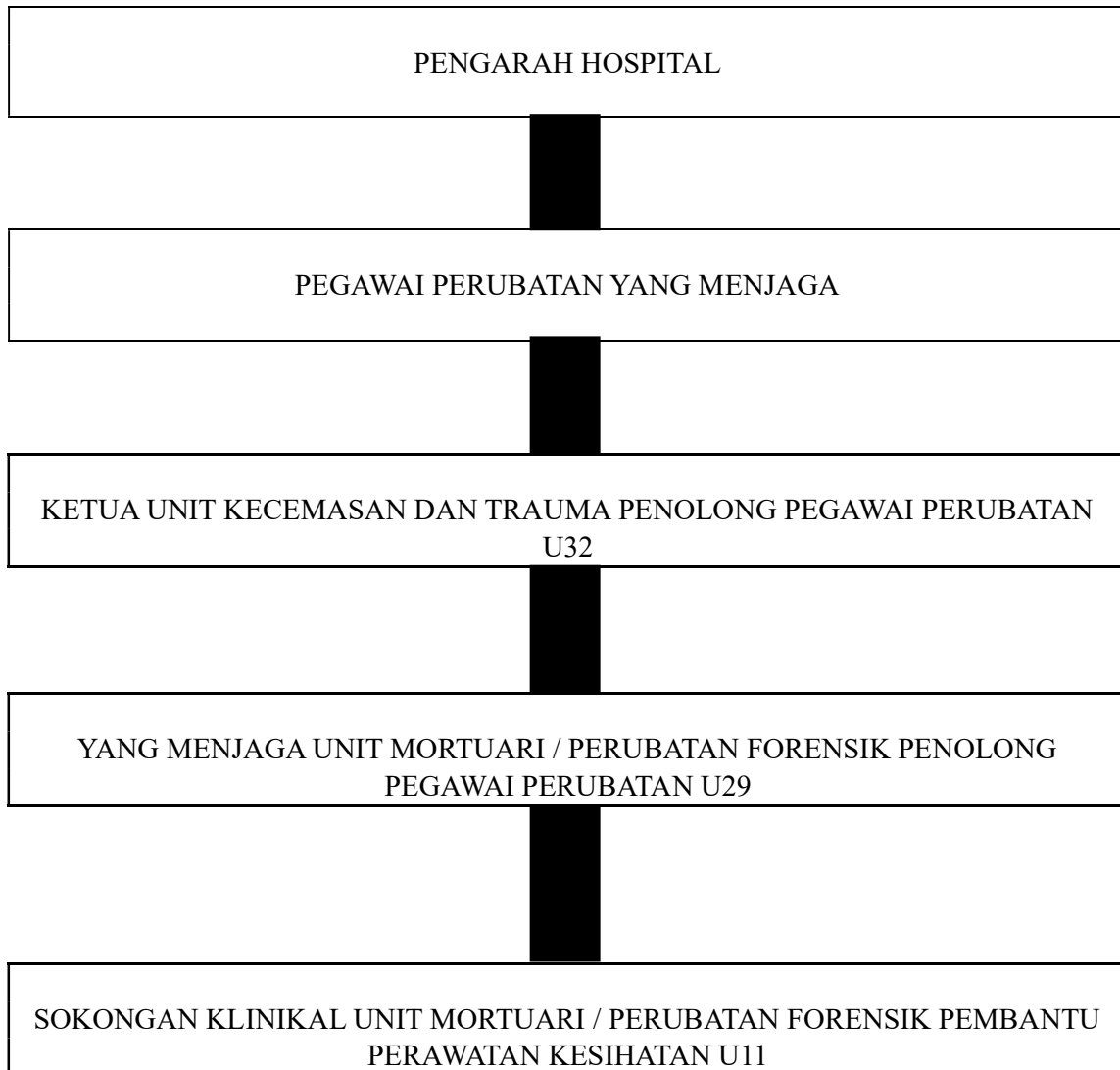
### **4. ORGANISATIONAL STRUCTURE**

- 1 The Mortuary / Forensic Medicine Unit adopts a functional structure in its organization for the enhancement of efficiency in core functions and roles.
- 2 The Mortuary / Forensic Medicine Unit staff comprised of 2 personnel, one each; an Assistant Medical Officer (AMO) and a Health Care Assistant (PPK).
- 3 The Assistant Medical Officer (U29) oversees the Mortuary / Forensic Medicine Unit and in turn, he is responsible to directly report to the Hospital Director.
- 4 Authority and responsibilities are clearly defined in this hierarchical structure with support staff under the control of supervisors of the Unit.

*(Refer to Chart 1 for the Organisation chart)*

*Chart 1*

**ORGANISATION CHART OF THE MORTUARY / FORENSIC MEDICINE  
UNIT KANOWIT HOSPITAL**



## 5. OPERATING HOURS

Kanowit Hospital's mortuary is open for 24 hours and whole year round. On normal working days, the personnel will be working on an office hour basis and if there are cases after office hour, weekend or during a public holiday, the personnel will be working on a standby basis. If there are no cases on that day, the personnel will be stationed at the emergency and trauma unit.

- 1 The operating hours for the Mortuary / Forensic Medicine Unit are as follows:

Working Days	Time
Monday – Thursday	8.00am to 1.00pm 2.00pm to 5.00pm
Friday	8.00am to 11.45am 2.15pm to 5.00pm
Weekday (5pm – 8am next day) Saturday Sunday Public Holiday	ON STANDBY

- 2 The Mortuary / Forensic Unit management work process are as follows:

Procedure	Time
Managing deaths in hospitals and brought-in-dead (BID) cases.	24 Hours
Post-mortem examinations are carried out as soon as the POL 61 order is received from Police Officer / Investigating Officer of the Royal Malaysian Police (PDRM)	During office hours

## **6. MANAGEMENT OF DEATH AT THE HOSPITAL**

### **6.1 Death in Hospital**

- 6.1.1 All deaths shall be confirmed by the attending Medical Officer. The attending Medical Officer, on confirming the death of the patient, shall register the death using the form 'Form VIII Medical Certificate of Cause of Death (BD9/68).
- 6.1.2 Last office procedures and documentation shall be undertaken by the ward staff which includes the removal of any tubings and medical devices. Nevertheless, the attending Medical Officer may, if he is of the opinion such a device may have contributed to or caused the death of the patient, he shall instruct to leave the medical devices in situ for postmortem examination.
- 6.1.3 The family shall be informed by the medical staff of the patient's death in the ward. If there is no next-of-kin when the deceased was confirmed dead, the staff ward shall inform the next-of-kin by phone. If the next of kin cannot be contacted, police assistance shall be sought.
- 6.1.4 All iatrogenic/medical intervention wounds must be properly secured from leakage.
- 6.1.5 All notifiable infectious deaths shall be managed appropriately according to Standard Precautions.
- 6.1.6 The bodies must be swabbed for RTK to confirm the status of COVID-19 before being handed over to the Mortuary/Forensic Medicine Unit staff. If the RTK swab results are positive, staff at the wards need to take RT-PCR swabs for the purpose of confirming the body's COVID-19 status for the purpose of managing at the Mortuary /Forensic Medicine Unit.
- 6.1.7 All body shall be tagged as follows:
  - I. At the deceased's toe and the outer shroud front of decease body.
  - II. Form Tag Pengenalan Mayat (white) for Non-Police Case.
  - III. Form Tag Pengenalan Mayat (red) for Police Case.
  - IV. If any documentation and tagging are not done properly, mortuary /forensic medicine staff may refuse to bring the body to the Mortuary /Forensic Medicine Unit until the problem is rectified.
- 6.1.8 Bodies need to be kept in the ward after death not less than one hour or while awaiting mortuary/forensic medicine staff arrival before sending to the Mortuary /Forensic Medicine Unit.

- 6.1.9 For non-police cases, the cause of death (if known) must be completely documented by the attending Medical Officer with his/her name, signature, and date on all the relevant documents/forms required from the ward prior to removal of the body. If documentation is not complete, the body shall not be removed from the ward.
- 6.1.10 Ward staff must ensure that all documentations related to the confirmation of death is completed first before handing over the body to the Mortuary /Forensic Medicine Unit such as:
- I. Triage Form (if case is from the Emergency and Trauma Unit)
  - II. FORM VIII: Medical Certificate of Cause of Death
  - III. Identification card of the Deceased.
  - IV. A copy of the Next-Of-Kin identification card.
  - V. Report of Examination on Death form.
  - VI. Cardiac long lead II results.
  - VII. COVID-19 status result: RTK or PCR.
- 6.1.11 Upon confirmation of the death, the ward staff shall inform Mortuary /Forensic Medicine Unit Assistant Medical Officer (AMO) and Health Care Assistant (PPK) not more than 30 minutes.

## **6.2 Transfer of Dead Body to Mortuary / Forensic Medicine Unit**

- 6.2.1 The Mortuary/ Forensic Medicine Unit is ready to receive and store bodies from wards, brought-in-dead cases, and death brought by the police. However, the mortuary/ forensic staff must be informed in advance before sending the body to the Mortuary / Forensic Medicine Unit.
- 6.2.2 The mortuary/ forensic medicine staff will transport the body to the mortuary with the designated trolley not less than one (1) hour and not more than 2 hours in the ward after confirmation of death.
- 6.2.3 The body shall be transferred to the Mortuary/ Forensic Medicine Unit with the relevant documents attached as specified in 6.1.1 Death in Hospital and after the procedure specified in 6.1.1 has been completed by the ward/unit staff.
- 6.2.4 Patient identification tag (while receiving treatment at the ward) shall not be removed from the deceased body.

- 6.2.5 Staff at the ward or attending Medical Officer shall inform Police Station regarding death at ward.

### **6.3 Registration of Dead Body at Mortuary / Forensic Medicine Unit**

- 6.3.1 All deaths in the hospital shall be registered at the Mortuary/ Forensic Medicine Unit.
- 6.3.2 Deceased information must be recorded in the Death Registration Book.
- 6.3.3 Police cases shall be entered using red ink whereas other cases shall be entered using black or blue ink.

### **6.4 Body Storage**

Kanowit Hospital's Mortuary/ Forensic Medicine Unit only has one (1) unit of body freezer with a capacity of four (4) compartments without partitions to store corpses.

- 6.4.1 The body shall be stored in a body freezer, not unless identified and claimed within 3 hours from the time of receipt at the Mortuary/ Forensic Medicine Unit.
- 6.4.2 The identification label on the body freezer door must correspond with the identity of the dead body placed inside.
- 6.4.3 The body will be kept in a single layer "Body Bag" if the body is not at high risk or suspected of infectious diseases.
- 6.4.4 The placement of high-risk bodies is covered in a double layered "Body Bag" to prevent the transmission of infection to the mortuary/forensic staff and to other bodies in the body freezer.
- 6.4.5 The bodies brought by the police will be kept in a police "Body Bag" and placed in a body freezer by hospital's personnels and witnessed by the police themselves to prevent evidence from being tempered with.
- 6.4.6 Ministry of Health does not provide temporary body storage services for private establishments or individuals. However, temporary body storage may be allowed upon formal request by relevant government agencies and with the approval of the Hospital Director. The body shall be registered and managed accordingly as a Brought in Dead case.

## **6.5 Release of Dead Body**

- 6.5.1 The Mortuary/ Forensic Medicine Unit Assistant Medical Officer (AMO) is responsible for the release of the body from the Mortuary /Forensic Medicine Unit to the claimants after verifying all relevant details pertaining to the deceased and claimants of the body. The body must be released to the right claimant.
- 6.5.2 The claimants shall make their own arrangements for the process of performing the funeral rites in accordance with the respective religious bodies and transportation of the body.
- 6.5.3 The hospital only provides room facilities for the performance of the last rites by the claimants.
- 6.5.4 The mortuary/ forensic staff shall not be involved in the procedures of last rites including escorting the body during transportation.
- 6.5.5 Hospital Kanowit shall not be held responsible for any untoward incidences once the dead body has been claimed.
- 6.5.6 Ministry of Health does not provide embalming services.
- 6.5.7 The body shall be released within 3 hours after being claimed by the next of kin.
- 6.5.8 For all dead bodies classified as police cases, the police shall be notified, and clearance shall be obtained before the release of the bodies.
- 6.5.9 For all dead bodies of foreigners, the related High Commission/ Embassy shall be notified in keeping with Vienna Convention on Consular Relation 1963 Article 37 prior to releasing the dead body to the claimants/ appointed representatives.
- 6.5.10 The claimants shall make their own arrangements with the funeral operators based on *Garis Panduan Pengimportan Atau Pengeksportan Mayat atau Manamana Bahagiannya (Edisi Pertama) 2006*.

## **6.6 Management of Unknown Body**

- 6.6.1 Mortuary/ Forensic Assistant Medical Officer shall make sure police report have been made by the Medical Officer or ward staff before registering the body at the Mortuary/ Forensic Medicine Unit.
- 6.6.2 Make sure public/ media announcement have been made through the proper channel, which have been set by the hospital.

- 6.6.3 The Medical Officer handling the case needs to contact the social worker in Sibu and make an application to obtain the details of the family of the deceased to the Jabatan Pendaftaran Negara Malaysia to find the Next-of-Kin or heirs for the body claim process.
- 6.6.4 If there is no claim after fourteen (14) days, the management of the unclaimed corpse will be managed in accordance with the *Pekeliling Ketua Pengarah Kesihatan Bil 5/2008 (MOH/P/PAK/164.08 (GU))*. The required form is as follows:
- I. **Borang 1:** Pemberitahuan Mengenai Mayat Yang Tidak Dituntut Lebih Dari 14 Hari Di Unit Perubatan Forensik.
  - II. **Borang 3:** Arahan Pelupusan (Disposal) Mayat Yang Tidak Dituntut.

### **6.7 Management of Brought-In-Dead (BID)**

- 6.7.1 All Brought-in-Dead bodies brought/ accompanied by police, shall go directly to the Mortuary/ Forensic Medicine Unit.
- 6.7.2 Brought-in-Dead bodies brought by family members/ public shall be seen and registered at the Emergency and Trauma Department prior to transferring the body to the Mortuary/ Forensic Medicine Unit.
- 6.7.3 The police shall decide the need for forensic postmortem examination and provide a POL61 order.

### **6.8 Post-Mortem Examination**

- 6.8.1 Prior to post-mortem, all the documents and forms must be prepared and must come together with Polis 61 Order (for medico-legal cases) or clinical autopsy consent (for non-medico-legal cases).
- 6.8.2 The autopsy procedure will be performed by the Medical Officer handling the case or the Medical Officer on duty "second on-call" after discussing it with the Forensic Medical Specialist at Sarawak General Hospital (SGH).
- 6.8.3 The procedure will only be performed during office hours, which is from Monday to Friday between 8.00 am to 5.00 pm.
- 6.8.4 For the procedure, please refer to *Surat Pekeliling Ketua Pengarah Kesihatan Bil 17/2008 Garispanduan Bedah-siasat Mayat di Hospital-Hospital Kementerian Kesihatan Malaysia, 31 October 2008*.

## **6.9 Management of evidence and specimen**

- 6.9.1 To ensure an intact chain of custody, all evidence and specimens taken are handed over immediately to the Investigating Police Officer (I.P.O).
- 6.9.2 The I.P.O shall be responsible for the custody and transmission of the evidence and specimens to the relevant laboratories.
- 6.9.3 The specimen shall be collected by Medical Officer only in accordance with the Standard Precautions.
- 6.9.4 The specimen shall be collected in the appropriate container, labelled, and sealed appropriately with the initials of the Medical Officer who collects the specimen.
- 6.9.5 The *Borang Pengendalian Spesimen Mediko-Legal* will be filled for specimens taken for every case.

## **6.10 Management of Post-Mortem Report**

- 6.10.1 The post-mortem report along with other documents related to the autopsy must be sent and stored at the Medical Records Unit.
- 6.10.2 Appointed personnel will be responsible in coordinating and managing post-mortem reports.
- 6.10.3 For non-complicated cases, a post-mortem report shall be released within 1 month after request.
- 6.10.4 A post-mortem report could only be prepared by the person who conducts the post-mortem examination.
- 6.10.5 For the procedure, please refer to:
  - I. *Surat Pekeliling Ketua Pengarah Kesihatan Bil 17/2008 Garispanduan Bedah-siasat Mayat di Hospital-Hospital Kementerian Kesihatan Malaysia, 31 October 2008.*
  - II. *Surat Pekeliling Ketua Pengarah Kesihatan Bil 16/2010 Garispanduan Penyediaan Laporan Perubatan di Hospital-hospital dan Institusi Perubatan, 4 Jun 2010.*

## **7. MANAGEMENT OF DEAD BODIES OF SUSPECTED OR CONFIRMED COVID-19 AT THE HOSPITAL**

### **7.1 Death in Hospital COVID-19 cases**

- 7.1.1** All deaths shall be confirmed by the attending Medical Officer. The attending Medical Officer, on confirming the death of the patient, shall register the death using the form 'Form VIII Medical Certificate of Cause of Death (BD9/68).
- 7.1.2** Bodies of suspected or confirmed COVID-19 shall be sent from the Emergency and Trauma Unit or ward to the mortuary as soon as practicable and must comply with PPE protocol.
- 7.1.3** Last office procedures and documentation shall be undertaken by the ward staff which includes the removal of any tubings and medical devices. Sampling for all suspected COVID-19 cases shall be taken by the respective team.
- 7.1.4** Relatives are strictly prohibited to handle the body.
- 7.1.5** The body must be wrapped with linen and Mortuary / Forensic Medicine staff will place the body into one (1) body bag for the first layer. Then place inside the second layer body bag and must be wiped or sprayed especially around the zipper with disinfectant (0.5% sodium hypochlorite).
- 7.1.6** All body shall be tagged as follow:  
At the deceased toe and the outer shroud front of deceased body
- a) Form Tag Pengenalannya Mayat (white) for Non-Police Case.
  - b) Form Tag Pengenalannya Mayat (red) for Police Case.
- 7.1.7** For non-police cases, the cause of death (if known) must be completely documented by the attending Medical Officer with his/her name, signature, and date on all the relevant documents/forms of the body from the ward prior to removal. If documentation is not complete, the body shall not be removed from the ward.
- 7.1.8** Staff at wards must ensure that all documentation related to the confirmation of death is completed first before handing over the body to the Mortuary / Forensic Medicine Unit such as:
- a) Triage Form (Emergency and Trauma Unit)
  - b) FORM VIII: Medical Certificate Of Cause Of Death
  - c) Identification card of the Deceased.

- d) A copy of the Next-Of-Kin identification card.
- e) Report of Examination On Death form.
- f) Cardiac long lead II results.
- g) COVID-19 status result: RTK or PCR.
- h) Case Notification to District Health Office (PKD).

7.1.9 For the procedure, please refer

- i. *ANNEX20: Guidelines for the handling of dead bodies of suspected or confirmed COVID-19.*
- ii. *ANNEX20A: Guidelines for the handling of dead bodies of suspected or confirmed COVID-19 (Second edition).*
- iii. *ANNEX45: Classification of COVID-19 Death.*

## **7.2 Transfer of Body with suspected or confirmed COVID-19 to Mortuary / Forensic Medicine Unit**

The Mortuary / Forensic Medicine Unit is ready to receive and store bodies of suspected or confirmed COVID-19 cases from wards, brought in death cases, and death brought by the police. However, the mortuary/forensic staff must be informed in advance before sending the body to the Mortuary / Forensic Medicine Unit.

- 7.2.1 The mortuary/forensic medicine staff will wear appropriate PPE and transport the deceased to the mortuary with the body wrapped inside two (2) layers of body bag and transport using a designated trolley as soon as practicable not less than one (1) hour and not more than 2 hours in the ward after confirmation of death.
- 7.2.2 The body shall be transferred to the Mortuary / Forensic Medicine Unit with the relevant documents attached as specified in 6.1 Death in Hospital and after the procedure specified in 6.8.1 has been completed by the ward/unit staff.
- 7.2.3 Patient identification tag (during treatment at the ward) shall not be removed from the deceased body.
- 7.2.4 Staff at the ward or attending Medical Officer shall inform Police Station regarding death and notify the case to the respective District Health Office (PKD).

- 7.2.5 Relatives are STRICTLY FORBIDDEN to touch or kiss the body. The number of relatives allowed to view the body for identification must be restricted to 1 PERSON ONLY. They must wear a minimum of fluid-resistant surgical face masks, and if needed, also wear gloves and protective aprons. They should only be allowed to stand at a minimum distance of 1 meter from the body. If the relatives are unable to come to the ETD/ward, the identification process shall be done in the mortuary.
- 7.2.6 Relatives are STRICTLY PROHIBITED to handle the body.

### **7.3 Brought In Dead (BID) with suspected COVID-19 by Police to the Mortuary / Forensic Medicine Unit**

Body/bodies of deceased suspected of COVID-19 infection from outside of hospital setting shall be informed by the police to the respective District Health Office (PKD) and the Mortuary / Forensic Medicine staff prior to sending the body/bodies to the mortuary (in accordance with “*Garis Panduan Pengurusan Kematian Disyaki COVID-19 di Luar Hospital Semasa Pandemik, KKM 2020*”).

- 7.3.1 All Brought in Dead brought/accompanied by Police shall go directly to the Mortuary / Forensic Medicine Unit.
- 7.3.2 The mortuary/forensic medicine staff will wear appropriate PPE when receiving the body.
- 7.3.3 The body shall be kept in the body freezers with two (2) layers of body bag until the laboratory test result of COVID-19 is available.
- 7.3.4 Communicate and informed the case to the on-call Medical Officer.
- 7.3.5 RTK OR PCR / rapid molecular sampling for COVID-19 shall be taken in mortuary.
- 7.3.6 If the result is POSITIVE, the police shall be informed for subsequent medicolegal investigation of death.
- 7.3.7 If the result is NEGATIVE, the police shall be informed for subsequent medico-legal investigation of death regarding the necessity for post-mortem examination and the body can be released following the standard body release as per “*Surat Pekeliling Ketua Pengarah Kesihatan Malaysia Bil. 10/2012 Standard Operating Procedure of Forensic Medicine Services*”.

#### **7.4 Brought In Dead (BID) with suspected COVID-19 by Other than Police to the Emergency and Trauma Unit**

Body/bodies of suspected COVID-19 infection may be brought in dead to Emergency and Trauma Unit by those other than the police, such as the family members, members of the public or ambulance, depending on the circumstances.

- 7.4.1 Brought in Dead brought by family members/public shall be seen and registered at the Emergency and Trauma Unit prior to transferring the body to the Mortuary / Forensic Medicine Unit.
- 7.4.2 Although it is recommended to perform PCR / rapid molecular testing on BID cases, the testing for COVID-19 may use RTK professional in the Emergency and Trauma Unit.
- 7.4.3 The sampling shall be taken by the Emergency and Trauma Unit staffs. The body shall then be sent to the mortuary.
- 7.4.4 The next of kin shall be informed by the Emergency and Trauma Unit staffs regarding the sampling procedure, the turnaround time for the result and subsequent procedures that entail, depending on the COVID-19 analysis results.
- 7.4.5 If the result is POSITIVE, the Mortuary / Forensic Medicine Unit will accept the case as COVID-19 and manage it using ANNEX20A: Guidelines for the handling of dead bodies of suspected or confirmed COVID-19 (Second edition).
- 7.4.6 The body shall be kept in the body freezers with two (2) layers of body bag and Emergency and Trauma Unit staffs shall inform to the respective District Health Office (PKD).
- 7.4.7 If the result is NEGATIVE, the police shall be informed for subsequent medico-legal investigation of death regarding the necessity for post-mortem examination and the body can be released following the standard body release as per “Surat Pekeliling Ketua Pengarah Kesihatan Malaysia Bil. 10/2012 Standard Operating Procedure of Forensic Medicine Services”.

## **7.5 Post-Mortem Examination for COVID-19 cases at Mortuary / Forensic Medicine Unit.**

The Mortuary / Forensic Medicine Unit are not the suitable or appropriate autopsy facilities for performing post-mortem examination of COVID-19 bodies. The post-mortem examination, it is strongly suggested to perform in a Biosafety level (BSL) 3 post-mortem suite, or minimally in BSL 2 with negative pressure post-mortem suite. It is required to use PPE level 3 with powered air-purifying respirator (PAPR).

- 7.5.1 Prior to post-mortem, all the documents and forms must be prepared and must come together with Polis 61 Order (for medico-legal cases) or clinical autopsy consent (for non-medico-legal cases).
- 7.5.2 The respective Medical Officer handling the cases shall discuss with ID physicians and Forensic specialists (SGH).
- 7.5.3 The body shall be sent to a tertiary hospital that has the appropriate facilities and equipment as listed on ANNEX20A: Guidelines for the handling of dead bodies of suspected or confirmed COVID-19 (Second edition):
  - i. Biosafety level (BSL) 3 post-mortem suite.
  - ii. BSL 2 with negative pressure post-mortem suite.
  - iii. PPE level 3 with powered air-purifying respirator (PAPR).
- 7.5.4 The respective Medical Officer handling the cases shall discuss and informed the case with Hospital Director.
- 7.5.5 Transfer of body to other facilities must required Van Jenazah from the tertiary hospital because Mortuary / Forensic Medicine Unit, Hospital Kanowit don't have "*Van Jenazah*" for transporting body.

## **7.6 Release and Disposal of COVID-19 Body**

- 7.6.1 The Mortuary / Forensic Medicine Unit Assistant Medical Officer (AMO) and Assistant Environmental Health Officer (PPKP) is responsible for the release and disposal of the body from to the claimants after verifying all relevant details pertaining to the deceased and claimants of the body. The body must be released to the right claimant.
- 7.6.2 COVID-19 bodies shall be disposed (burial or cremation) as soon as practicable.

- 7.6.3 For the purpose of identification of COVID-19 body by relatives, the process shall be done in the mortuary with strict compliance to PPE requirements.
- 7.6.4 The mortuary/forensic staff shall not be involved in the procedures of last rites including escorting the body during transportation.
- 7.6.5 For COVID-19 bodies embalming must be avoided and exportation to foreign countries is prohibited.
- 7.6.6 Ministry of Health does not provide embalming services.
- 7.6.7 Preparation of the body according to religious rites must be conducted under the supervision of the Assistant Environmental Health Officer (PPKP).
- 7.6.8 Confirmed COVID-19 Muslim body shall not be washed. The procedure of mandi mayat shall be replaced by tayammum over the outermost body bag.
- 7.6.9 For confirmed COVID-19 non-Muslim body, all bodies shall be disposed either by burial or cremation. If any ritual body preparation is to be conducted, the procedure shall be kept at a minimum and done over the outermost body bag.
- 7.6.10 For all dead bodies classified as Police cases, the police shall be notified and clearance shall be obtained before the release of the bodies.

## **8. ORGANISATION AND MANAGEMENT MORTUARY / FORENSIC MEDICINE UNIT.**

### **8.1 Orientation for new staff at Mortuary / Forensic Medicine Unit.**

Staff who have just reported to the Mortuary / Forensic Medicine Unit are required to undergo hospital and unit orientation as soon as they report to duty.

8.1.1 Unit orientation will be conducted by the Officer-in-Charge of the Mortuary / Forensic Medicine Unit.

8.1.2 Unit orientation includes:

- i. Unit Services Profile
- ii. Unit Organization and Management
- iii. Unit Policy and Procedure
- iv. Unit Facilities and Equipment
- v. Unit Safety and Performance Improvement Activity

8.1.3 Staff who have just reported to the Mortuary / Forensic Medicine Unit are also required to report to the Infection Control Unit for orientation regarding Facility-Wide Infection Control Policies and Procedures by the Infection Control Nurse.

8.1.4 Infection Control orientation includes:

- i. Unit Services Profile
- ii. Standard Precautions Practices
- iii. Additional Precaution
- iv. Needle Stick Injury
- v. Color Coding For Mop Heads
- vi. Immunization
- vii. Issues Related To Infection Control

8.1.5 The Officer-in-Charge of the Mortuary / Forensic Medicine Unit will give orientation to new staff regarding duties and responsibilities for each position in the unit.

8.1.6 Oriented staff must complete all orientation programs given to create efficient and high-quality staff and create a safe and conducive environment in the unit

## **8.2 Safety and Performance Improvement Activities at Mortuary / Forensic Medicine Unit.**

Officer-in-charge of Mortuary / Forensic Medicine Unit shall use the Key Performance Indicator and Specific Performance Indicator to monitor unit track and trend, and ensure the provision of quality performance with staff involvement in continuous safety and performance improvement activities of the mortuary services.

- 8.2.1 All cases of shortfall in quality (SIQ) shall be investigated to find out the cause and to carry out remedial action.
- 8.2.2 All staff are trained on usage of incident reporting. Any complete incident reports are investigated and discussed with the Head of Emergency and Trauma Unit.
- 8.2.3 Incident reported must had Root Cause Analysis and action was taken to prevent recurrence.
- 8.2.4 Staff of the Mortuary / Forensic Medicine Unit must ensure that collection of data is taken for tracking and trending of Specific Performance Indicators which is listed below:
  - i. Turnaround time of  $\leq 3$  hours for releasing bodies (non-police cases) to the next of kin / claimant after body registration. (Target:  $\geq 80\%$ )
  - ii. Percentage of bodies released to the right next of kin / claimant. Sentinel event need to be investigated immediately. (Target:  $\geq 99\%$ )
  - iii. Percentage of completion of post-mortem reports for non-complicated cases from the date of post-mortem within twelve (12) weeks. (Target:  $\geq 80\%$ )
- 8.2.5 All deceased and provider that are involved in performance improvement activities shall be anonymity which is no name of person are include.
- 8.2.6 All documentation of safety and performance improvement activities are kept and confidentiality of involved person is preserved.

### **8.3 Management of Corpse Belonging at Mortuary / Forensic Medicine Unit.**

The Mortuary / Forensic Medicine Unit will not keep personal belonging of the corpse because there is no special locked cabinet to keep items, especially valuable items.

- 8.3.1 Items belonging to the dead body will be sent by the relevant ward / unit to the “Hasil” counter. After office hours or weekends, the personal belonging will be kept by the relevant ward / unit until the “Hasil” counter office is opened during office hours.
- 8.3.2 For cases brought in dead (BID) by the police, the Mortuary / Forensic Medicine Unit staff will hand over the corpse personal belonging to the Police / Investigating Officer.
- 8.3.3 Staff of the Mortuary / Forensic Medicine Unit must ensure that the “Borang Pengendalian Mayat / Anggota Badan / Janin” is filled out together with the Police / Investigating Officer for the record of handover and receipt of the deceased's personal belonging.

### **8.4 Temporary Assignment of Duties During Absence or Leave of Assistant Medical Officer (AMO) In Charge Mortuary / Forensic Medicine Unit.**

- 8.4.1 Management and administrative tasks in the unit will be taken over by the second Assistant Medical Officer Mortuary / Forensic Medicine Unit or runner Assistant Medical Officer of the shift at the Emergency and Trauma Unit during the absence of the Assistant Medical Officer-In-Charge Mortuary/ Forensic Medicine Unit.
- 8.4.2 All clinical tasks will be carried out by the Assistant Medical Officer who takes over the task.
- 8.4.3 The work process and procedure must follow the guidelines in the *Surat Pekeliling Ketua Pengarah Kesihatan Malaysia Bil. 10/2012* Standard Operating Procedure of Forensic Medicine Services.

### **8.5 Temporary Assignment of Duties During Absence or Leave of Healthcare Assistant (PPK) Mortuary / Forensic Medicine Unit.**

- 8.5.1 Management and administrative tasks in the unit will be taken over by the second Health Care Assistant (PPK) Mortuary / Forensic Medicine Unit or second Healthcare Assistant (PPK) of the shift at the Emergency

and Trauma Unit during the absence of the Health Care Assistant (PPK) Mortuary / Forensic Medicine Unit.

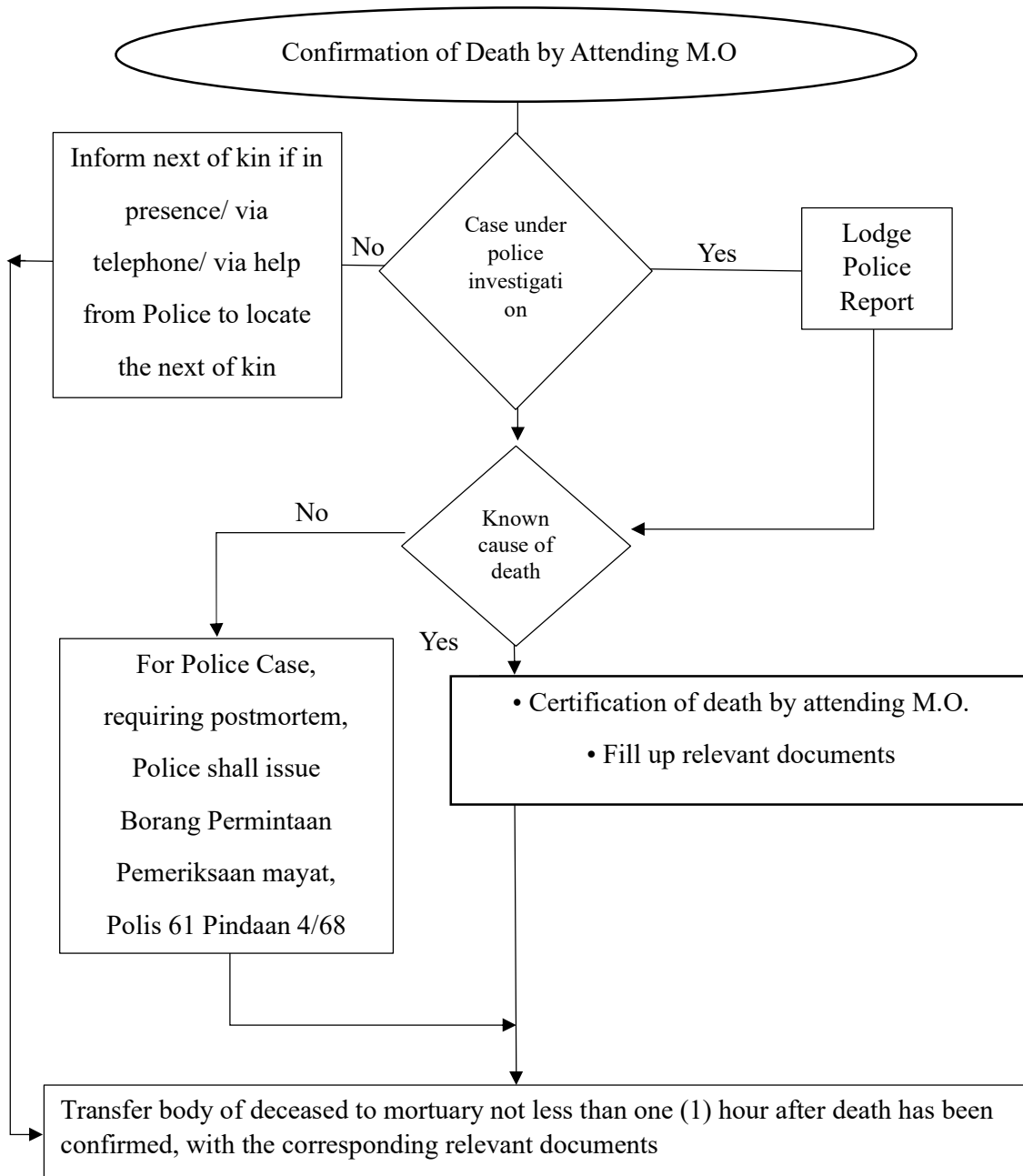
8.5.2 All clinical tasks will be carried out by the Health Care Assistant (PPK) who takes over the task.

8.5.3 The work process and procedure must follow the guidelines in the *Surat Pekeliling Ketua Pengarah Kesihatan Malaysia Bil. 10/2012* Standard Operating Procedure of Forensic Medicine Services.

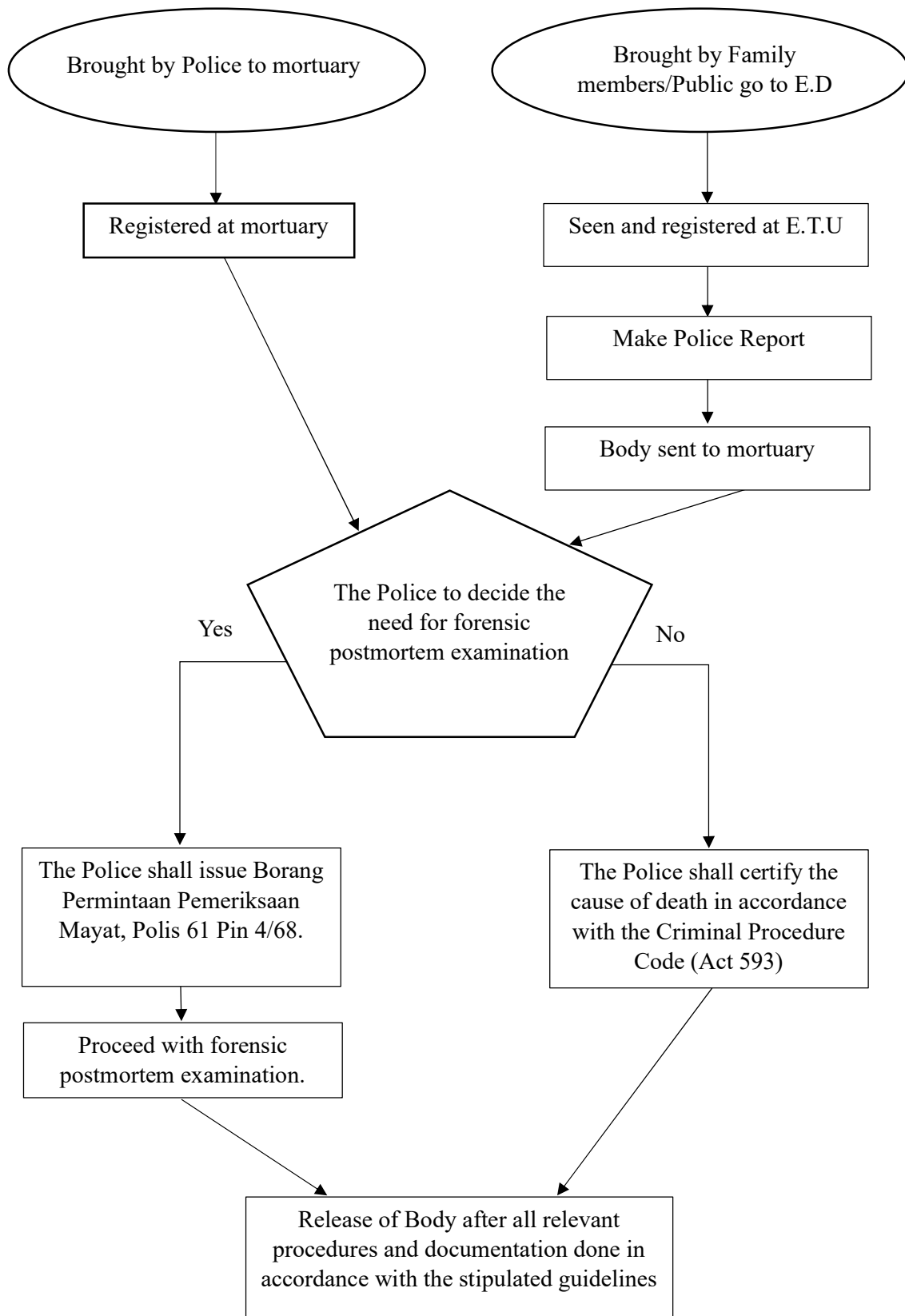
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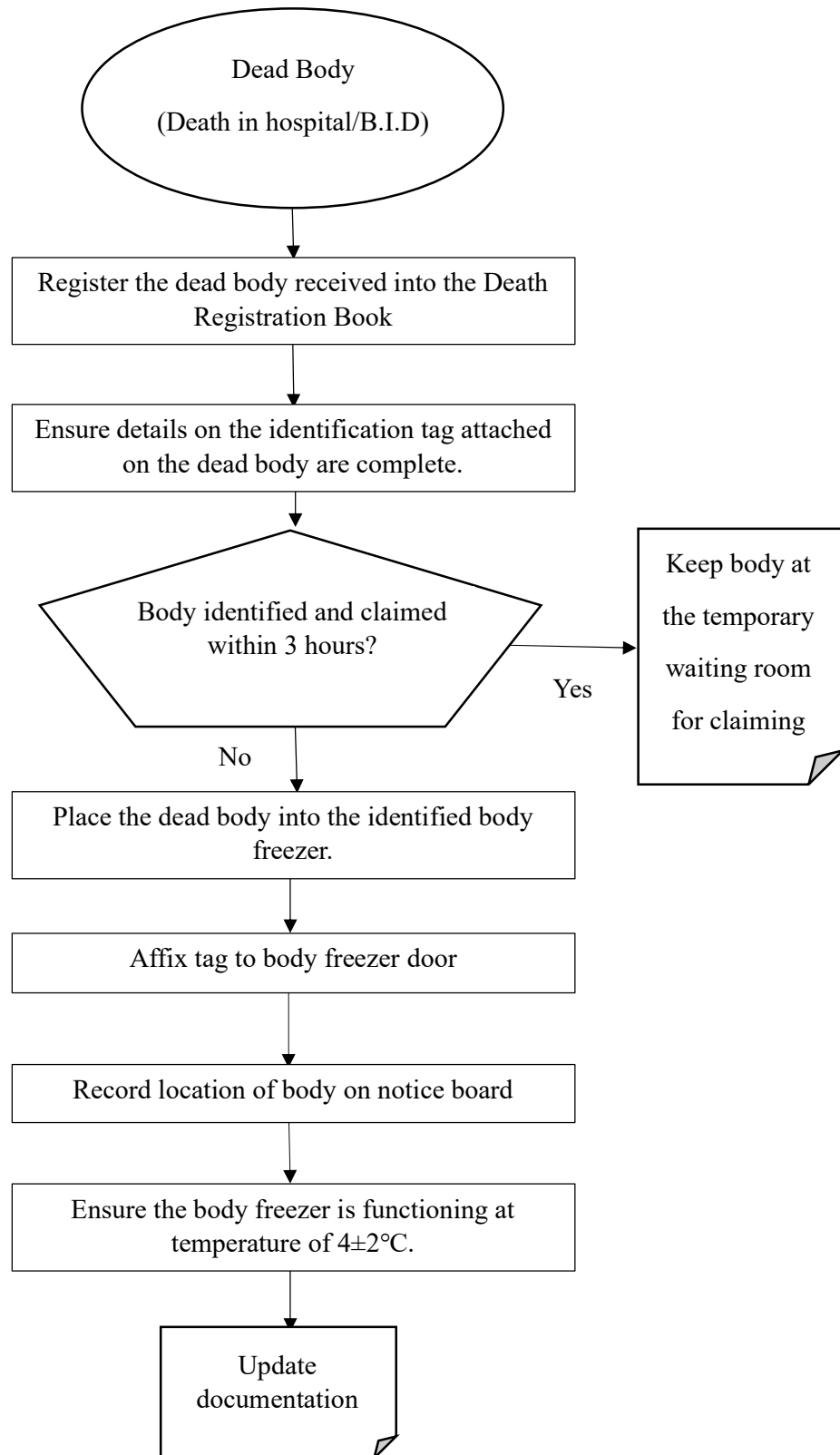
**Chart 1: Flowchart of Management of Death in Hospital**



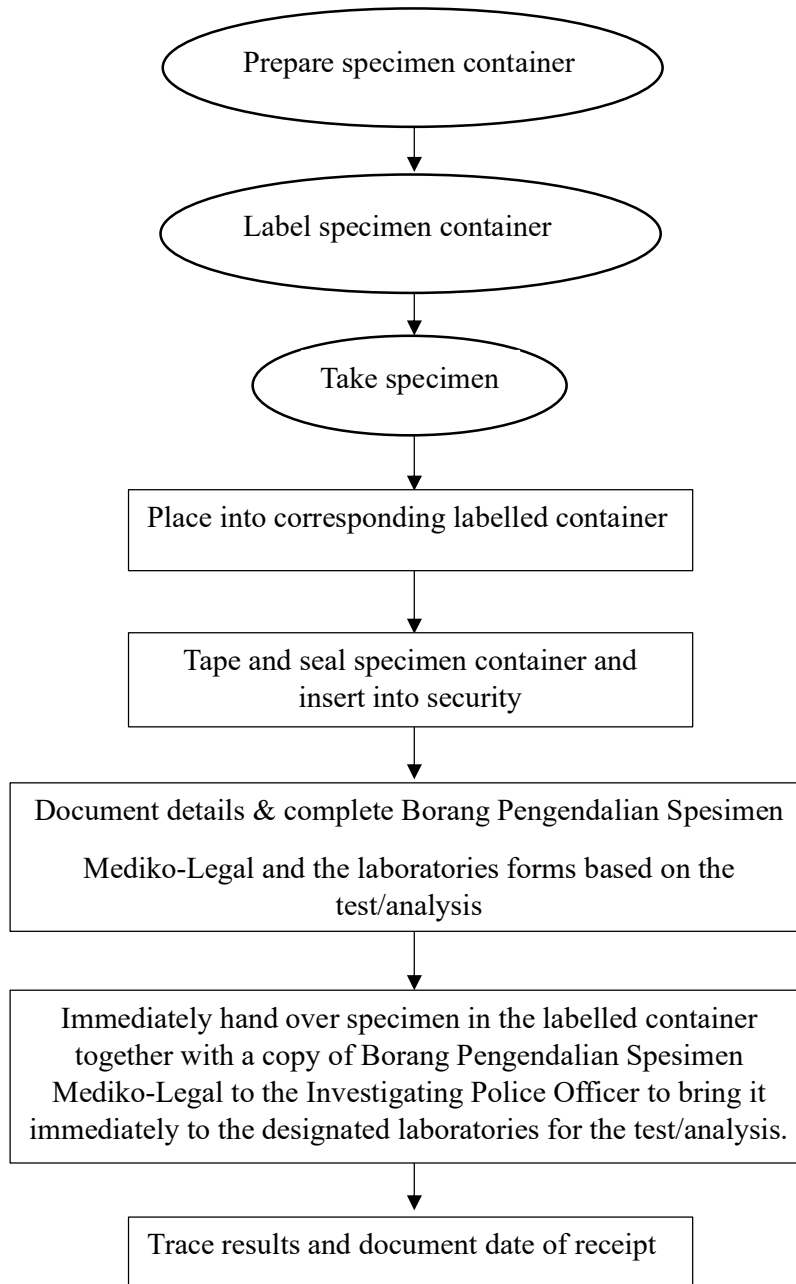
**Chart 2: Flowchart of Management of Brought in Dead**



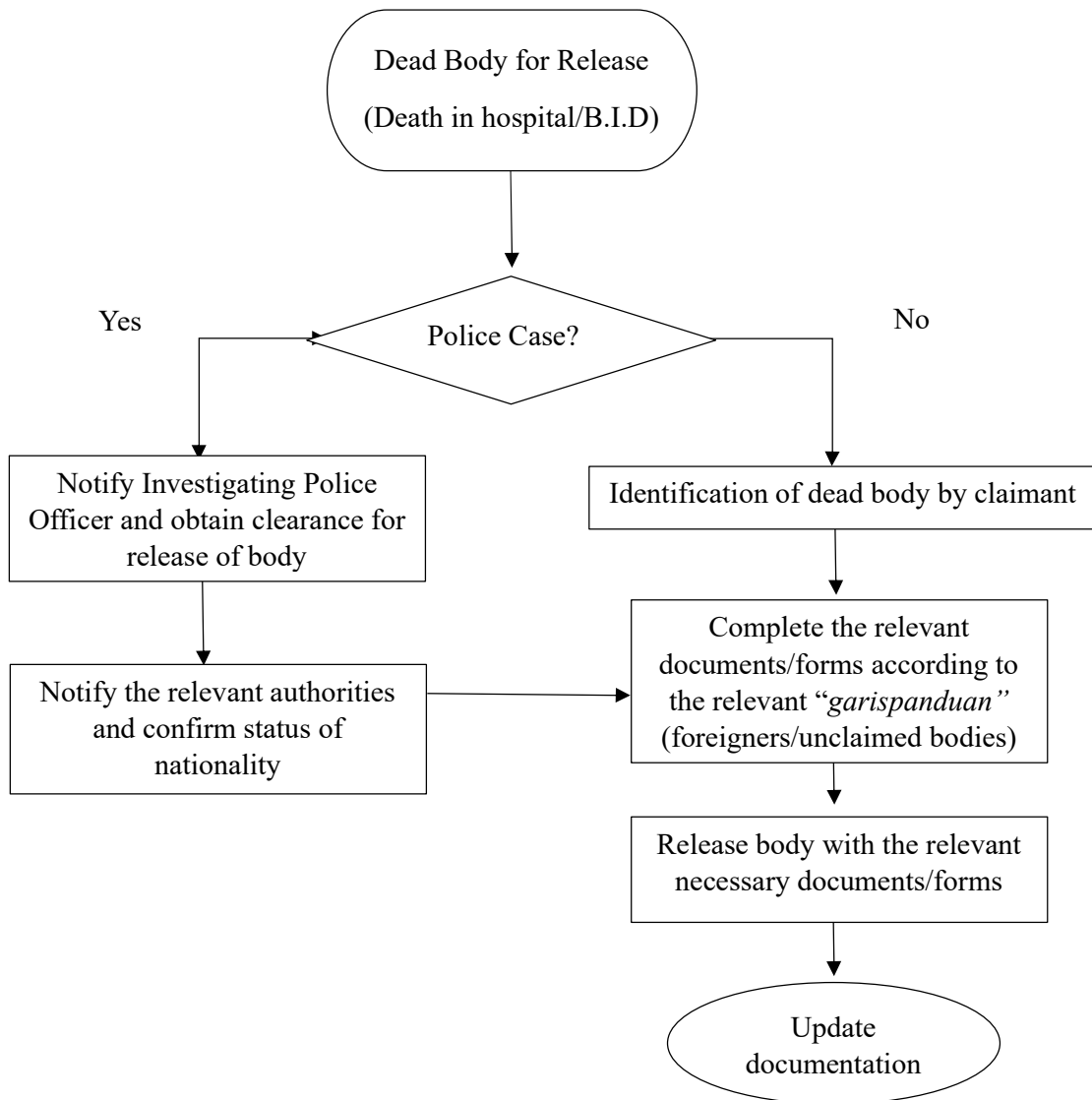
**Chart 3: Flowchart of Storage of Dead Body**



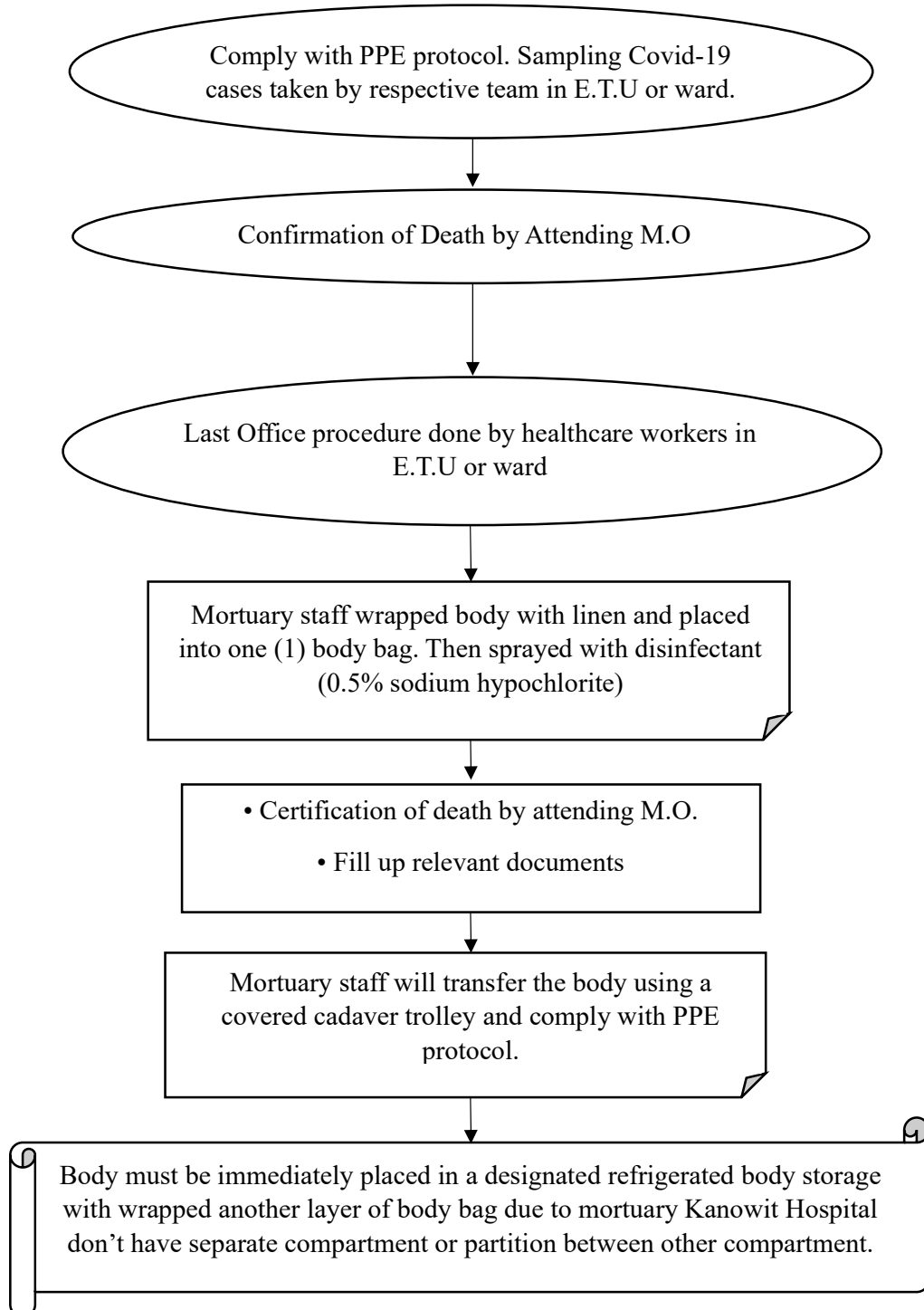
**Chart 4: Flowchart of Management of Evidence and Specimen**



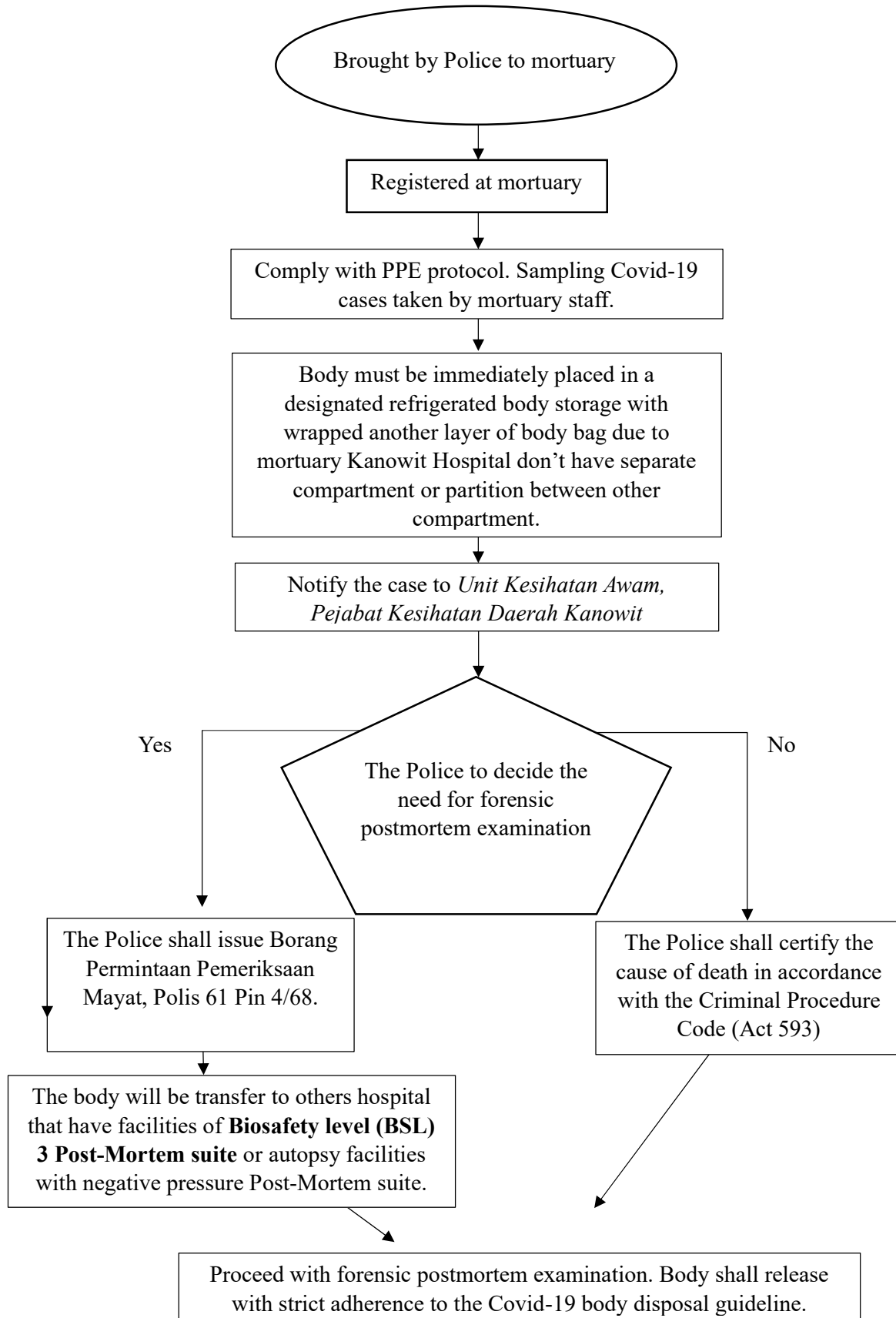
**Chart 5: Flowchart of Release of Dead Body**



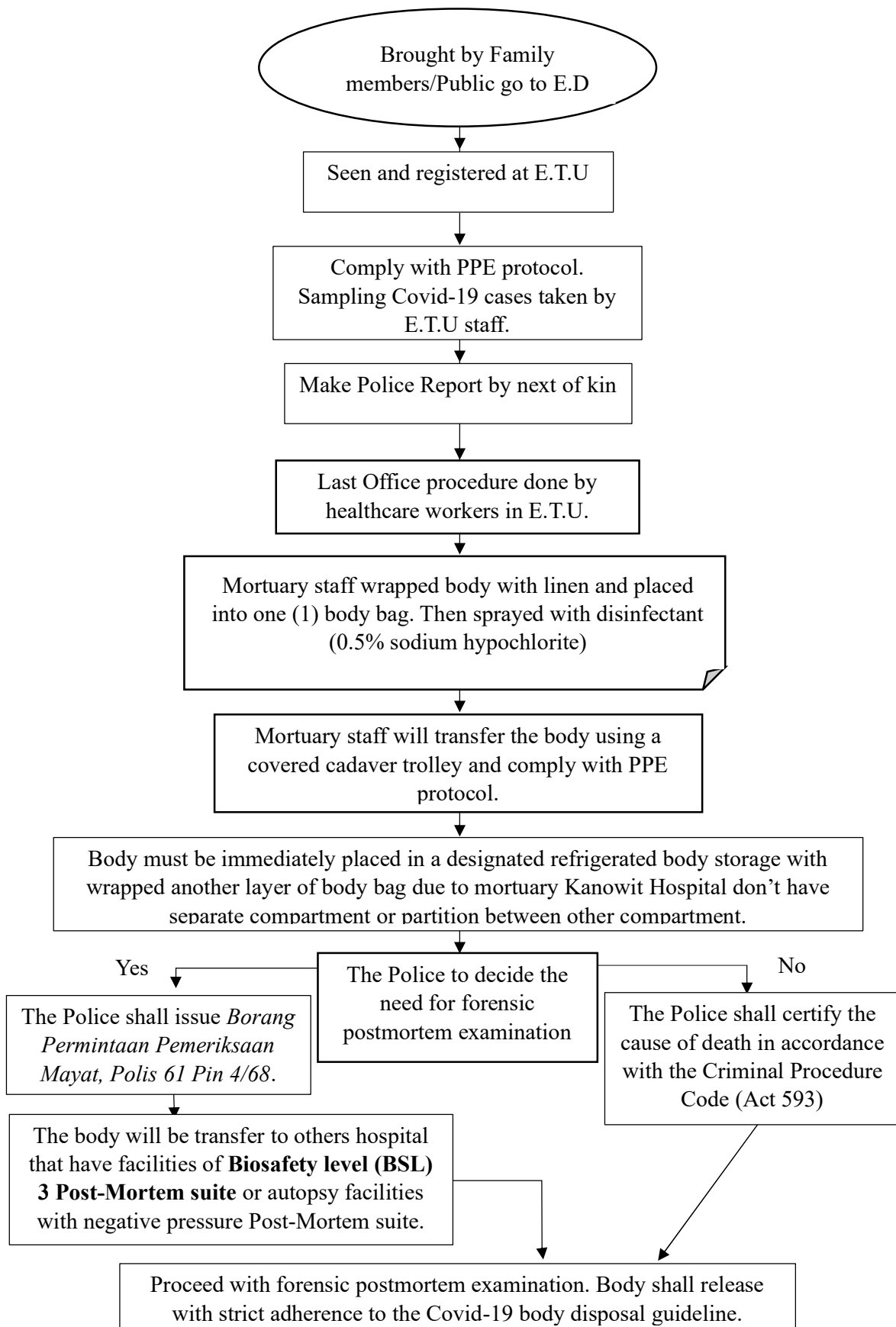
**Chart 6: Flowchart for Management of Death body with suspected or confirmed COVID-19 in Hospital**



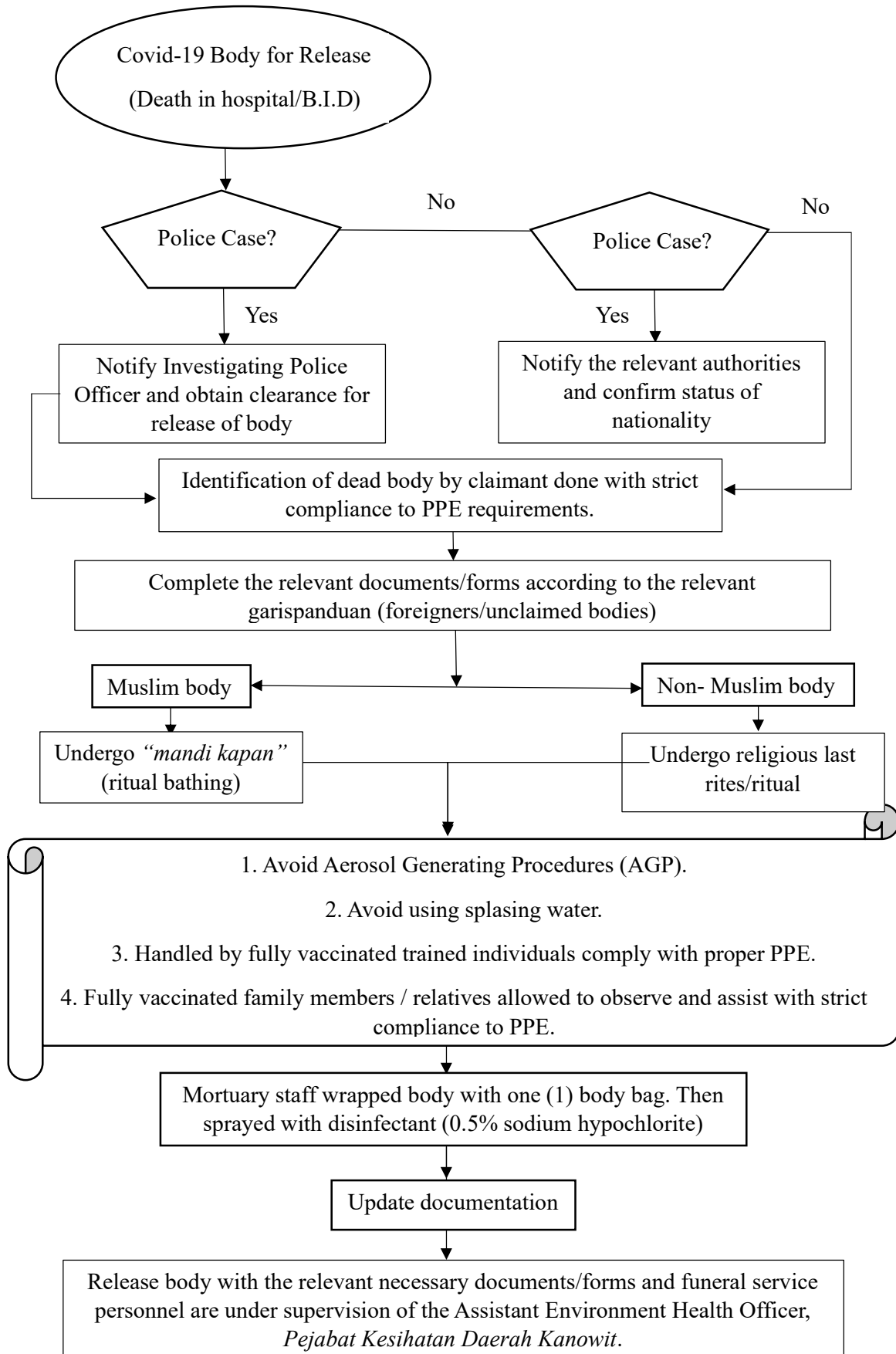
**Chart 7: Flowchart for Management of suspected of confirmed COVID-19  
Brought in Dead by Police to Mortuary**



**Chart 8: Flowchart for Management of suspected of confirmed COVID-19  
Brought in Dead by others than Police.**



**Chart 9: Flowchart for Released of COVID-19 Dead Body.**




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# APPENDIX 1

## BORANG KAD PENGENALAN MAYAT (KES BIASA/BUKAN KES POLIS)

HK/FOR/03/2019

  
Department of Forensic Medicine,  
HOSPITAL KANOWIT, 96700 KANOWIT, SARAWAK TEL : 084-752333 FAX : 084-753860, 084-752682

### KAD PENGENALAN MAYAT KEMATIAN BIASA

(To be filled by Wards / ETD Staff)

**Case Information**

Hospital Registration No.  MCD Number

Date & Time of Admission  Date & Time of Death

Date & Time of Body Received ( For Forensic Used)  Ward/Department Telephone Ext. No

Full Name of Doctor  IC of Doctor   
MMC NO

Cause(s) of Death

**Deceased Information**

Full Name

ID Type (MyKad/Passport)  IC Number

Birth Date  Age

Gender  Nationality

Ethnic Group  Religion

Address

Postcode  District /State

For Clinical Post Mortem ( Yes / No )  Biohazard (Yes / No )

**Claimant**

Full Name  IC Number

Relationship to deceased  Telephone

Address

Postcode  District / State

**Staff Information**

Signature of Reporting Officer \_\_\_\_\_ Date \_\_\_\_\_  
Name of Reporting Officer \_\_\_\_\_ Time \_\_\_\_\_

## APPENDIX 2

### BORANG KAD PENGENALAN MAYAT (KES POLIS)

Case Information		
(To be filled by Wards / ETD Staff )		
Hospital Registration No.	MCD Number	
Date & Time of Admission	Date & Time of Death	
Date & Time of Body Received ( For Forensic Used)	Ward/Department Telephone Ext. No	
Full Name of Doctor	IC of Doctor MMC NO	
Case Category : BID to E&T Dept <input type="checkbox"/>	Death in E&T Dept <input type="checkbox"/>	Death in the Ward <input type="checkbox"/>
Police Station	Report No.	
Officer Name	Officer Rank	No
Officer Telephone No (Office)	Officer Mobile Phone No.	
Deceased Information		
Full Name		
ID Type (MyKad/Passport)	IC Number	
Birth Date	Age	
Gender	Nationality	
Ethnic Group	Religion	
Address		
Postcode	District /State	
Claimant		
Full Name	IC Number	
Relationship to deceased	Telephone	
Address		
Postcode	District / State	
Staff Information		
Signature of Reporting Officer	Date	
Name of Reporting Officer	Time	

**APPENDIX 3**  
**BORANG BUKU DAFTAR KEMATIAN**

**BUKU DAFTAR KEMATIAN, HOSPITAL .....**

TARIKH PENDAFTARAN: \_\_\_\_\_ MASA PENDAFTARAN: \_\_\_\_\_

NO. PENDAFTARAN FORENSIK: \_\_\_\_\_

**1. BUTIRAN SIMATI**

(a) NAMA: \_\_\_\_\_  
 (b) ALAMAT: \_\_\_\_\_  
 \_\_\_\_\_ (c) POSKOD: \_\_\_\_\_  
 (d) BANDAR: \_\_\_\_\_ (e) NEGERI: \_\_\_\_\_  
 (f) NO. KAD PENGENALAN/PASPORT: \_\_\_\_\_ (g) UMUR: \_\_\_\_\_  
 (h) JANTINA: \_\_\_\_\_ (i) BANGSA: \_\_\_\_\_ (j) AGAMA: \_\_\_\_\_  
 (k) NO. PENDAFTARAN HOSPITAL: \_\_\_\_\_  
 (l) TARIKH DAN MASA MASUK WAD: \_\_\_\_\_  
 (m) TARIKH DAN MASA KEMATIAN: \_\_\_\_\_

**5. BUTIRAN BEDAH SIASAT (JIKA DIJALANKAN)**

(a) NO. BEDAH SIASAT: \_\_\_\_\_  
 (b) TARIKH: \_\_\_\_\_ (c) MASA: \_\_\_\_\_  
 (d) NO. LAPORAN POLIS: \_\_\_\_\_  
 (e) TARIKH DAN MASA POL. 61 DITERIMA: \_\_\_\_\_

**2. BUTIRAN PENERIMAAN JASAD BIMATI**

(a) TARIKH: \_\_\_\_\_ (b) MASA: \_\_\_\_\_ (c) WADJUNTI: \_\_\_\_\_  
 (d) NAMA PECAWAI YANG MENERIMA: \_\_\_\_\_  
 (e) JAWATAN: \_\_\_\_\_ (f) NO. KAD PENGENALAN: \_\_\_\_\_

**6. BUTIRAN WARIS YANG TERIMA DAN AKUAN TERIMA JASAD BIMATI**

SAYA \_\_\_\_\_ NO. KAD PENGENALAN \_\_\_\_\_  
 BERALAMAT \_\_\_\_\_  
 DAN NO. TELEFON \_\_\_\_\_ (PERHUBUNGAN SIMATI) \_\_\_\_\_  
 DENGAN INI MENGAKU MENERIMA JASAD \_\_\_\_\_  
 \_\_\_\_\_ TARIKH \_\_\_\_\_ MASA \_\_\_\_\_

TANDATANGAN WARIS

**3. KES POLIS / BUKAN KES POLIS \*\***

TANDATANGAN PECAWAI

**7. BUTIRAN PECAWAI YANG MENYERAHKAN JASAD BIMATI**

(a) NAMA: \_\_\_\_\_ (b) JAWATAN: \_\_\_\_\_  
 (c) NO. KAD PENGENALAN: \_\_\_\_\_  
 (d) TARIKH DAN MASA JASAD BI MATI DISERAHKAN: \_\_\_\_\_

TANDATANGAN PECAWAI

**4. BUTIRAN MCO / PMC**

(a) NO. MCO / PMC \*\*: \_\_\_\_\_  
 (b) NAMA PEG. PERUBATAN YANG BAHKAN SEBAB KEMATIAN: \_\_\_\_\_  
 \_\_\_\_\_  
 (c) NO. KAD PENGENALAN PEG. PERUBATAN: \_\_\_\_\_  
 (d) SEBAB KEMATIAN: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**8. BUTIRAN PENGURUS MAYAT**

(a) NAMA SYARIKAT/INDIVIDU: \_\_\_\_\_  
 (b) NAMA PEMANDU: \_\_\_\_\_ (c) NO. TELEFON: \_\_\_\_\_  
 (d) NO. KAD PENGENALAN: \_\_\_\_\_ (e) TARIKH: \_\_\_\_\_  
 (f) MASA: \_\_\_\_\_

TANDATANGAN PEMANDU

\*\* POTONG MANA YANG TIDAK BERKENAAN

SIGNATURE & STAMP CO2

APPENDIX 4

FORM VIII MEDICAL CERTIFICATE OF CAUSE OF DEATH (BD9/68)

(BD.9/68)

Serial No. MCD

136568

FORM VIII MEDICAL CERTIFICATE OF CAUSE OF DEATH
(To be used by a Medical Practitioner only)
The Registration of Births and Deaths Ordinance, 1951, Sarawak.

To be given by the Medical Practitioner to the person whose duty it is to report the death. "The Information" must hand this Certificate to the Registrar of the District at the time of reporting the death.

I hereby certify that I attended ..... (BLOCK LETTERS)
N.R.I.C. No. .... Sex ..... Age ..... during his/her last illness; and
that I saw him/her alive on ..... 20.....; that he/she died\* .....
on the ..... day of ..... 20..... at (address) .....

and that to the best of my knowledge and belief the cause of his/her death was as hereunder written:
Immediate cause of Death .....
Due to (or as a consequence of) .....
Due to (or as a consequence of) .....

Witness my hand, this ..... day of ..... 20.....
Signature .....
Name ..... (BLOCK LETTERS) Qualification .....
N.R.I.C. No. .... Address .....

N.B. This Certificate is intended solely for the use of the Registrar, to whom it should be delivered by the person reporting the death. An informant omitting or neglecting to deliver this Certificate to the Registrar shall be liable to imprisonment for six months and a fine of one thousand ringgit on conviction.

\*Should the Medical Practitioner not feel justified in taking upon himself the responsibility of certifying the fact of death, he may here insert the words "as I am informed".

All persons are cautioned against accepting or using this Certificate for any purpose whatever except of delivering it to the Registrar.

PNMB, Kch, JD 964516

**APPENDIX 5**

**FORM IX MEDICAL CERTIFICATE OF CAUSE OF DEATH (AFTER POST MORTEM)  
(BD10/68)**

(BD. 10/68)

**FORM IX MEDICAL CERTIFICATE OF CAUSE OF DEATH**  
**(AFTER POST-MORTEM)**

The Registration of Births and Deaths Ordinance, 1951, Sarawak. **(To be used by a Medical Practitioner only)** Serial No. **PMC 03700**

---

I certify that on the ..... day of ..... 19..... I made a post-mortem examination of a body identified to me by .....  
(BLOCK LETTERS)  
in the presence of .....  
(BLOCK LETTERS)  
to be that of ..... N.R.I.C. No. ....  
(BLOCK LETTERS)  
and that the immediate cause of death was .....  
due to (or in consequence of) .....  
due to (or in consequence of) .....  
.....

Place .....

Date ..... 19.....

Signature .....

Name ..... N.R.I.C. ....  
(BLOCK LETTERS)

Qualification .....

**APPENDIX 6**

**BODY IDENTIFICATION TAG (WHITE TAG)**

<b>TAG PENGENALAN MAYAT KES BIASA/ BUKAN KES POLIS</b>	
WAD: .....	TEL: .....
NAMA: .....	KPT:..... RN: .....
UMUR: .....	JANTINA:..... KETURUNAN:..... AGAMA:.....
ALAMAT:.....	
TARIKH DAN WAKTU DIDAFTR MASUK: ..... @..... DOKTOR:.....	
TARIKH DAN WAKTU KEMATIAN: .....@.....	
SEBAB-SEBAB KEMATIAN: .....	
NAMA WARIS: .....	ALAMAT:.....
..... TEL: .....	
POLIS YANG DIHUBUNGI: ..... NO/PANGKAT:..... BALAI:.....	
WARIS TELAH DIHUBUNGI: YA/TIDAK:                      BEDAHSIASAT KLINIKAL: YA/TIDAK	
TARIKH DAN WAKTU DIHUBUNGI: ..... @..... OLEH: .....	
<b>BIOHAZARD</b>	<b>YA / TIDAK / TIADA MAKLUMAT</b>
T/T:.....	

**APPENDIX 7**  
**BODY IDENTIFICATION TAG (RED TAG)**

<b>TAG PENGENALAN MAYAT</b>		P. _____ / (KEGUNAAN FORENSIK)
<b>KES POLIS</b>		
WAD : .....		TEL : .....
NAMA : .....	KPT : .....	RN : .....
UMUR : .....	JANTINA : .....	KETURUNAN : .....
		AGAMA : .....
ALAMAT : .....		
TARIKH DAN WAKTU DIDAFETAR MASUK : .....		DOKTOR : .....
TARIKH DAN WAKTU KEMATIAN : .....		
JENIS KES POLIS : .....		KES B.I.D. : YA / TIDAK
NAMA WARIS : .....	ALAMAT : .....	
		TEL : .....
POLIS YANG DIHUBUNGI : .....	NO : .....	BALAI : .....
DIHUBUNGI OLEH : S/R, S/N, M.A. : .....		TARIKH : .....
WARIS SI MATI TELAH DIHUBUNGI : YA / TIDAK		
<b>BIOHAZARD</b>	<b>YA / TIDAK / TIADA MAKLUMAT</b>	T/T : .....

## APPENDIX 8

### BORANG PEMOHONAN BAGI PEMERIKSAAN FORENSIK / TOKSIKOLOGI (KIMIA 15-IN 3/2020)

(Kimia 15-Pin. 3/2020)



#### BORANG PERMOHONAN BAGI PEMERIKSAAN FORENSIK / TOKSIKOLOGI

Borang ini perlulah dilengkapkan dengan jelas oleh Pegawai Perubatan dan disertakan bersama spesimen kepada:

Cop Meterai/Seal  
Keselamatan

**JABATAN KIMIA MALAYSIA**

\*PETALING JAYA (03-79853000)/ IPOH (05-5477744)/ ALOR SETAR (04-7357001)/  
PULAU PINANG (04-2228300)/ MELAKA (06-2331406)/ JOHOR BAHRU (07-2226366)/  
KUANTAN (09-5662400)/ K. TERENGGANU (09-6203077)/ KOTA BHARU (09-7647632)/  
KUCHING (082-313011)/ SIBU (084-213890)/ BINTULU (086-334211)/ KOTA KINABALU  
(088-259090).

Bahagian 1:

a) Butiran Kes                      Hidup                       Mati                       Tandakan (✓) yang berkenaan

\* Bulatkan yang berkenaan

Nama (HURUF BESAR): _____	
No. Kad Pengenalan/ Passport/ Surat Beranak: _____	
No. Pendaftaran Hospital: _____	Jantina:                      *Lelaki/Perempuan
No. Autopsi: _____	Umur: _____
Pekerjaan: _____	Warganegara: _____
Tarikh dan masa kemasukan: _____ a.m./p.m. pada: _____	
Tarikh dan masa kematian: _____ a.m./p.m. pada: _____	
Balai Polis: _____	No. Repot Polis: _____

b) Keadaan Kes:                      \*Makan racun atau ubat/jatuh dari bangunan/kemalangan jalanraya/  
gantung diri/mati mengejut/mati lemas/jasad reput

Lain-lain: \_\_\_\_\_

c) Bawah pengawasan pegawai perubatan:                      \*Ya/Tidak

Jika ada, apakah rawatan yang diberikan (termasuk ubatan): \_\_\_\_\_

d) Pemindahan darah dijalankan semasa pengawasan/sebelum kematian:                      \*Ya/Tidak/Tidak diketahui

Nota: Analisis toksikologi tidak akan memberi apa-apa makna sekiranya spesimen darah diambil selepas proses pemindahan darah.

## APPENDIX 9

### BORANG PENGENDALIAN SPESIMEN MEDIKO-LEGAL (HKFM/1/2017)



**UNIT PERUBATAN FORENSIK  
HOSPITAL KANOWIT**



HKFM/1/2017

#### BORANG PENGENDALIAN SPESIMEN MEDIKO-LEGAL

**NO. DAFTAR BEDAH SIASAT / NO. RUJUKAN	
NO. REPORT POLIS	

Saya ..... No. Anggota / No. K/P : .....  
(Nama Pegawai Yang Menerima Spesimen)

Pangkat ..... Jabatan dan Balai Polis : .....

Mengaku menerima specimen yang disenaraikan di bawah ini, bagi kes yang tersebut di atas pada tarikh dan masa seperti yang berikut : ..... @ ..... am / pm \*\*.  
(Tarikh) (Masa)

**Nota: \*\* Potong mana yang berkenaan.**

**A. SENARAI SPESIMEN YANG DIAMBIL** (Sila tandakan ✓ pada mana yang berkenaan)

1. BLOOD FOR DNA	9. HVS FOR SPERMATOZOA
2. BLOOD FOR ALCOHOL	10. LVS FOR SPERMATOZOA
3. BLOOD FOR DRUG	11. LAIN – LAIN (NYATAKAN):
4. BLOOD FOR TOXICOLOGY	i.
5. URINE FOR ALCOHOL	ii.
6. URINE FOR DRUG	iii.
7. URINE FOR TOXICOLOGY	iv.
8. RECTAL SWAB	v.

**B. PEGAWAI YANG MENGENDALIKAN SPESIMEN** (Sila tandakan ✓ pada mana yang berkenaan)

1. SPESIMEN DIAMBIL OLEH	
2. BEKAS SPESIMEN DILABEL OLEH	
3. SPESIMEN DIMENTERAI OLEH	

#### PEGAWAI YANG MENERIMA SPESIMEN

#### PEGAWAI YANG MENYERAHKAN SPESIMEN

.....  
(Tandatangan)

.....  
(Tandatangan)

NAMA : .....

NAMA : .....

JAWATAN : .....

JAWATAN : .....

TARIKH & MASA : .....

TARIKH & MASA : .....

NO. TEL / HP : .....

**SAKSI:**

NOTA: Salinan **ASAL** akan diberikan kepada Pegawai Penyiasat.


Salinan **PENDUA** adalah untuk kegunaan Unit Perubatan Forensik, Hospital Kanowit.

\*\* No. Daftar Bedah Siasat dimulakan dengan huruf "P" dan Kes Klinikal dengan huruf "K".

.....  
 NAMA:  
 JAWATAN:  
 TARIKH & MASA:

**APPENDIX 10**


**BORANG PERKHIDMATAN PATOLOGI (PER.PAT 301)**

<b>88.PAT3.01 — PER-PAT-301</b>																																														
																																														
<b>KEMENTERIAN KESIHATAN MALAYSIA</b> <b>PERKHIDMATAN PATOLOGI</b> <b>HOSPITAL _____</b>																																														
<table border="1" style="border-collapse: collapse;"> <tr> <td style="padding: 2px;">UNTUK KEGUNAAN MAKMAL</td> </tr> <tr> <td style="padding: 2px;">LAB NO. _____</td> </tr> </table>		UNTUK KEGUNAAN MAKMAL	LAB NO. _____																																											
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LAB NO. _____																																														
1. Nama: _____	2. No. Pendaftaran: _____																																													
3. No. K/P: _____	4. Jantina: <input type="checkbox"/> Lelaki <input type="checkbox"/> Perempuan																																													
5. Umur: _____	6. Keturunan: _____																																													
8. Tarikh Masuk Wad: _____	9. Pekerjaan: _____																																													
7. Wad/Klinik: _____																																														
10. Taraf Perkahwinan: 11. <input type="checkbox"/> Bayar <input type="checkbox"/> Percuma																																														
12. No. Laporan Dahulu: _____	<b>13. Butiran Penting:</b>  <table style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: center;">Ya</td> <td style="text-align: center;">Tidak</td> </tr> <tr> <td>Jaundice</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Lymphadenopathy</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Hepatomegaly</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Splenomegaly</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Bleeding Tendency</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>H/O Transfusion</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table> Haematinics _____ _____ _____  Drug/Chemical History _____ _____ _____  Data Makmal Terdahulu  Hb _____ Platelet _____ TWDC _____		Ya	Tidak	Jaundice	<input type="checkbox"/>	<input type="checkbox"/>	Lymphadenopathy	<input type="checkbox"/>	<input type="checkbox"/>	Hepatomegaly	<input type="checkbox"/>	<input type="checkbox"/>	Splenomegaly	<input type="checkbox"/>	<input type="checkbox"/>	Bleeding Tendency	<input type="checkbox"/>	<input type="checkbox"/>	H/O Transfusion	<input type="checkbox"/>	<input type="checkbox"/>																								
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H/O Transfusion	<input type="checkbox"/>	<input type="checkbox"/>																																												
14. Ringkasan Klinikal, Penemuan Pembedahan dan Riwayat Keluarga: _____																																														
15. Diagnosis: _____																																														
<b>16. Kategori Permohonan/Jenis Ujian:</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">Patologi Kimia <input type="checkbox"/></td> <td style="border: 1px solid black; padding: 2px;">Klinikal <input type="checkbox"/></td> <td style="border: 1px solid black; padding: 2px;">Hematologi <input type="checkbox"/></td> <td style="border: 1px solid black; padding: 2px;">Histo/Saitologi <input type="checkbox"/></td> <td style="border: 1px solid black; padding: 2px;">Mikro/Immunologi <input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">B. Sugar <input type="checkbox"/></td> <td style="padding: 2px;">Bld. Count <input type="checkbox"/></td> <td style="padding: 2px;">PBP <input type="checkbox"/></td> <td style="padding: 2px;">Specimen</td> <td style="padding: 2px;">Specimen</td> </tr> <tr> <td style="padding: 2px;">B. Urea <input type="checkbox"/></td> <td style="padding: 2px;">ESR <input type="checkbox"/></td> <td style="padding: 2px;">BM. Asp. <input type="checkbox"/></td> <td></td> <td style="padding: 2px;">Ujian</td> </tr> <tr> <td style="padding: 2px;">S. Elec <input type="checkbox"/></td> <td style="padding: 2px;">BFMP <input type="checkbox"/></td> <td style="padding: 2px;">Hb Analysis <input type="checkbox"/></td> <td></td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">B. Gases <input type="checkbox"/></td> <td style="padding: 2px;">U. Sugar <input type="checkbox"/></td> <td style="padding: 2px;">Coagulation <input type="checkbox"/></td> <td></td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">S. Billirubin <input type="checkbox"/></td> <td style="padding: 2px;">U. Alb. <input type="checkbox"/></td> <td></td> <td></td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">LFT <input type="checkbox"/></td> <td style="padding: 2px;">U. ME <input type="checkbox"/></td> <td></td> <td></td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Se. Creatinine <input type="checkbox"/></td> <td style="padding: 2px;">Stool ME <input type="checkbox"/></td> <td></td> <td></td> <td style="padding: 2px;"></td> </tr> <tr> <td colspan="5" style="padding: 2px;">Lain-lain _____</td> </tr> </table>		Patologi Kimia <input type="checkbox"/>	Klinikal <input type="checkbox"/>	Hematologi <input type="checkbox"/>	Histo/Saitologi <input type="checkbox"/>	Mikro/Immunologi <input type="checkbox"/>	B. Sugar <input type="checkbox"/>	Bld. Count <input type="checkbox"/>	PBP <input type="checkbox"/>	Specimen	Specimen	B. Urea <input type="checkbox"/>	ESR <input type="checkbox"/>	BM. Asp. <input type="checkbox"/>		Ujian	S. Elec <input type="checkbox"/>	BFMP <input type="checkbox"/>	Hb Analysis <input type="checkbox"/>			B. Gases <input type="checkbox"/>	U. Sugar <input type="checkbox"/>	Coagulation <input type="checkbox"/>			S. Billirubin <input type="checkbox"/>	U. Alb. <input type="checkbox"/>				LFT <input type="checkbox"/>	U. ME <input type="checkbox"/>				Se. Creatinine <input type="checkbox"/>	Stool ME <input type="checkbox"/>				Lain-lain _____				
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Lain-lain _____																																														
17. Pengambilan Specimen: Tarikh: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Masa: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>																																														
18. Nama Doktor: _____																																														
19. Tarikh: _____																																														
..... <b>Tandatangan dan Cop Doktor</b>																																														

**(MR 011/H)**

**APPENDIX 11**

**BORANG PELEPASAN MAYAT DI BAWAH PENYIASATAN SEKSYEN 16 AKTA 342**

 PEJABAT KESIHATAN ..... / UNIT KESIHATAN AWAM HOSPITAL  
.....  
.....  
.....

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Pegawai Perubatan, Rujukan Kami:.....  
Jabatan/ Unit Perubatan Forensik, Rujukan Tuan:.....  
Hospital .....  
.....

Tuan,

**Pelepasan Mayat Di Bawah Penyiasatan Seksyen 16 Akta 342,**  
**Nama Si Mati :** .....  
**No. Kad Pengenalan:** .....

Merujuk kepada perkara di atas, dengan ini adalah dimaklumkan bahawa siasatan ke atas si mati seperti butiran di atas telah selesai di bawah Seksyen 16 Akta 342.

Dengan ini saya tidak akan mengeluarkan arahan di bawah Seksyen 17 Akta 342 berkaitan dengan si mati seperti butiran di atas.

Oleh itu, saya menyarankan mayat yang berkenaan dilepaskan kepada waris si mati dan diuruskan secara **NORMAL / BERISIKO TINGGI** \*(potong yang tidak berkenaan)

Sekian, terima kasih.

.....  
Tandatangan Pegawai Yang Diberikuasa  
Nama: .....  
Jawatan:.....  
No. Kad Pengenalan: .....  
Tarikh dan Masa: ...../...../..... @..... AM/PM  
Cop Rasmi: -

**APPENDIX 12**

**BORANG PENGENDALIAN MAYAT / ANGGOTA BADAN / JANIN**



**UNIT PERUBATAN FORENSIK  
HOSPITAL .....**

**BORANG PENGENDALIAN \*\*MAYAT / ANGGOTA BADAN / JANIN**

**A) BUTIRAN**

NAMA SIMATI:	NO PENDAFTARAN:
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**B) PENGECAMAN SEMULA \*\*MAYAT / ANGGOTA BADAN / JANIN**

<p><u>PENGECAMAN BERDASARKAN KEPADA:</u></p> <p>LABEL MAYAT <input type="checkbox"/></p> <p>PENGECAMAN MUKA SIMATI: <input type="checkbox"/></p> <p>PAKAIAN / BARANG KEMAS / LAIN – LAIN ARTIFAK <input type="checkbox"/></p> <p>LAIN – LAIN CARA:</p> <p><input type="checkbox"/> TANDA – TANDA FIZIKAL</p> <p><input type="checkbox"/> TANDA TATTOO</p> <p><input type="checkbox"/> CAP JARI</p> <p><input type="checkbox"/> ODONTOLOGI</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> LAIN – LAIN</p> <p>.....</p> <p>.....</p>	<p><u>PENGECAMAN DIBUAT BERSAMA:</u></p> <p>1) NAMA PENOLONG PEGAWAI PERUBATAN/ PEMBANTU PERAWATAN KESIHATAN YANG BERTUGAS: ..... .....</p> <p>TARIKH: .....</p> <p>MASA: .....</p> <p>TANDATANGAN: .....</p> <p>2) NAMA WARIS: .....</p> <p>.....</p> <p>NO. K/P / PASPORT: .....</p> <p>HUBUNGAN DENGAN SIMATI: .....</p> <p>NO. TEL : .....</p> <p>TARIKH: .....</p> <p>MASA: .....</p> <p>TANDATANGAN: .....</p>
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\*\* Sila potong yang tidak berkenaan.