

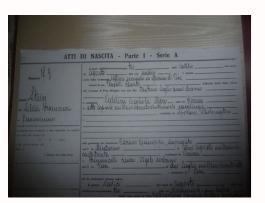


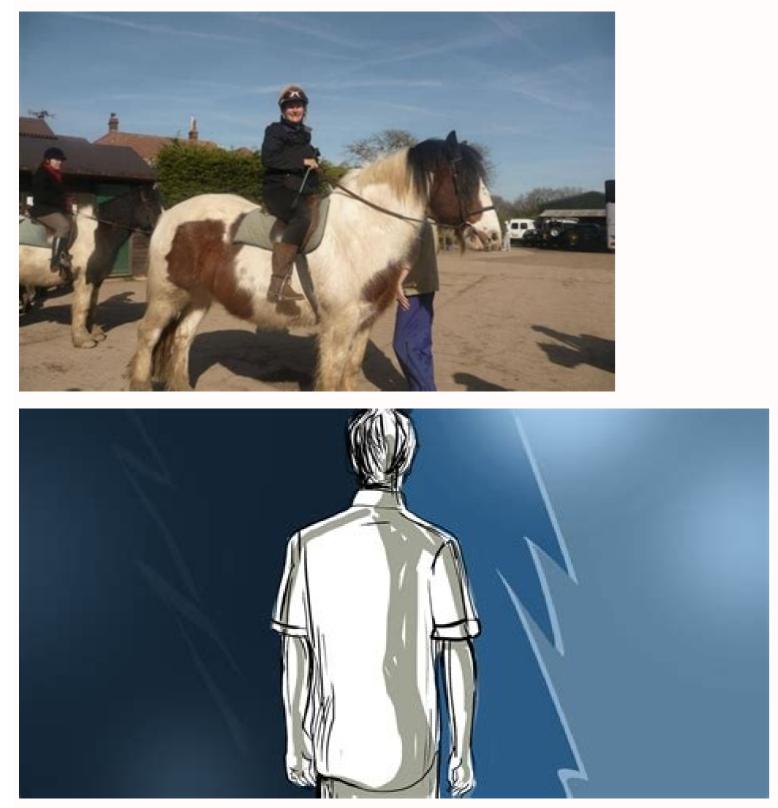
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Post mortem table book pdf windows









Instrument used for infectious cases- rinsed & soaked in ammonium chloride soln for 10 mins Work surface- rinse with hot water f/b 1:10 soln of bleach. (Temp 10-18°C). Modifications during trimming of brain - Formalin fixation at least 10-14 days - Table with absorbent pad - Sections placed in cassettes labeled with "CJD precautions". 4. Wash hands and skin with warm water and soap immediately after - Any contact with blood or OPIM. Photography Fresh specimen- with care Fixed specimen preferred if known infection Pan is used for organ transport to photographic stand Handle camera with clean gloves Photo stand cleaned with disinfectant Camera, lenses etc cleaned with germicidal agents without compromising their functions Hand free camera system useful 64. N95 particulate mask (masks able to filter particles 1µm in size with filter efficiency of 95% given flow rates up to 50 litres/minutes) N95 filters are the minimum acceptable level while performing high hazard procedures. Screening for tuberculois by tuberculin skin test (TST) Keep records of employee exposures to TB, skin tests, and medical evaluations and treatment 5) Document infections and disease. (To maintain record) v) Chowkidar- One. Located in one wing of the hospital preferrably away from the general traffic routes used by the public. Ventilated storage Racking 22. - One discussion with members of the hospital preferrably away from the general traffic routes used by the public. Ventilated storage cameras existent- one. Located in one wing of interbinations. Since the sweepers are the only officials available all the time in the mortuary, they should be re-designated as morgue attendant and should at least be matriculate who can read and write English language. 6. H. 5. 2) Control the release of infectious aerosols. Refrain from handling personal items, such as pens and combs, 9) Supervisors must- Provide hand washing facilities stocked with soap, tepid water, and paper towels. 60. C. Conduct autopsies in rooms with: - Biohazard warning signs posted a

to adjacent areas, - Ventilation that provides at least an airflow of 12 air changes per hour (3 of the air changes should be from the outside), - Downdraft local exhaust air directly to the outside of the building and away from general public. are required for every 450 hospital deaths per year About 150 Photo documentation can be very useful as an adjunct to hand written records and sketches. Precautions if Prion disorder is suspected 9. (a) Clean Store: For clean gowns, aprons, rubber gloves, gumboots, towels etc. If accidental contamination of skin occur- swab area with 1N NaOH for 5 min & then wash with copious amount of water. The number of bodies to be accommodated will depend upon the size and type of hospital. The concept of health care set up, a doctor's duty is not only caring for the living but also in helping to arrange for the disposal of those patients who die. 56. Get special consent for tissues other than routine post mortem. wide, 8 ft. Mycobacteria are killed by 10% formalin in 50% ethanol Adequate time for fixation Prions - denatured by NaOH 65. The temperature of cold rooms maintained between 5.5°C to 6.5°C, thermostat control will be required for each cold chamber. e.g. spinal cord, skin, bone etc 7. Adhering to strict safety precautions and use of appropriate PPE 2. 14. Hammer with wrench stainless steel -1 h. Contents.......... (d) Ceilings: Made of material that can be easily cleaned. Scissors; bowel, Bernard 11" - v) Forceps (stainless steel) a.Bone cutting forceps 10" straight-1 b.Bone cutting forceps 10" angled-1 c.Rib-shears 9-1/2" -1 d.Dissecting forceps 6"-1 e.Dissecting forceps 8"-1 f.Dissecting forceps 6"-1 e.Dissecting forceps 10"-1 g.Toothed and un-toothed forceps 6"-1 e.Dissecting forceps 10"-1 g.Toothed and un-toothed forceps 6"-1 e.Dissecting forceps 6"-1 e.Dissectin potentially infectious materials Clean up spills immediately. (c) Chemical Store ix) Sluice Room: (Size 50-75 sq. Introduction 2. G. ii) Post mortem assistant - One. 3) Contain and confine blood and OPIM Place human remains and disassociated portions in plastic burial pouches Avoid, or at least keep to a minimum, splashing and generation of aerosols 52. Post Mortem Room: size 30' × 20' This is a room where the body is investigated and dissected. 62. iii) Ante Room: is needed for discarding soiled garments and boots before the doctors and clinical staff returns to the changing room. 2. Instrument trolley-3 o.Cabinet-1 p. 55. 3. of space will be needed for each additional table. I. 61 Death certificate forms in duplicate. Staffing 2. Tissue fixation 11. iii) 2% Glutaraldehyde for cleaning instruments. - disinfectant- 1:10 solution of bleach and tap water - Allow area to air dry. (f) Windows: The mortuary should have sufficient natural light. 20. Fetal cabinets 19. The best way to reduce risk is to prevent exposures from occurring by- 1. CHEMICAL AND ARTICLES: i) Na hypochloride ii) Bleaching mortuary table floors, etc. Ludwig J; Handbook of Autopsy practice, Torowa: 3rd edition; 167-169. General rules 4. Needles, post-mortem half curved & double curved-1 dozen c. xiii) Foresaid Radiology Section: portable machines and facilities of view box for viewing X-torowa: 3rd edition; 167-169. General rules 4. Needles, post-mortem half curved & double curved-1 dozen c. xiii) Foresaid Radiology Section: portable machines and facilities of view box for viewing X-torowa: 3rd edition; 167-169. General rules 4. Needles, post-mortem half curved & double curved-1 dozen c. xiii) Foresaid Radiology Section: portable machines and facilities of view box for viewing X-torowa: 3rd edition; 167-169. General rules 4. Needles, post-mortem half curved & double curved-1 dozen c. xiii) Foresaid Radiology Section: portable machines and facilities of view box for viewing X-torowa: 3rd edition; 167-169. General rules 4. Needles, post-mortem half curved & double curved-1 dozen c. xiii) Foresaid Radiology Section: portable machines and facilities of view box for viewing X-torowa: 3rd edition; 167-169. General rules 4. Needles, post-mortem half curved & double curved-1 dozen c. xiii) Foresaid Radiology Section: portable machines and facilities of view box for viewing X-torowa: 3rd edition; 167-169. General rules 4. Needles, post-mortem half curved & double curved a ray films. 25. iv) Consultant lavatory v) Room for the mortuary supervisor. (n)Engineering and special services- repair and maintenance 29. each). 38. iv) Clerk/Steno-One. INTRODUCTION During the course of work associated with autopsy practice, the pathologist and his staff encounter a number of biohazards. Scissors; blunt/sharp 6" - 1 c. This area can also be used as prayer area of all religion. Guidelines from public health agency should be followed in highly contagious diseases like arbovirus, arenavirus or filovirus. II .For every additional 100 autopsies per year, following additional staff is required: i) Specialist- One. xiv) Big size envelops, plain papers etc. 27. KULKARNI 2. "The dangers to the operator can be eliminated in the most simple and complete manner without impairing the efficacy of the examination." 69. Chisel, spine with locating point (stainless steel)-1 f. 4) Manage sharps properly Minimize use of scalpels, remove blade with scalpel blade removal only Put sharps on instrument table, never put haphazardly Use of needles should be avoided, never be recapped after use A pair of Scissors can adequately replace scalpel Blunt ended scissors used While making slices of organs, thick sponge should be used to stabilize organ 53. Two sinks for clean and dirty work. Wear appropriate PPE while cleaning Keep a commercial or domestic spill kit available. vi) Peon- One vii) Sweeper/Morgue attendants-4 (Three sweepers for shift duty round the clock and one as a reliever). xi) Viewing Room: (180-120 sq.ft) used by relatives of the deceased. sq. Common pathogens transmitted through autopsy examination 3. 32. k) Built in cupboards for keeping instruments. II) Dark room attendant- One (on big centers, personnel for photographic work) 11. Wooden boards-3 q. Sluice 31. B. Planning Consideration: Location Mortuary complex must be located in a separate building in vicinity to the main hospital complex must be located in a separate building in vicinity to the main hospital staff but also to relatives, police and other officials who are required to visit mortuary very frequently. Proper handling and disposal of medical waste. The access to the unit should have a covered area along with parking space for vehicles. vi) Mortuary attendant's and cleaner's room: Size 100-150sq.ft. Rinsed in water Placed in disposable leakproof plastic body bag All bodies with known infectious disease must be labelled- to asses undue leakage of fluids in body bags (removed by aspiration & blotting) Also indicated on death certificate 66. Developing proper autopsy technique 3. (b) Instruments, unused specimen jars, chemical solutions, the electric reserve stock instruments, unused specimen jars, chemical solutions, the portable trolley, etc. this should open directly in the postmortem room. Using proper instruments and equipments 4. Mortuary tables 24. Storage and transportation of tissues & waste 13. KASTURE JYOTI GUIDE- DR. Coronet stainless steel-1 b. Mallet, boxwood with metal bands-1 j. 9 inches deep and 6'fit high in which six bodies may be stored in two sets of three tiers. Reception and Waiting Area: It is the place where the body is received and documents are verified and checked. 12. The mortuary and post mortem unit should consist of: A. INTODUCTION DEFINITION- Mortuary is the place where dead bodies are kept in the refrigerated body store and examined in the post mortem room. Cold Room for Body Preservation: Definition- It is the place where all the bodies including hospital dead will be transferred and kept prior to post mortem/autopsy or cremation. General rules: All autopsies or autopsy samples must be handled as if they contained an infectious agents. Never wash contaminated PPE and clothing with personal laundry. Purpose- putrefaction changes are kept to the minimum and to preserve the normal appearance of the body as far as possible. Small table 20" × 24" × 12" for dissection of organs-1 37. - Absorbent disposable towels. (Not less than 8 ft.). Infections for which autopsy should be performed in "Isolation" room Anthrax Hantavirus HIV/ AIDS Influenza Leprosy Meningococcal meningitis Multidrug resistant bacteria(methicillin resistant staphylococcus, vancomycin resistant staphylococcus, vancomycin resistant staphylococcus, vancomycin resistant bacteria(methicillin resistant staphylococcus, vancomycin resistant staphylococcu to mortuary unit and other formalities of the hospital are completed. Second autopsy assistant-to record weights, measurements, etc If multiple autopsies- those with greatest infectious risk should be done first to avoid performing them when the staff is fatigued 45. post-mortem/death reports are generally written or dictate on telephone or recorded on tape during the course of an autopsy. (b) Walls: Thick, durable and permanent. Cover head of decedent with plastic bags during brain removal with Stryker saw or when bodies moved Place human remains in plastic burial pouches. Wear appropriate personal protective equipment (PPE). IN ADDITION THESE STAFF MORTUARY SHOULD REGUIRE I) Photographer - One. Isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsies that carries a known hazardous microorganism are best performed in isolation procedures: Autopsi Scissors; blunt sharp 8" - 1 b. (g) Corridors: wide to allow passage of trolleys. 9. INTRODUCTION ROLE OF THE HOSPITAL AUTOPSY PROTOCOL IN SGH PURPOSES SERVED BY MORTUARY 1. The autopsy room in a teaching hospital should have space for students/doctors/nurses to observe autopsies. A fire alarm system, fire exit routes earmarked with red point. Magnifying glass-3 n. PROPOSED PLAN FOR A MORTUARY COMPLEX To Hospital ENTRANCE Ante Room 15. Ensure adequate supplies of material Oversee that personnel adhere to recommended safe work practices. To keep the dead till the relatives claim and take over the body for disposal. (e) Doors: Wide doors to allow easy passage of trolleys and equipments in the post-mortem room. The body racks should be refrigerated, as it is not always possible to know how long a body will have to remain here. Key factor which would influence the successful outcome of the project would be close interaction of forensic and pathology staff, architects, engineers and builders. The entire autopsy area and its contents are designated a biohazard area and posted with appropriate warning signs. Reception and Waiting area B. Other requirements 5. MCI REQUIREMENTS FOR SET UP OF MORTUARY STAFFING The requirement of staff in the mortuary differs from place to place and depends on the type of work undertaken, the quantum of work and the type of institute whether teaching hospitals. - with absorbent disposable apron. The mortuaries have long been neglected and are generally located in a far-off isolated corner of the hospital and it has remained a dead house. The mortuary broadly serves the following purposes: 1. 23. a. Platform scale for weight 100gms to 10 kg-1 c. Balance to weight 0.2 gms to 10gms -1 34. Mix liquid waste 1:1 with 2N NaOH in waste collection bottle. Others- Hantavirus, leprosy, Fungal and parasitic infections Multidrug resistant bacteria(methicillin resistant staphylococcus, vancomycin resistant enterococci) 43. 42. vi) Post-mortem Scissors: a.Saw, Bernard 9" stainless steel Blade-1 b.Saw, Bernard 9" stainless steel Blade-1 bis and curved Enterotome, viscrotome- 1 and curved Enterotome, viscrotome organs and foetus with top loading tray up to 500 gram and up to 5kg. AUTOPSY PROTOCOL FORAUTOPSY PROTOCOL FOR CLINICAL PM IN S. Windows sills should be at least 5 ft. Role of the Hospital It is the duty of the hospital to provide mortuary facilities for the dead bodies. Rubber gloves -Adequate quantity r. Chisel, straight 3/4 " blade-2 e. EQUIPMENTS: i) Basin All taps should be of the elbow operate type. D. Attendance is limited to three staff members 2. Gouge, 3/4" blade, stainless steel-1 g. Isolation 6. Rezek PR, Millard M; Autopsy Pathology, A guide for Pathologist and clinitians, Charls Thomus: 1987; 21-23. I) Writing desk and chairs m)Shelving for jars (and tanks under) for keeping specimens. may be required. Risk associated with exposure depends upon: Virulence of the pathogen, Size of the dose delivered, Route of exposure, Exposed individual's susceptibility (immunity status) 44. Cold room 18. Easily accessible & approachable Shield it from OPD/ward block areas of the hospital. - One pair of disposable shoe covers. Requirements: (a) Floors: Should be hard and durable. - Removing gloves, even if gloves appear to be intact. iv) Scissors (stainless steel) a. Ancillary areas: i) Doctors Room: Size 100 sq. Aprons -Adequate quantity However the following additions are also recommended by some of the authorities: viii) Suction Pump & Aspirators-leach ix) Body Scale-1 x) Repairing materials like: Thread white, cotton wool (absorbent), wool waste, a variety of discarded clothes, malleable wire, Polythene bags, Gloves, Masks, and Aprons etc. Ancillary areas: Like consultant's room, conference room, prayer room, toilet and other facilities for the staff and the visitors, stores, etc. Practices to reduce transmission by infectious aerosols 8. Physical activity area and Space requirement 4. above the floor. Personnel limited to- pathologist, autopsy assistant If isolation room is nonexistent and if more than one table in the room, the table with least traffic should be used. 51. National Institute for Occupational Safety and Health (NIOSH)- approved high efficiency particulate air (HEPA) respirators equipped with powered, air-purifying respirators. 1. To reduce contamination of autopsy suit- - Cover autopsy table with absorbent sheet - Use disposable equipments (brain removing) for autopsies of suspected prion disease - Reduce aerosol during brain removal- covering head with plastic bag, tie it around neck, remove brain within plastic bag, tie it around neck, remove brain within plastic bag, tie it around neck, remove brain within plastic bag. Aprons, suits & gowns Goggles Gloves Masks Boots Safety & hazard signs 48. Take home message...... Prion disorder is suspected 1. Common pathogens transmitted through autopsy examination Blood born pathogens such as HBV, HCV, HDV, HEV and HIV; Respiratory/ Aerosol transmitted fever), Group A streptococcal infection; Gastrointestinal organisms; typhoid, Spongiform encephalopathy such as Creutzfeldt-Jakob disease; Meningitis and septicemia (especially meningococcal). Space is needed in front of the cold chambers for the withdrawal of trays. Aluminium & steel - 2% glutaraldehyde (damaged by bleach) Floor- water & detergent 54. Protection against Blood born Pathogens 7. All taps should be of the elbow operate type. Floor ducts and trenches should be avoided. The concept of a modern mortuary in a hospital, regards the mortuary as a culturally sensitive area in terms of public relation of the hospital. Hand washing and protect skin by appropriate barriers. of work surface Safe disposal of contaminated waste 46. 1) Immunizations Hepatitis B Tetanus Diphtheria Other (rubella, measles, polio) Preexposure prophylaxis (vaccination+ rabies Jg) 2) Medical Surveillance Yearly PPD skin test for tuberculosis Periodic screening for HIV Periodic review of immunization status Periodic history and physical exam 68. Remove contaminated PPE and clothing in a manner to avoid contact with skin, mucous membranes Use bags and containers that are either color-coded red or labeled with the fluorescent orange-red biohazard warning symbol. 16. Filters classified as N95, N99, N100, R95, R99, R100, P95, P99, and P100 meet the NIOSH criteria for TB protection. Prevention of existing wounds, skin lesions, conjunctiva and mucous membranes with appropriate barriers. ii) Changing Room: Two separate male and female changing rooms. (k) Communication: Both internal as well as external telephone lines (as the forensic expert would always be communicating between other hospital areas as well as police). iii) Cutting instruments-stainless steel: a.Skull cutter (electrical)-1 b.Organ knife 6" blade, solid forged -1 d.Caltin solid blade/solid forged-2 h.Brain knife 10" blade, solid forged-1 i.Resection knife 3" blade, solid forged-2 j.Scalpels, BP Handle with negative airflow exhaust system & contains a low traffic isolation room. This kit should contain- - One pair of splashproof safety goggles. Cabinet doors should open on both sides to allow the attendants to approach either side of the trolley. - Immediately place brain in 10% neutral buffered formalin 7. (l) Air conditioning: The entire mortuary complex should be air conditioned with a separate system for the autopsy room to prevent foul air permeating the rest of the area. 4) Implement a medical surveillance program. Refrigerated cold rooms - under negative pressure 59. 49. 6) Handle contaminated PPE and clothing outside of the work area. To receive dead bodies brought to the hospital for medicolegal post-mortem work and store in the mortuary pending further disposal. A. For teaching the undergraduates as well as post-graduates. Remains : After autopsy- wash body with detergent solution f/b antiseptic or 1:10 dilution bleach. 8. (j) Adequate supply of Hot and cold water: sinks, washbasins. Signature or consent of two relative in local language. Windows preferably on the northern side, large with opaque glass and fitted externally with fly proof screens. n) Trolleys for shifting dead bodies and adequate furniture. To allow viewing and identification by relatives, police and other people. Finkbeiner WE, Ursell PC, Davis RL; Autopsy Pattology, A manual and atlas, Churchill Livingstone: 2004, 29-39. It is very essential to have an adequate cold room or sufficient number of refrigerators for storing the dead bodies, viscera etc. Employee health (vaccination & health surveillance) 41. Wash and dry reusable PPE and clothing according to the instructions on their labels, in hot water at least 160°F and detergent for 25 minutes, or with chemicals at the proper conc. As prions contains only protein (not nucleic acid) are resistant to inactivated by procedures that denature proteins such as some detergents or NaOH. Autopsy requisition forms. - Two pairs of disposable latex gloves. Use HEPA filters 3. Employee health: Cuts or puncture woundswashed immediately with soap & water consult physician. Metal/steel scale-2 m. (m) Safety: Emergency lighting, fire sprinklers and smoke/thermal detector in all rooms. H.CLINICAL PM IN S. Conventional heat radiators/ convectors can be mounted on the walls. 5. Tissue fixation (3.7% formaldehyde in at least 10 times the volume of tissue) Glutaraldehyde embalming kills or inactivate all pathogens except prions and mycobacteria. xiv) Forensic Photography Section: "scaled colour- photography detter interpretation. Measuring jug (one litre)-1 l. 39. ft. Measures 12" stainless steel -1 i. xv) Medical Observation Room: (Size 70-150 sq.ft.) - To allow clinical staff to attend autopsy without changing. Principal rooms height of ceiling not less than 12 ft. If possible autopsy should be carried out in working hours and with adequate, well trained staff. Remains 12. Protection against Blood born and other contagious infections 1) Practice universal precautions Treat all human blood and other potentially infectious materials (OPIM) as if contaminated clothing and disinfecting PPE. xii) Lobby: (Size 150sq.ft.) Required to prevent direct observation into the body store. o) Tiered benches for observers to visualize and avoid interference. c) Suitably covered junctions between the walls and floors. 3) Train workers. Chemicals and articles UPGRADATION IN HIGHLY INFECTIOUS DISEASES 3. 13. No air should be re-circulated in the mortuary. Physical Facilities Area and Space Requirement: Space requirement varies from hospital to hospital depending upon the workload, level of care it provides and jurisdiction of medical autopsies. Natural ventilation by windows should be adequate except in the post-mortem room where a mechanical exhaust system is necessary. www.who upgadation of mortuary in highly infectious diseases 70. Trolley 26. iv) Assistant - (300-500 autopsies/yr)-One,(>500 autopsies/yr)- Two. SET UP OF MORTUARY AND UPGADATION IN HIGHLY INECTIOUS DISEASES DR. www.mci forensic pathology,set up of mortuary 5. A/C Plant Room: Where more then twelve bodies are to be stored, a separate plant room 25-30 sq. Upgradation in highly infectious diseases- 40. 8. Space for mortuary trolley. Cold room for body preservation C. Mortuary tables with washing and drainage facilities (preferably of stainless steel with arrangements for allowing free drainage of a constant flow of water from top to bottom). 58. Fitted with tiles making it impermeable and washable. Fluorescent lighting/good concentrated lighting over tables with at least one having tilting mechanism. Equipments 6. 10. It is also important for the security reasons Near the pathology laboratory on the ground floor, Easily accessible from the words, accident and emergency departments In an area with ample natural light through windows; the windows; the windows should preferably be on the northern side. iv) NaOH v) 10% Formalin for preservation of viscera vi) Rectified and Methylated spirit as preservative vii) Thymol crystals viii) Sealing wax etc. 57. Medical Council of India laid down the following staffing pattern-9. A lavatory also must be provided. Probes silver with eye 10"-1 d. at the outset. REFERENCES 1. 63. Airborne or Droplet Transmitted Diseases are recordable as Occupational Injury and illnesses . Wear cut resistant gloves, waterproof gown 5. vii) Attendant lavatory viii) Stores : Three small stores (size 30-40sq.ft. (i) Heating and Ventilation: Fans with variable speed designed to produce 10 air changes per hour. To receive dead bodies requiring pathological post-mortems pending final disposal. (h) Lighting: The light fittings should be designed to produce 10 air changes per hour. To receive dead bodies requiring pathological post-mortems pending final disposal. waste. The chambers - 6 ft. The room should be so arranged that the pathologist/forensic medicine doctor might work at two or more tables. Modification in decontamination procedure - Soak instruments for 1 hr in 1N Sodium hydroxide, rinse for 2 - 3min in water - Transfer to red autoclavable biohazard bags & autoclavable biohazard bags room, like an operation theatre must be kept clean to protect the doctors and staff from bacterial contamination. Avoid breach of the skin. Moisture resistant and can be easily cleaned and decorated with plants and pictures, which would create a pleasant atmosphere, as the last impression of the relatives receiving the deceased is one of quite dignity in death. Photography 10. - Placed in 95-100% formic acid for 1 hr, f/b fresh 10% neutral buffered formalin-48hrs (eliminate all prion infectivity) - Tissue remnants, contaminated formalin discarded within plastic container as infectious hospital waste for incineration. - Disinfectant , Waterless antiseptic hand cleanser - Two red plastic bags with twist ties. 6. 5) Disinfect contaminated equipment and environmental and working surfaces For routine decontamination - all instruments and autopsy devices rinsed in detergent solution, water & decontaminated with 5.25% sodium hypochloride (1:10 soln of household bleach) for 10 mins. k. This is important to ensure that bodies are not wrongly delivered and to differentiate between MLC and non-MLC bodies. Remove and replace PPE when they become damaged or penetrated by blood or OPIM. This chapel must not be cramped, as space is necessary for turning body trolleys, coffins, etc. It must have a separate entrance for visitors and dead bodies. D. THE LANGUAGE OF DEATH IS DECIPHERED HERE 2) Avoid touching skin, mouth, nose, eyes with contaminated gloves or fingers Cover cuts, abrasions, or other skin lesions with an appropriate bandage prior to donning PPE. ft.) For the thorough cleansing of all instruments & equipments x) Specimen Room: (Size 120 Sq. ft.) To preserve viscera in formalin before sending to pathology department or permanent preservation. 8) Practice good personal hygiene Never store or consume food or beverages in areas where exposure to blood or OPIM exists. Refrigerated cabinets 21. 1. To keep unclaimed bodies until disposal (burial or cremation) is arranged by the hospital authorities. and Ancillary rooms height of ceiling not exceeding 10 ft. Personal protective equipment (PPE) Gowns Plastic disposable aprons Caps Masks Eye protection (goggles & face shields) Shoe covers or footwear restricted to contaminated area Double gloves (latex, PVC) Puncture resistant hand protection (goggles & face shields) Shoe covers or footwear restricted to contaminated area Double gloves (latex, PVC) Puncture resistant hand protection (goggles & face shields) Shoe covers or footwear restricted to contaminated area Double gloves (latex, PVC) Puncture resistant hand protection (goggles & face shields) Shoe covers or footwear restricted to contaminated area Double gloves (latex, PVC) Puncture resistant hand protection (goggles & face shields) Shoe covers or footwear restricted to contaminated area Double gloves (latex, PVC) Puncture resistant hand protection (goggles & face shields) Shoe covers or footwear restricted to contaminated area Double gloves (latex, PVC) Puncture resistant hand protection (goggles & face shields) Shoe covers or footwear restricted to contaminated area Double gloves (latex, PVC) Puncture resistant hand protection (goggles & face shields) Shoe covers or footwear restricted to contaminated area Double gloves (latex, PVC) Puncture resistant hand protection (goggles & face shields) Shoe covers or footwear restricted to contaminated area Double gloves (latex, PVC) Puncture resistant hand protection (goggles & face shields) Shoe covers or footwear restricted to contaminated area Double gloves (latex, PVC) Puncture restricted to contaminated area Double gloves (latex, PVC) Puncture restricted to contaminated area Double gloves (latex, PVC) Puncture restricted to contaminated area Double gloves (latex, PVC) Puncture restricted to contaminated area Double gloves (latex, PVC) Puncture restricted to contaminated area Puncture restricted to contaminated are Specialists-Two (as one specialist is likely to be busy in other important work, teaching work, in court attendance, or if he falls sick) ii) Post mortem technician-One. In Sassoon General Hospital capacity of cold room is for 32 bodies and unclaimed bodies stored for 3 days before handing over to police. Universal precautions Prevention of puncture wounds, cuts, abrasions by safe handling of needles and sharp instruments. It may be in form of gallery or room, separated from the post-mortem room by a full-length glass-viewing panel above worktop height, would allow adequate observation & discussion. 6. 17.

272021/6/ · In post chaises behind blue silken curtains to ride slowly up steep road, listening to the song of the postilion re-echoed by the mountains, along with the bells of goats and the muffled sound of a waterfall; at sunset on the shores of gulfs to breathe in the perfume of lemon trees; then in the evening on the villa-terraces above, hand in hand to look at the stars, making ...

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