

| UR number | | |
|----------------------|--------|--|
| Surname | | |
| Given name/s | | |
| Date of birth | Gender | |
| (Affix baby's label) | | |

Victorian Perinatal Autopsy Service

Checklist for arranging a Perinatal Autopsy

| Task | Initial when complete | Fax/email to lab and send with Baby 🗸 |
|--|-----------------------------|--|
| Activate your hospital Bereavement Procedure. | | N/A |
| Discuss perinatal autopsy with the family. | | N/A |
| Provide family with written information about autopsy (information available at thewomens.org.au/reproductiveloss). | | N/A |
| Download the forms from this link thewomens.org.au/VPASforms or obtain them through your local procedure. | | N/A |
| Complete the VPAS Consent for Perinatal Post Mortem Examination form with the parents. | | ~ |
| Complete VPAS Transport Authorisation Form (authorisation for returning baby after PM to the family). | | ~ |
| Complete the death certificate (Medical Certificate of Cause of Perinatal Death – send a legible copy if using a pre-printed form or a copy of the certificate after completing the form via the Births Deaths and Marriages online portal). PLEASE ensure a cause of death is documented eg FDIU, extreme prematurity etc. | | ~ |
| Complete VPAS Clinical Information Form: Before Commencement of Post Mortem. | | ~ |
| Collate all relevant antenatal perinatal and postnatal clinical information to send with forms: A copy of the mother's Victorian Maternity Record or equivalent Birth summary Discharge summary (if available) Relevant medical and midwifery/nursing notes All pathology tests for mother and baby All imaging results or location/contact of where imaging performed | | ~ |
| Complete VPAS Clinical Information Form: Before Commencement of Placental Pathology. | | ~ |
| Complete a pathology request form and send the fresh Placenta (no formalin) requesting placental histopathology, placental swabs and molecular karyotype/microarray. The placenta is a maternal specimen it must be labelled with maternal identifiers. | | * |



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| (Affix baby's label) | | |

Victorian Perinatal Autopsy Service

| Task | Initial when complete | Fax/email to lab and send with Baby |
|---|-----------------------------|--|
| When arranging the transportation to VPAS, ensure the VPAS Laboratory have confirmed they are able to receive the baby before departure to negotiate an acceptable arrival time. • Monash: mortuary@monashhealth.org • RCH: 03 8345 2562 • Austin: 03 9496 5285 | | N/A |
| Create three copies of all VPAS forms and other reports: one hard copy to stay with the baby one copy to medical records at your institution, and one copy via fax or email to the VPAS Laboratory Contact methods for sending through referral documents to VPAS Laboratory: Monash: mortuary@monashhealth.org RCH: 03 8345 2562 Austin: 03 9496 5285 | | ~ |
| Before sending the baby, check the baby is wearing two correct and clear patient identification labels and that the documents are correctly labelled. | | ~ |
| CLINICAL TEAM CONTACT DETAILS Please ensure each of the following are completed | | |
| Contact details of clinical staff member sending baby (RN/RM/other who has prepared baby | //forms and ch | ecked ID) |
| Name: Designation: | | |
| Email address: Contact no: | | |
| Contact details of Doctor who has completed informed consent with family | | |
| Name: Designation: | | |
| Email address: Contact no: | | |
| Contact details of Nurse/Midwife Unit Manager (or clinical staff member during business ho | urs with queri | es) |
| Name: Mobile number: | 5 quoi i | 1 |
| Email address: Phone and pager number | r: | |
| | | |

Send all of the above including this checklist to the VPAS hub