



Body Donation Information and Consent Forms

Thank you for your enquiry about donating your body to the Hull York Medical School for anatomical examination for education training and research purposes. This booklet aims to provide you with the information you need to decide whether or not to bequest your body and if the decision is yes, to decide the ways in which your body may or may not be used.

This booklet can be made available in large print or Braille if required.

General information

The Hull York Medical School has a continuing requirement for human bodies for the purposes of Anatomical Examination, Education, Training and Research and is greatly indebted to the public-spirited individuals who bequeath their bodies for these purposes. Such bequeathal is regulated by the Human Tissue Act 2004 and overseen by the Human Tissue Authority.

We are not able to accept the bequest of a body if organs have been removed for transplantation. If you would prefer to donate organs for transplantation, you should carry a donor card, available from the NHS Donor line 0300 123 23 23. It is possible to give your consent for anatomical examination and at the same time be registered as an organ donor. If at the time of death the offer of your organs for transplantation is not taken up, the body can then be offered to the medical school for Anatomical Examination.

If you decide to bequeath your body, it is important that you discuss this with your next-of-kin and/or executor(s) so that they are aware of your wishes. You have the right to withdraw your bequeathal at any time, by contacting the Hull York Medical School at the address on the Bequeathal Form.

Please note no guarantee can be given that a bequest will be accepted.

How will my body be used?

Anatomical examination

This includes teaching, studying and researching the form, shape and structure of the human body. It allows us to use your body for teaching anatomy to medical students, related health care professionals and participants on surgical courses.

Education and training purposes

Health professionals acquire great benefit from the opportunity to develop surgical skills and other clinical procedures on a body. We run and support many courses that develop and further clinical and surgical skills.

Fees may be charged for running surgical short courses, these are to cover facilities, staff, equipment and transportation costs. No profit is ever made from the body donation itself.

If you wish to discuss how your body would be used further, please contact the medical school on 01482 464750 or email jackie.houlton@hyms.ac.uk.

Restrictions on Acceptance of Bequeathals

Please note no guarantee can be given that a bequest will be accepted.

The main reasons for non-acceptance are:

- there has to be a Coroner's post mortem
- a person dies abroad
- there is a severe infection (e.g.hepatitis, tuberculosis, HIV, MRSA, septicemia)
- a person has Alzheimer's disease or senile dementia of unknown cause
- a person has had a recent operation (where the wound has not healed)
- a person has bed sores, varicose ulcers or oedema
- a person has jaundice of infective origin
- a person has severe peripheral vascular disease
- a person has arthritic deformity
- a person is obese – maximum weight limitation is 15 stone/98 kg

Bequeathals are normally only accepted from those residing within approximately 50 miles of the Hull York Medical School.

Bequeathals are not normally accepted from individuals under the age of 21.

The Hull York Medical School reserves the right to decline a bequeathal if at the time of death there is insufficient storage space or a shortage of staff.

If the Hull York Medical School is unable to accept your bequest your next of kin or executor(s) must make private arrangements for your cremation or burial at their expense.

The Consent Form

If having considered the above information you wish to bequest your body for anatomical examination, please complete the consent form at the back of this booklet. Two copies of the form are provided and you should complete both copies. You should sign the forms in the presence of a witness who should then complete the section on the reverse of the form.

Please return one copy of the completed form, your wishes will then be registered on our system.

Keep the other copy of the completed consent form and this booklet with your will or personal papers. It is advisable also to inform your relatives, executor and doctor of your intention.

You may wish to include instruction about your bequest in a Will though it is not necessary to do so if you have completed and returned a copy of the consent form in this booklet.

Withdrawal of Consent

You are of course able to withdraw your consent at any time, please do this in writing to the Hull York Medical School.

Procedure at the time of death

A death should be notified to the Hull York Medical School by telephone as soon as possible during normal office hours Monday – Friday on 01482 464750/01482 464153. A decision regarding the acceptance of a bequest will be made as quickly as possible. For deaths occurring over a weekend or public holidays arrangement should be made for the body to be moved to a local funeral director (with refrigeration facilities), these costs are to be borne by the estate. Then telephone us on the next working day.

No guarantee can be given that a bequest will be accepted.

During the major public holidays at Christmas and New Year the University is closed and as such is unable to accept bodies. During these times next of kin are advised to make their own arrangements for a funeral in the normal way.

If death occurs in a hospital, the body should be held under refrigerated conditions in the hospital mortuary. The maximum time for holding is dependent on the refrigeration.

If death occurs at home or at a nursing home the body should be removed to a local funeral director with refrigeration facilities. If the deceased has to be taken to an undertaker's premises it is important for relatives to understand that the cost of the undertaker must be borne by the next of kin or the donor's estate.

Before a decision on acceptance of the body by the Hull York Medical School can be made, we will contact the last doctor in attendance (i.e. the doctor certifying the death) to discuss the cause of death and any relevant medical history.

Shortly after death your relatives or executor should register the death with the Registrar and tell him/her about your wish to donate your body for anatomical examination. The Registrar will issue them with a green form (certificate of burial or cremation) and a death certificate, both forms (originals not photocopies) must be received by the medical school at the same time as receiving the body.

If the bequest is not accepted, your relatives or executor should proceed with normal arrangements for burial or cremation. It is regretted that the medical school cannot make any financial contribution to these private arrangements.

Eventual funeral arrangements

When a bequest has been accepted, all eventual expenses and arrangements for a simple cremation at our local crematorium in Hull are normally borne by the University. Ashes can either be scattered in the Garden of Remembrance or returned to the medical school for collection by the next of kin.

A Memorial Service is held periodically at the University of Hull, to which relatives and friends of those who bequeathed their bodies are invited. The service provides an opportunity to remember, celebrate and give thanks.

If your relatives wish to make arrangements for a burial service or other private funeral arrangements they should contact a funeral director. In such circumstances all expenses involved in such arrangements become the responsibility of the next of kin or executors.

Enquiries or complaints

If you have a question or concern about any aspect of the bequeathal process, you may telephone, email or write to:

Anatomy Bequeathals,
Hull York Medical School
The University of Hull
Cottingham Road
Hull
HU6 7RX

Telephone contacts
Bequeathal secretary 01482 464750
Mortuary Manager 01482 464153
Designated Individual 01482 463681/
01904 321783
Email: Bequeath@hyms.ac.uk

Further information regarding bequeathal for Anatomical Examination can be found on the website of the Human Tissue Authority (www.hta.gov.uk).

Guidance notes for completing the bequeathal form

This form must only be completed by a person wishing to donate their body of their own free will and signed in the presence of a witness.

Part A

Complete the general details of your name, address, etc.

Box ticking options:

Tick option 1 if you do not wish to place any restriction on the length of time that your body or body parts may be retained.

Tick option 2 if you wish to place a restriction on the length of time that your body may be retained, but body parts may be kept longer.

Tick option 3 if you wish to place a restriction on your whole body.

Photography: Only tick this box if you are **NOT** willing for unidentifiable images of your body to be used for anatomical examination, education, training, research and public display.

Funeral arrangements: Please choose only **ONE** of the options. If you choose to have a medical school cremation and would like your ashes collected by a relative, give the name and address of the person who will collect the ashes.

Signature of Donor: Please sign your name in the space for Signature of Donor and insert the date. **This must be in the presence of your witness who will then sign and date Part B.**

Part B

Witness Declaration

After completing Part B, your witness should sign his/her name in the space for Signature of Witness and insert the date (**the date must correspond with the date of your signature**).

CONSENT FORM

Please be aware completion of this form is not a guarantee of acceptance.

Part A: This is to be completed only by the person wishing to donate their body.

Please complete in **BLOCK CAPITALS**

Title: _____ Surname/family name: _____

Forename(s): _____

Address: _____

Postcode: _____ Tel no.: _____

Date of birth: _____

I WISH TO DONATE MY BODY AFTER MY DEATH. I UNDERSTAND THAT IT MAY BE USED FOR ANATOMICAL EXAMINATION, EDUCATION, TRAINING, RESEARCH AND PUBLIC DISPLAY.

Please tick as appropriate (please tick only *ONE* of options 1, 2 or 3):

1. My body and my body parts may be kept for as long as they are needed.
2. My body may be kept for a maximum of 3 years only, but parts of my body may be kept for longer than 3 years.
3. No part of my body may be kept for more than 3 years.

Photography

Please tick this box if you **DO NOT** consent to images of your body or body parts being taken and used for the purposes of anatomical examination, education, training, research or public display. **You will not be identifiable in any of the images.**

Funeral arrangements (please tick only *ONE* of the options below):

- Medical School cremation with ashes scattered in the Garden of Remembrance at Hull Crematorium.
- No further contact from the medical school. Ticking this box means we will arrange a cremation at our convenience and the cremated remains will be scattered in the garden of remembrance. **Your next of kin will not be contacted at any point.**
- Medical School cremation with ashes collected by next of kin.
- Private funeral with all arrangements made and funeral costs funded by next of kin and/or executor(s).

Signature of donor: _____ Date: _____

*Please complete **Part B** overleaf.....*

Part B: To be completed by a witness who can be next of kin, executor, GP, friend, etc.

I confirm that I have witnessed _____ (*insert name of donor*) completing **PART A** of this form.

Surname/family name: _____ Forename(s): _____

Address: _____

Postcode: _____ Relationship to donor: _____

Signature: _____ Date: _____
(Date must correspond with date of signature of donor)

Donor's Medical History

Please give a summary of any serious illness, injuries fractures of operations you have had, giving the approximate dates of your treatment.

Do you have a pacemaker/defibrillator fitted? _____

Approximate height: _____ Approximate weight: _____

Name and address of your Doctor:

Complete both forms. Return one form to the address below and keep the other with your Will or legal papers.

**Anatomy Bequeathals
Hull York Medical School
The University of Hull
Cottingham Road
Hull
HU6 7RX**

CONSENT FORM

Please be aware completion of this form is not a guarantee of acceptance.

Part A: This is to be completed only by the person wishing to donate their body.

Please complete in **BLOCK CAPITALS**

Title: _____ Surname/family name: _____

Forename(s): _____

Address: _____

Postcode: _____ Tel no.: _____

Date of birth: _____

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Please tick as appropriate (please tick only *ONE* of options 1, 2 or 3):

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- Medical School cremation with ashes collected by next of kin.
- Private funeral with all arrangements made and funeral costs funded by next of kin and/or executor(s).

Signature of donor: _____ Date: _____

Please complete **Part B** overleaf.....

Part B: To be completed by a witness who can be next of kin, executor, GP, friend, etc.

I confirm that I have witnessed _____ (*insert name of donor*) completing **PART A** of this form.

Surname/family name: _____ Forename(s): _____

Address: _____

Postcode: _____ Relationship to donor: _____

Signature: _____ Date: _____
(Date must correspond with date of signature of donor)

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Please give a summary of any serious illness, injuries fractures of operations you have had, giving the approximate dates of your treatment.

Do you have a pacemaker/defibrillator fitted? _____

Approximate height: _____ Approximate weight: _____

Name and address of your Doctor:

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