



HEALTH HOLDING

HAFER ALBATIN HEALTH  
CLUSTER  
MATERNITY AND  
CHILDREN HOSPITAL

<b>Department:</b>	Infection Prevention and Control Department		
<b>Document:</b>	Departmental Policy and Procedure (MPP)		
<b>Title:</b>	Mortuary Care		
<b>Applies To:</b>	Mortuary Department		
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## 1. PURPOSE:

- 1.1 To provide clear infection control standards and guidelines on the appropriate care of the body following death to protect healthcare workers (HCWs), morgue staff and families from potential infectious exposures must be strictly implemented.

## 2. DEFINITONS:

- 2.1 A morgue or mortuary ( in a hospital or elsewhere) is used for the storage of human corpses awaiting identification, or removal for autopsy or disposal by burial , cremation or otherwise.

## 3. POLICY:

- 3.1 Preparing the deceased for the morgue always involves the handling of blood, body fluids, and biological agents and may also involve exposure to life-threatening biologicals, chemicals, radiation, or electrical current.
- 3.2 Hand hygiene facilities and supplies are available & easily accessible (i.e., easy to reach within the working area or very close to it).
- 3.3 Morgue staff must be well familiarized with the types of isolation precautions & appropriate PPE to be used to avoid risk of acquiring infection.
- 3.4 Continuous job specific training on Hand hygiene & proper use of PPE.

## 4. PROCEDURE:

- 4.1 Nurses
  - 4.1.1 Adhere to standard precautions and use appropriate personal protective equipment (PPE) at all times.
  - 4.1.2 After the physician declares death, perform the following tasks to prevent exposure to blood and body fluid during transportation to protecting morgue personnel:
    - 4.1.2.1 Remove all disposable tubes and lines appropriately.
    - 4.1.2.2 Dress all wounds with impervious material to prevent oozing of body fluids or bleeding from wounds or previous catheter sites.
    - 4.1.2.3 Request an appropriately sized body bag and place the body in the bag.
  - 4.1.3 Follow the proper identification of the body, transportation, and documentation in the morgue.
  - 4.1.4 Identify patients with known infectious diseases and they should have body tags labeled with the appropriate category
  - 4.1.5 The nurse in charge or dedicated personnel will inform the morgue supervisor if the deceased was known to harbor an infectious agent. (This information will also be confirmed in writing on the identification tag attached to the body bag.)
  - 4.1.6 Body parts (including placentas, stillborns, products of miscarriage, etc.) must be place in a **red bag**, labeled clearly, and stored in the refrigerator until delivery to the morgue.
- 4.2 Morgue Staff

- 4.2.1 Orient and train all morgue staff and especially body washers through in-service training annually regarding the proper infection control practices (i.e., hand hygiene, modes of disease transmission, and the importance of PPE) and how to apply these practices.
- 4.2.2 Observe always standard precautions and use appropriate personal protective equipment (PPE) at all times. Avoid direct contact with blood and body fluids.
- 4.2.3 Use PPE (mask, goggles, latex/vinyl gloves, boots, waterproof full-length apron) to prevent splashing and contamination with body fluids.
  - a. Remove disposable PPE and discard immediately after the task is completed.
  - b. Reusable aprons and boots must be cleaned between patients and at the end of each shift.
- 4.2.4 Place contaminated linen in a laundry bag and send to the laundry.
- 4.2.5 Ensure that the body bags (which are plastic) are appropriately disposed of when the body is removed (in a yellow bag).
- 4.2.6 Do not drink or eat inside the morgue.
- 4.3 Needlestick or Body Fluid Exposure
  - 4.3.1 Evaluate all morgue staff in the Employee Health Clinic on a yearly basis for regular checkups and at any other time as deemed necessary (such as after an exposure to body fluid or blood).
  - 4.3.2 Ensure that the death log book is available in the morgue.
- 4.4 Morgue Facility and Maintenance
  - 4.4.1 Keep the morgue clean at all times.
  - 4.4.2 Monitor the temperature of the refrigerators (4°C) and record the temperature on the temperature chart on a daily basis.
    - 4.4.2.1 Any temperature failure (temperature out of range) must be reported to the Utilities and Maintenance (U&M) Department.
    - 4.4.2.2 For long term preservation of dead bodies, a deep freezing compartment with (temp<15OC) must be maintained.
  - 4.4.3 Clean and disinfect all equipment, table and counter surfaces, and transport trolleys after every patient and at the end of the day.
    - 4.4.3.1 All tabletops, stretchers, and body boards must be made of washable material (plastic, vinyl, or
    - 4.4.3.2 Use hospital-approved disinfectants.
  - 4.4.4 Store all flammable chemicals and materials appropriately to avoid accidental exposure
- 4.5 Aspects of infection control in the morgue including (but not limited to):
  - 4.5.1 Safe removal of all external invasive lines and devices used during hospital interventions (if an autopsy is not anticipated) with packing all wounds and natural openings with absorbent material and bandaged to contain any potential secretion of body fluids
  - 4.5.2 Protocol to transport the deceased to the facility morgue
  - 4.5.3 Postmortem safe handling of dead bodies (i.e., cleansing, bathing and preparing the deceased for burial), especially patients with infectious transmissible diseases or under isolation precautions and bodies with open wounds.
  - 4.5.4 Specific protocols to preserve evidence if an autopsy is required or requested.
  - 4.5.5 Protocol to transport the body from morgue to a funeral home.
  - 4.5.6 Occupational risks and work practices that delineate which tasks or conditions of employment require the use of personal protective equipment and engineering devices to minimize exposure.
  - 4.5.7 Record keeping with protocol for reporting accidental exposures.
  - 4.5.8 Management of waste and environmental cleaning procedures
- 4.6 Housekeeping activities (cleaning and disinfection) for all environmental surfaces including the inside of the refrigerator and deep-freezing equipment.
  - 4.6.1 Morgue housekeeping schedule with clear roles & responsibility of housekeeping and morgue staff.
    - 4.6.1.1 The checklists should be practical and cover all environmental surfaces in different areas.
    - 4.6.1.2 Includes responsible staff (whether morgue staff or housekeeping staff with names
    - 4.6.1.3 If applicable – and signatures) / dates & times / cleaning ingredients and disinfectants to be used (types – concentrations – contact times)

- 4.7 Transport cadaver bags that fulfill MOH approved specifications are available in 2 sizes & to be used for dead bodies.
  - 4.7.1 Heavy duty cadaver plastic pouch (made of tear-resistant, fluid-resistant and impervious material, e.g., waterproof Vinyl)
  - 4.7.2 Bags are of different suitable sizes
  - 4.7.3 Bag can be securely sealed for hygiene using a full-length longitudinal zipper for closure
  - 4.7.4 Bag has a convenient access for examination and enclosure through a full-length longitudinal zipper.
  - 4.7.5 Bag has a suitable pouch to hold the body tag
- 4.8 Transportation card that denotes the type (s) of isolation precautions is attached to the dead body of the patient under any type of isolation.
  - 4.8.1 Logbook used for recording of deceased while under isolation precautions and protective measures taken.
  - 4.8.2 Morgue's transportation cards that should be attached to the dead bodies of patients under isolation precautions.
- 4.9 Mortuary HCWs are fully oriented about handling deceased patients with infectious diseases or died while under isolation precautions.
  - 4.9.1 Appropriate PPE includes (mask, goggles, latex/vinyl gloves, boots, waterproof full-length apron) to prevent splashing and contamination with body fluids.
  - 4.9.2 Recommended PPE (double layers of disposable gloves, protective eyewear or face shield, respiratory protection, fluid-resistant gowns or waterproof aprons, closed shoes or protective shoe covers and caps) should be worn when performing or assisting in postmortem procedures.
  - 4.9.3 Use of metal mesh gloves or gloves made with "cut resistant fabric" underneath the outer gloves is suggested for prosecutors to prevent injury from scalpels and other sharp objects other than needles (e.g., bone shards and fragmented projectiles).
  - 4.9.4 Approved respiratory protection is required for prosecutors when performing an autopsy on a known or suspected case of TB (high-risk procedure).

## **5. MATERIALS AND EQUIPMENT:**

### **5.1 Forms and Records:**

5.1.1 N/A

### **5.2 Materials and Equipment**

5.2.1 N/A

## **6. RESPONSIBILITIES:**

6.1 It is the responsibility of Infection Prevention and Control Department to implement this policy.


## **7. APPENDICES:**

7.1 N/A

## **8. REFERENCES:**

- 8.1 The GCC Infection Prevention and Control Manual. 3rd Edition. 2018.
- 8.2 Guidelines for Practical Implementation in the Healthcare Facilities. MORTUARY SERVICES Year 2022 - Version 1.2.

9. APPROVALS:

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