



EXPERIENCE GATHERED BY JUDICIAL MEDICAL OFFICERS DURING THE COVID-19 PANDEMIC INCLUDING A MINI REVIEW

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Abstract

The staff of a mortuary should invariably be responsible when handling “high risk” autopsies such as suspected cases of COVID 19. SARS-CoV-2 transmission is mainly through respiratory droplets and the other method being the direct contamination secondarily from already infected surfaces. The novel corona virus is considered as a Hazard Group 3 (HG3) pathogen. Performing of autopsies are considered relatively safe provided the guidelines are followed and the mortuary is well equipped. The author was personally involved in obtaining samples for SARS-CoV-2 in many cases. In the case under discussion a scene visit had been ordered by the magistrate as the deceased was found dead by the side of a road with suspicious circumstances. The deceased had experienced mild respiratory symptoms before his death. The cause of death was finalized as IHD (Ischemic Heart Disease) upon all investigations as it was possible to exclude other differential diagnoses including COVID 19. Since this case was handled rather early in the epidemic, many hardships were faced by the author. Transportation of the dead body to the mortuary was also quite problematic. The single dissection area of the mortuary without an ideal ventilation system to handle Hazard Group 3 pathogen, limited storage area for dead bodies, and the staff anxieties were a few out of many. A mini review about COVID 19 is illustrated here with the emphasis of the necessity of well-equipped mortuaries with engineering control (proper ventilation system).

Keywords: well ventilated mortuary, Hazard Group 3 pathogen, COVID 19