Forensics Permission to Observe Autopsy Form

Signatures due: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

I’m happy to announce that students taking \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (class name)

have the opportunity to watch a human autopsy. Watching an autopsy affords a unique chance for students to further explore career options they may be interested in. Since many of our students are planning on going into the medical field, this autopsy will help students decide if this is truly the correct path for them. In addition, it helps educate students about the role of a medical examiner and their responsibilities during an investigation.

Due to the sensitive and nature of this content I am requiring this permission slip to be signed by both the parent/guardian and student. If you or your student decides not to sign the document, I will have an alternate assignment available in a separate location for them to work on in lieu of watching the autopsy.

While I am very excited about being able to offer this opportunity, I know that this is not something that all students want to see, and perhaps not something that parents/guardians want their child to see. Please be assured that this video is for educational purposes only; while the images are graphic, the deceased is talked about clinically and appropriately. I do truly hope if you and your student are comfortable you sign the permission slip, but I also want to re-iterate that no child’s grade or learning will be impacted by choosing not to participate.

By signing below, I understand and agree to the following:

* I give permission for my student to watch video-recorded autopsy content.
* I understand that this video shows the dissection of a real human whose family has given their consent for this video to be made.
* I understand that the body is nude, and my student will see the genitals of the deceased patient.
* I understand that this video is being used as a teaching tool for learning about the profession of a medical examiner.

Student Code of Conduct:

* I understand that this was a real person, with a real family. I will treat the deceased with the respect they deserve.
* I agree to talk about the deceased, their body or body parts, in a clinical, non-judgmental manner that shows respect to them and their lifestyle.
* I agree to not take any photos or videos of the autopsy. I know that this video was recorded with the understanding that it was for educational purposes only. I will not disrespect the deceased by using images or video to gain attention from others.
* I know that I can leave during the autopsy if I begin to feel overwhelmed to work on the alternate assignment in another room.

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_

Student name (printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_