Training of post-mortem room technicians

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The first national examinations for the Certificate and the Diploma in Mortuary Hygiene and Technology of the Royal Institute of Public Health and Hygiene, London,¹ were held in April 1966 and the second in April 1967. In preparation for these examinations revision courses of 20 or more systematic weekly lecture/demonstrations of one and a half to two hours were conducted in the winter and spring terms for small classes or groups, and even for individuals, by groups of pathologists and by individual pathologists throughout the country.

These courses covered the Syllabus prepared by the Royal Institute and approved by the Board of Education and Examination for Post-Mortem Room Technicians², and included (1) anatomy and applied anatomy, and elementary physiology; (2) an introduction to bacteriology, the use of disinfectants, and the dangers and hazards in the post-mortem room; and (3) certification, documentation, and the law in relation to human tissue and the dead. The written examination papers tested the candidates' knowledge in each of these three sections, with emphasis on the first, which was also the major subject of the oral part of the examinations. Now more than half of all full-time post-mortem room technicians in Scotland and England are qualified: 90 hold the Certificate and 139 hold the Diploma, 229 in all. Among those remaining unqualified are many part-time post-mortem room workers who have not yet had the advantage of revisory instruction to prepare them for the examinations for which, by their long experience, they are eligible to enter.

A survey of mortuary attendants in post, in hospitals of 200 beds and over, carried out in 1962/63, showed that one-third were due to retire within five years; and a later survey of all hospitals in England and Wales, in 1965, showed that approximately half of the number then in post would retire within five years that is, by 1970. Manifestly, it is necessary to

ensure the proper training of the considerable intake of new entrants to this branch of ancillary work, that is, in the training of the post-mortem room technicians of the future.

It is essential that the recruits to post-mortem room work should be of the right kind, and it is important that they have a suitable educational background because they are to rank with medical laboratory technicians, some of whose work they will learn and share. Eventually the post-mortem room technicians and the technicians of the histology division of the laboratory will be integrated and re-united (post-mortem room technique was formerly included in the training and examination subjects of medical laboratory technicians doing histology). It is expected that some of the candidates for post-mortem room work will be recruited from medical laboratory technicians and from discontinuing and/or qualified male nurses, as obtains in some areas already.

To secure the proper entrants it is a matter of first importance that there should be a career-grade salary scale equated to that of medical laboratory technicians and senior technicians. The Board of Education and Examination has already suggested five grades.³

In formulating a schedule of training for post-mortem room technicians the Board has considered all the circumstances currently obtaining and particularly the fact that hospital management committees would want to employ and arrange for the training of successors to retiring mortuary attendants for probably one to two years ahead of the retirement date. The scheme outlined is therefore for in-post training and covers a period of five years.

In general, while many hospitals will be suitable for the training of entrants to the level of the Certificate examination, *e.g.*, hospitals where between 200 and

¹The Secretary, The Royal Institute of Public Health and Hygiene, 28 Portland Place, London, W.1. (Tel. 01.580.2731.)

²Heggie, J. F. (1965). Certificate and diploma in mortuary hygiene and technology for post-mortem room technicians. *J. clin. Path.*, 18, 695.

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³Post-mortem room workers in the National Health Service are currently designated 'mortuary attendants' or 'mortuary keepers' and 'mortuary porters'. Duties at present include the handling of all bodies leaving the hospital and the checking with undertakers. The new grades of technician will be employed solely in the post-mortem room and in the laboratory. The dealings with undertakers and the handling of bodies will be done by hospital porters. The four grades suggested by the Board are as follows: (1) *Trainee grade*, and on gaining the Certificate of the Royal Institute, (2) *post-mortem room technician*, and on gaining the Diploma of the Institute, (3) *senior post-mortem room technician*, (4) *chief post-mortem room technician*, (5) *group chief post-mortem room technician*.

300 post-mortem examinations are carried out annually, a much smaller number of hospitals will be able to provide for the more advanced training requisite for the Diploma examination. The Board considers that the consultant morbid anatomist or consultant pathologist should be responsible for the training, with the assistance of his senior post-mortem room technician, and the Board will grant recognition to hospitals which are suitable for either or both forms of training.

The following is the five-year scheme of training drawn up and recommended by the Board of Education and Examination for Post-Mortem Room Technicians.

FIRST YEAR On appointment a trainee would be seconded to an area or district hospital pathologist (or morbid anatomist) for three months' introductory training and assessment of suitability at the end of the probationary period.

(a) In the preliminary training school for formal instruction in anatomy and physiology with the nurses in the block, commencing January, May, and September (eight weeks). Daily lectures to include elementary bacteriology, hygiene, and public health (two to three to four hours weekly).

(b) In the post-mortem room instruction in applied anatomy or practical anatomy, including opening and closing the body cavities and reconstruction. Instruments, use and maintenance; cleanliness, etc., in the post-mortem room; precautions against infection, injury, etc.; the taking of specimens—bacteriological, biochemical, histological, and museum.

(c) In the laboratory: instruction as for student technicians. Elementary instruction in bacteriology, biochemistry, histology, and mounting specimens.

(d) Tutorial sessions in the post-mortem room, twice monthly (half-day release). Remainder of year at own hospital.

SECOND YEAR With the area or district hospital pathologist or morbid anatomist for four to six weeks'

instruction in more advanced post-mortem procedures, including work in children and in forensic and neurological work (at special hospitals if necessary). Further experience and training in the laboratory. Tutorial sessions twice monthly. Remainder of year at own hospital.

THIRD YEAR Course of lecture-demonstrations covering the syllabus for the Certificate in Mortuary Hygiene and Technology of the Royal Institute of Public Health and Hygiene, the course to be held at a technical college or university centre or regional training centre. The course to cover winter and spring terms, once weekly for 20 weeks (minimum) with day release as necessary. Weekly tutorial sessions at a district hospital, leading to Certificate examination in April.

FOURTH OR SUBSEQUENT YEAR At selected and recognized hospital with consultant morbid anatomist for three months' training in advanced procedures, including those in children and in forensic and neurological work, either in special departments or hospitals in which all of this experience can be given. Tutorial sessions, twice monthly on half-day release, the remainder of year at own hospital.

FIFTH OR SUBSEQUENT YEAR Course of lecture-demonstrations covering the syllabus for the Diploma examination. Course held as above and also for the winter and spring terms, 20 weeks (minimum), and at more advanced level. Tutorial sessions, twice monthly (half-day release). Remainder of year at own hospital. Diploma examination in April.

From our experience of all the examinations and of the courses preparing candidates for these examinations we can point to the great advantage to all concerned of arrangements being made with a suitable technical college or university department. Pathologists can then concern themselves solely with teaching.

It is regretted that in the paper by J. M. Yong (*J. Clin. Path.*, 1967, 20, 647) no reference was made to the work of Professor A. L. Latner and his colleagues (Hodson, A. W., Latner, A. L., and Kaine, L. (1962). *Clin. chim. Acta*, 7, 255) on serum alkaline phosphatase using starch gel electrophoresis.

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