CHAPTER 125. LABORATORY SERVICES

CLINICAL AND ANATOMICAL PATHOLOGY SERVICES
AND BLOOD TRANSFUSIONS

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CLINICAL AND ANATOMICAL PATHOLOGY SERVICES AND
BLOOD TRANSFUSIONS

§ 125.1. Clinical and anatomical pathology services.
Clinical and anatomical pathology and consultation services shall be available to meet the needs of patients. Laboratory services shall be provided in compliance with the Clinical Laboratory Act (35 P.S. §§ 2151—2165) and all regulations promulgated pursuant thereto except §§ 5.91—5.94 (Reserved). The current permit shall be displayed.

§ 125.2. Blood transfusion.
The hospital shall be capable of providing blood transfusions to meet the needs of patients. Where there is a blood transfusion service, it shall be directed by a pathologist or physician qualified in immunohematology and knowledgeable about the principles of hemotherapy and blood banking. This service shall be provided in compliance with the Pennsylvania Blood Bank Act (35 P.S. §§ 6501—6523) and with Chapter 30 (relating to blood banks). The current license issued shall be displayed in accordance with section 12 of the act (35 P.S. § 6512).

NECROPSY SERVICES

§ 125.11. Facilities and services.
Each hospital shall make provisions for necropsy service either onsite or through effective agreements with other facilities capable for providing the ser-
vices. Each necropsy shall be performed by a pathologist or a physician who is qualified in anatomic pathology.


Each procedure and the record of it shall be sufficiently thorough and detailed to meet the needs of the medical staff. The gross and microscopic reports shall be made part of the completed medical record of the patient.

Authority

The provisions of this § 125.12 issued under 67 Pa.C.S. §§ 6101—6104; and Reorganization Plan No. 2 of 1973 (71 P.S. § 755-2).

Source


§ 125.13. Storage of the remains of deceased patients.

If the hospital does not have morgue services on the premises, provisions shall be made to retain a deceased patient no longer than necessary in a room which is not otherwise occupied and which is properly ventilated to the outdoors.


(a) The remains of a deceased patient shall not be removed to a morgue or storage area until a physician has conducted an examination, has pronounced death, and has authenticated the time and provisional diagnosis or final cause of death in the patient’s medical records.

(b) The remains of deceased patients shall be prepared for removal from clinical areas in accordance with hospital procedures. Terminal disinfection of the remains of persons who died of a reportable contagious disease shall be in accordance with the applicable instructions in § 27.60 (relating to disease control measures).

(c) Bodies of patients who have died of any reportable communicable disease specified in § 27.203 (relating to preparation for burial or transportation of deceased human bodies) shall bear appropriate warning labels.

(d) Radiological cadavers shall bear proper warning labels and be handled according to applicable standards of the Department of Environmental Protection and the United States Nuclear Regulatory Commission.

§ 125.15. Disposition of a deceased patient.

The remains of any deceased patient, including a fetal death, as defined in 35 P.S. § 450.105, or a neonatal death shall not be subjected to disposition until death has been officially pronounced by a physician.
Authority

The provisions of this § 125.15 issued under section 2102(g) of The Administrative Code of 1929 (71 P. S. § 532(g)); and section 803 of the Health Care Facilities Act (35 P. S. § 480.803).

Source

The provisions of this § 125.15 adopted December 3, 1982, effective December 4, 1982, 12 Pa.B. 4129. Immediately preceding text appears at serial page (52839).

§ 125.16. Personnel safety.

All areas where hospital personnel must work with dead bodies shall be properly ventilated. Plumbing, maintenance, and housekeeping should be planned to minimize health hazards both to personnel working in the areas and to other hospital personnel, patients, and visitors.

Source
