



The Role of the Forensic Pathologist

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Forensic pathologists

Forensic pathologists are independent practitioners who provide unbiased medico-legal opinions for police, lawyers and the courts. In England and Wales, forensic pathologists providing services to police forces are registered by The Home Office Pathology Delivery Board and used to be known as 'Home Office Pathologists'. The current designation is now 'A member of the Home Secretary's Register of Forensic Pathologists'.

Summary of service

Forensic pathologists perform medico-legal post mortem examinations on behalf of Coroners (in England, Wales and Northern Ireland) and Procurators Fiscal (in Scotland). They also provide a service to police authorities in cases of suspicious death. They frequently attend scenes of suspicious death and assist in the collection of forensic evidence at such scenes. They provide interpretation of their pathological findings to Coroners, Procurators Fiscal, the police and the criminal (and sometimes civil) justice system. Statements for court and presentation of evidence in court are frequently required in such cases.

Status

Many forensic pathologists are self-employed but some are employed, full or part time in the NHS or University settings. Their services to Coroners, Procurators Fiscal and police authorities are usually arranged by contracts for the pathological investigation of suspicious deaths within a specific geographical area.

Many forensic pathologists also provide post mortem services to Coroners and Procurators Fiscal for non-suspicious sudden deaths and a small number additionally provide post mortem services to the NHS for cases in which the cause of death is known, but where there is clinical interest in the pathological effects of a disease or treatment regime in that case, often referred to as 'consent' or 'hospital' post mortem examinations.

Groups

All forensic pathologists registered with the Home Secretary must work within 'group practices' comprising at least three forensic pathologists who jointly provide post mortem services within a defined geographical region. Group practices provide a forensic post mortem service 24 hours a day/365 days a year for their region. Most group practices utilise a specific mortuary

which will have the facilities necessary for conducting a modern forensic post mortem examination. In some regions pathologists still perform post mortem investigations in a wide variety of local authority mortuaries ('public mortuaries') and in hospital mortuaries. The hours worked, and the number of cases seen within those hours, varies throughout the country and from day to day. Case workloads are monitored by the Home Office to ensure that quality standards are maintained and the integrity of the criminal justice system is not compromised.

Training and higher qualifications

Forensic pathologists are medically qualified doctors, registered by the General Medical Council (GMC) with a licence to practise medicine, who undertake post-graduate training in histopathology – the study of the effects of disease on the body – and who then undertake 'sub-specialty' training in forensic pathology.

Following completion of the 2-year Foundation programme that all newly qualified doctors in the UK follow, application is made to join the Histopathology training scheme. Entry into this scheme is coordinated for the UK by the London Deanery, and histopathology training is delivered by training schools and post-graduate deaneries (histopathologytraining.org/applications/). On entry to a histopathology training programme, progression is determined by the Annual Review of Competence Progression (ARCP) process and successful completion of the Royal College of Pathologists' (RCPath) examinations (www.rcpath.org/trainees/training/recruitment-into-pathology.html).

Histopathology trainees must pass an introductory exam after 'Stage A' (a minimum of 12 months), and then the Part 1 College examination (after a minimum of 12 months at 'Stage B'). The aspiring forensic pathologist may then apply to enter 'sub-specialty' training in forensic pathology directly and, after a minimum of 2 years at 'Stage C', sits the Part 2 examination, qualifying as FRCPath (in forensic pathology).

A final 6 – 12 months months at 'Stage D' prepares the trainee for independent practice as a consultant. Trainees usually spend about 3 ½ years in stages C and D.

Alternatively, trainees who pass the FRCPath Part 2 examination in histopathology, neuropathology, or paediatric pathology, and undertake a further two years training in forensic pathology, are eligible to take the RCPath Diploma in Forensic Pathology (or the Diploma of Medical Jurisprudence of the Society of Apothecaries).



When all training is completed, and for those wishing to practise in England and Wales, an application must be made to join 'The Register' held by the Home Secretary.

Training in histopathology provides the forensic pathologist with the necessary skills to identify pathological abnormalities both at 'naked eye' examination and under the microscope and to perform post mortem examinations. The sub-specialty training in forensic pathology provides the necessary skills to identify and interpret pathological signs of injury, to determine the cause of death and to manage and investigate the pathological aspects of a crime scene. Training in the forensic aspects of neuropathology and paediatric pathology is an essential component of the forensic pathology training programme.

Associations and societies

The RCPATH aims to set standards, promote research and develop programmes of continuing professional development for all pathologists, including forensic pathologists. In addition the British Association in Forensic Pathology (www.bafm.org) organises educational meetings for, and represents the professional interests of, forensic pathologists.

The Faculty of Forensic & Legal Medicine, established by the Royal College of Physicians, provides a similar role to the RCPATH for all forensic medical practitioners (including forensic pathologists).

Several other societies and associations also support the interface between medicine and the law (e.g. the Clinical Forensic and Legal Medicine Section of the Royal Society of Medicine, the various Medico-Legal Societies around the country, the British Association of Forensic Sciences, the Forensic Science Society and the Forensic and Secure Environments committee of the British Medical Association, etc.).

Facilities

Forensic pathologists utilise modern mortuary and laboratory facilities, which must be licensed by the Human Tissue Authority (HTA), to perform their post mortems and microscopic examinations. Such facilities increasingly incorporate operating microscopy facilities and equipment designed to facilitate the collection of 'trace evidence' from bodies, such as 'alternative light source generators'. Fluoroscopy and even CT scanning may be available in the mortuary suite

Forensic pathologists also examine bodies at the scene of suspicious deaths and work with crime scene investigators to ensure that evidence of forensic interest is collected appropriately from, and around, the body without compromising the integrity of such potential evidence.

An independent means of transport is an essential requirement as are facilities for easy and rapid contact

(mobile telephone etc.). Post mortem reports and statements are typed and are subject to internal group practice review and national audit.

Secure storage facilities for medical records, witness statements and police reports, scene and post mortem photographs and exhibits – such as weapons seized at crime scenes etc. – must be available.

Specific functions

Examination of bodies at scenes of suspicious deaths:

When a forensic pathologist is requested by police authorities to attend the scene of a suspicious death, s/he is 'briefed' as to the circumstances of the case by the Senior Investigating Officer (SIO), or their representative. A strategy for approaching the body, the collection of trace evidence from, and around, the body and ultimately the recovery of the body from the scene, is agreed with crime scene investigators, forensic scientists and the SIO. The forensic pathologist examines the body, noting its disposition, the surroundings in which the body lies and the presence of injuries that can be seen without disturbing the body or the scene. Many pathologists supervise recovery of the body by crime scene investigators and funeral directors.

Post mortem examinations:

Careful examination of the body requires modern mortuary facilities and involves team-working with forensic scientists, crime scene investigators and photographers. Each examination is directed towards answering the general and specific questions that are likely to arise in the context of that individual case. The forensic pathologists are often assisted in their interpretation of the pathological findings when they have either been to, or have viewed videos or photographs of, the scene at which the body was discovered.

The external examination of the body is of immense significance in a suspicious death post mortem examination and may itself take several hours if there are multiple injuries. Each stage of the examination is documented, both by notes taken by the pathologist and by photographs. All significant findings, both positive and negative, are recorded. Every organ and body cavity is examined in detail and samples are taken of organs and injuries for microscopy and samples of body fluids are retained for toxicology.

Forensic pathologists interpret their pathological findings in light of the known circumstances of the case, the scene findings and the results of additional investigations by others, (e.g. toxicology, entomology and the results of forensic scientific examination of weapons and clothing).



Interpretation of wounds and injuries in cases of assault:

From time to time forensic pathologists may be asked to provide their opinion on the nature of wounds and injuries on living individuals utilising their skills in the interpretation of wound and injury causation. Such opinion may be provided to the lawyers acting for the defendant as well as the Police or Crown Prosecution Service.

Reviewing post mortem examination findings for defence solicitors, families etc.:

Forensic pathologists may be asked to review the post mortem findings of another forensic pathologist by lawyers acting for a defendant or by the Coroner when no-one has been charged with an offence. Following guidance from the Chief Coroner for England and Wales, physical 'second post mortem examinations' are gradually being replaced by a 'desk top review' of photographs and reports.

This service may occasionally be performed on behalf of the family of the deceased. The decision to request a review of the first post mortem examination findings allows the pathological facts of the case – for example the number, size, site and type of injuries – to be agreed which will facilitate the release and disposal of the body by the family. The interpretation of pathological findings at physical second post mortem examinations may be difficult and requires the reviewing pathologist to consider their own findings in the light of those findings documented by the first pathologist at the original post mortem examination.

Provision of expert evidence to the criminal justice system:

Forensic pathologists provide reports of their findings in a manner suitable for use by the criminal justice system. This requires careful use of language so that the pathological findings are presented in such a way as to be easily understandable to a lay 'audience', without compromising the precision of the meaning of those findings. The forensic pathologist provides her/his opinion on the post mortem findings and attempts to address the questions that may be raised by the death; these may include the manner in which injuries were inflicted, when they were inflicted and the cause of death. In a proportion of cases, the forensic pathologist will attend court which may be the Coroners Court or the Crown Court, to give oral evidence regarding his findings at post mortem examination.