Disposal of Pregnancy Loss Tissue Samples

In March 2015, the Human Tissue Authority (HTA) issued ‘Guidance on the disposal of pregnancy remains following pregnancy loss or termination’. Along with the Royal College of Nursing’s ‘Sensitive disposal of all fetal remains’ and the Royal College of Obstetricians and Gynaecologists ‘Good Practice No.5 Disposal following pregnancy loss before 24 weeks of gestation’ guidance has been provided such that a patient now has up to 12 weeks to decide how they would like to dispose of any pregnancy loss tissue i.e. burial or cremation as part of a sensitive disposal policy arranged with the help of the referring hospital, or by incineration.

Currently, the North Thames Regional Genetics Service’s policy for disposal of fetal tissue is as follows:

1. If a request is made for a pregnancy loss tissue to be returned, we will return the sample as soon as possible after testing is complete to the originating hospital. Typically, the sample and genetic request form will be accompanied with a copy of the consent form that the parent has signed indicating that this is their preference.
2. If fetal parts are present in the pregnancy loss tissue, these tissues are automatically returned as soon after testing is complete to the originating hospital for dignified disposal (for Eire patients, you will need to arrange couriers).
3. If neither of the first two options applies, the laboratory retains any remaining tissue (usually placenta and cord) for a period of twelve weeks from the date of receipt of the tissue at the laboratory in order to comply with the period allowed for patients to make any disposal requests. After this time, the laboratory sends the tissue for sensitive incineration at the Augean Incinerator in Kent.

Samples are usually returned to the mortuary of the referring hospital using Royal Mail recorded delivery.

Disposal of Pregnancy Loss Tissue via the Augean Incinerator, Kent

It is important that patients are aware that there is no separate burning of fetal material at the Augean Incinerator and there will be no separate ashes afterwards. The incinerator is never stopped unless a dangerous imbalance of gases is detected or maintenance has to occur, and so separate disposal cannot be arranged. If a patient would like their remains to be disposed of separately, they should be guided to opt for a cremation ceremony.

Evidence of Sensitive Incineration

Since the introduction of this change, the laboratory has been keeping detailed records of all pregnancy loss tissues sent for incineration. A ‘red route’ system has been established so that all pregnancy loss tissue is collected in a single container and that this is transported separate from other waste to Augean. Completed (signed and dated) ‘Handover sheet for Disposal of Anatomical Waste’ forms and once the incineration has been completed (signed and dated) ‘Certificate of Destruction’ forms allow tracking of each sample e.g. when it was sent for incineration and the date the incinerated, should that information be required.

We believe that our system meets the current disposal criteria for pregnancy loss tissues. Please note that any request for the return of a pregnancy loss sample during the 12-week period for e.g. cremation/dignified disposal must be accompanied by a patient signed disposal consent form.

I hope you find this letter reassuring. If you have any questions regarding our policy for disposal of tissues, please contact the laboratory.