



Stellenbosch

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BODY DONATION PROGRAM

Motui Prosmus Vitae
"even in death do we serve life"

Reference number _____/_____

K _____/_____

Division of Clinical Anatomy
STELLENBOSCH UNIVERSITY

General information about the body donor program of the Division of Clinical Anatomy

Body donations resort under The National Health Act 61 of 2003. Donated bodies are dedicated to scientific research and medical training. Medical training programmes include Health Sciences, Allied Health Sciences, and postgraduate training of medical specialists. Staff and students at the medical school are indebted to persons who bequeath their bodies for anatomical study. Donated bodies are treated with the utmost respect and will remain anonymous.

All research to be conducted on donated bodies requires approval by the Human Research Ethics Committee (HREC) at Stellenbosch University to ensure that the use of the remains adheres to legal and ethical requirements.

1. Eligibility to be a body donor

1.1. The Division of Clinical Anatomy is bounded by the National Health Act 61 of 2003 in the acceptance of human material. This means that although the donor's body has been bequeathed to the Division of Clinical Anatomy, certain criteria apply for acceptance of body donation:

1.1.1. Donor must be older than 16-years of age.

1.1.2. Donor does not exceed a weight of 130kg.

1.1.3. Donor did not contract a severe infectious disease at time of death (including smallpox, typhoid fever, amoebic dysentery, syphilis, hepatitis, Congo fever, meningitis, anthrax, or cholera).

1.2. The following donors will be accepted:

1.2.1. HIV/AIDS positive donors.

1.2.2. Donors who have undergone post-mortem examination.

1.2.3. Donors who are also registered into the Organ Donation Programme.

1.3. The Division of Clinical Anatomy will inspect the body of a deceased donor to determine whether the body is suitable for medical education, and/or research. If the body is deemed unsuitable for medical education and research, the family will be informed so that they can proceed with burial procedures.

2. What is the application process?

2.1 If you desire to donate your body to the Division of Clinical Anatomy, Faculty of Medicine and Health Sciences, Stellenbosch University (SU) for research or anatomical teaching purposes, please submit the following documents (either via email or per post) to pre-register as a body donor:

2.1.1. Donation form.

2.1.2. Copy of your ID document or card (both sides).

2.1.3. Copy of one witness ID document or card (both sides).

2.1.4. Request for return of ashes.

2.2. Your application will be processed, and a reference number will be sent to you. Should you not receive confirmation from Clinical Anatomy within seven working days, please contact the division (see contact details).

3. What is a third-party donation?

3.1.1 Should the donor not complete the documentation before passing, their next-of-kin may do so on their behalf.

3.1.2. Please submit the following documents (either via email or per post):

3.1.3. Third party donation form.

3.1.4. Copy of donor ID document or card (both sides).

3.1.5. Copy of one witness ID document or card (both sides).

3.1.6. Request for return of ashes (if requested).

See the instructions on page 9 upon the death of a body donor or 3rd party donation.

4. The transportation of the donor to the Division of Clinical Anatomy (SU):

The next of kin of the donor is responsible for all costs incurred from the undertaker like storage, administration, and transport of the body.

5. What happens to the body of the donor after the body has been used?

The body is cremated by the Division of Clinical Anatomy (SU).

5.1. Depending on the wishes of the donor, ashes can be retained after cremation. In this case, it is required that the request form be completed along with the donation form. The body will be cremated within a period of two (2) years. The Division of Clinical Anatomy will attempt to return the ashes to the requested donors families as soon as possible.

5.2. The Division of Clinical Anatomy will only retain the ashes of the donor for a maximum of 5-years and will dispose of the ashes thereafter. It is the responsibility of the selected family member or friend of the donor to ensure that they collect the ashes from the Division of Clinical Anatomy within 5-years from the date of cremation. It is also the responsibility of the selected family member/friend to ensure that they make the staff of The Division of Clinical Anatomy aware of any change of contact details prior to, or within this 5-year period. The family member/friend will be informed when the ashes are available.

6. Thanksgiving ceremony

A thanksgiving service to honour the donors will be held annually by the Division of Clinical Anatomy. Family members will be notified and are welcome to attend. The next-of-kin is responsible for keeping their contact details updated to make communication possible. Complete the appropriate notice (page 6).

DONATION OF HUMAN BODY TO THE DIVISION OF CLINICAL ANATOMY AT STELLENBOSCH UNIVERSITY

(In accordance with the National Health Act 61 of 2003)

A. Donor information

Prof/Dr/Mr/Mrs/Miss/Ms: _____

Full name/s: _____

Date of Birth: ____/____/____ Sex: _____

ID or Passport number: _____

Marital Status: Single / Married / Divorced / Widow / Widower

Occupation: _____

Residential address: _____

Postal code: _____

Mobile number: _____ Landline number: _____

Email address: _____

- I wish to be listed as a body donor, in accordance with the National Health Act 61 of 2003, to the Division of Clinical Anatomy, Faculty of Medicine and Health Sciences, Stellenbosch University.
- I understand that my body will be cremated after a period of 18 - 24 months. The ashes may be retained by the family (Complete section C).
- I have discussed this with my next-of-kin and to the best of my knowledge they have no objection to this bequest.

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I consent to the following:

I am donating my body to the Division of Clinical Anatomy for the following educational and/or research activities:

1. Anatomical education and dissection for medical and health sciences.
2. Research studies (Anatomy, Histology, Anthropology etc.) and purposes covered by ethical permission from HREC.
3. Digital photographic images of my body may be anonymously presented in student theses and journal publications.
4. Digital photographic images of my body may be placed anonymously in an electronic repository for research purposes.
5. My body or parts of my body may be used for 3D printing and used for medical and/or teaching purposes.
6. My demographic data (age, sex, weight etc.) and biological data may be used.
7. I understand that no data or images of my body will be posted on any form of social media.
8. I consent to my remains being transferred to another teaching institution in South Africa for teaching activities if necessary and relocated back to the Division of Clinical Anatomy.

Signed at: _____

Date: ____/____/____

Witness (full name): _____

Signature: _____

B.Third party donation (if applicable)

The donor's immediate next-of-kin (the spouse, partner, child, parent, guardian, brother, or sister of the deceased) may, after the person's death, donate the body to the Division of Clinical Anatomy, Stellenbosch University. The immediate next-of-kin may complete and sign this form on behalf of the deceased.

Details of the next-of-kin donating the body.

Prof/Dr/Mr/Mrs/Miss/Ms _____

Full name: _____

Relationship to the deceased: _____

Address: _____

Postal code: _____

Mobile number: _____ Landline number: _____

Email address: _____

Signature: _____

C.Collecting the ashes of the deceased and Thanksgiving ceremony (if applicable)

If the family wishes to collect the ashes of the deceased, it is very important that the contact details are correct for the nominated person.

The ashes will be kept in the Division of Clinical Anatomy for a period of up to 5 years after the cremation.

Contact details:

Prof/Dr/Mr/Mrs/Miss/Ms _____

Full name: _____

Relationship to the deceased: _____

Mobile number: _____ Landline number: _____

Email address: _____

Thanksgiving ceremony

Please check/mark this box if the family would like to be contacted to be part of the thanksgiving ceremony.

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D. Medical history of the donor (mark with a X):

Please tell us about your medical history:

Have you been diagnosed with any of the following:

	Yes	No
1. Tuberculosis		
2. Pneumonia		
3. Diabetes		
4. Any type of cancer:		
5. Covid		
6. Hepatitis		
Other		

Have you had any of the following surgical procedures:

	Yes	No
1. Shoulder / arm		
2. Hip		
3. Leg / Knee		
4. Hand		
5. Foot		
6. Neck		
7. Back		
8. Uterus / Hysterectomy		
9. Liver and/or Gallbladder		
10. Kidney / Bladder / Prostate		
11. Heart / Lung		
12. Hernia (where)		
Other		

Thank You!

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E. For office use only

a. Signature: _____

b. Date: ____/____/____

F. Documentation received.

	Yes	Date Received
a. Donation form		
b. ID document		
c. DHA-14 A (Burial Order)		
d. DHA-1663 Pages 1-3		
e. 3rd Party Donation (if applicable)		
f. Death Certificate		
g. Other		

G. Ashes received from crematorium

Signature: _____

Date: ____/____/____

H. Ashes received by relatives

Signature: _____

Date: ____/____/____

I. Remarks

Important instructions upon the death of the donor

**IF ...the deceased is a registered donor with the Division of Clinical Anatomy
or
it were the decease's wish / family is donating (3rd party donation)**

Who to contact?

Death at health care facility (Hospital)

1. Inform the Division of Clinical Anatomy. Contact details provided below.
2. Contact an undertaker/funeral home.
They will register the death and transport the donor to the Division of Clinical Anatomy.

Should the death occur at home

1. Contact the Ambulance services: (10177)
2. Contact the Police services: (10111)
3. Inform the Division of Clinical Anatomy. Contact details provided below.
4. Contact an undertaker/funeral home.
They will register the death and transport the donor to the Division of Clinical Anatomy.

Contact details:

Office Number: 021 938 9429

Mr Logan Williams/Body Donations Coordinator

Standby 24/7 Cell: 071 886 1195

E mail: su_bodydonations@sun.ac.za

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