HOW TO EXAMINE A HEART GROSSLY AT AUTOPSY

*Starting from the complete tongue/larynx/airway/heart & lungs single block*

1. Examine upper airway for pharyngo-laryngo-tracheal blockage
2. Hyoid bone intact?
3. Open the pericardium
4. Open the pulmonary artery main trunk - ?thrombus
5. Cut the anterior 2 pulmonary veins and IVC with scissors
6. Dissect off the heart at its base with a knife
7. Open both atria; check for PFO and thrombi
8. Water-test/inspect the AV & MV for stenosis/incompetence & mitral valve prolapse (which is independent of MV regurgitation)
9. Cut the right margin of the aorta down to the AV
10. Probe the two CA ostia – and then RCA, LAD, LDA and LCA
11. Cross-cut the CAs with a new sharp scalpel blade ( + scissors if calcified). Do not confuse coronary dissection with thrombosis
12. Slice ventricles horizontally up to the papillary muscles
13. Open the RV/PV/PA outlet
14. Open the RA/TV/RV lateral margin
15. Open the lateral LV into the LA upwards, between the cusps of the MV
16. Open the upper anterior LV upwards and into the AV, cutting to the anatomical left of the LAD CA
17. Check/measure the 4 valves and the RV & LV muscle
18. Cut vertically through the left/middle of the posterior mitral valve cusp with associated atrium and left ventricle: check for mitral annulus disjunction (MAD).

Optional extra

1. Cut out a 2.5cm square block medial to the RA coronary vein sinus, including RA, TV and upper RV, to locate the AVN on histology

SB Lucas Sept 2020; Revised Jan 2022