

Form 29  
QUEENSLAND  
**CORONERS ACT 2003**  
(Section 24A(2))  
**AUTOPSY NOTICE**

Please print clearly, using BLOCK letters

Office Use Only
Date Rec: _____
District Code: _____
Registration No: _____

TO: The Registrar-General, Brisbane

On \_\_\_\_ / \_\_\_\_ / \_\_\_\_ by order of: \_\_\_\_\_ Coroner,  
(name of Coroner making order)

an autopsy was conducted by me (or by Dr.: \_\_\_\_\_, who is  
unable to complete the notice) on the body of a Male  Female  aged \_\_\_\_\_  
date of birth (if known) \_\_\_\_ / \_\_\_\_ / \_\_\_\_ named: \_\_\_\_\_  
who is stated to have died at: \_\_\_\_\_ (if known)  
and in my opinion the date of death was: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

I am waiting the results of further tests or additional information to help me determine the cause of death.

Signature: \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Initials and Surname : \_\_\_\_\_

Professional qualification(s) \_\_\_\_\_

Address : \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

**Notes for doctors who complete this form**

1. This Notice is to be completed if the Doctor can not issue an Autopsy Certificate because he/she is waiting for the results of further tests or additional information to help determine the cause of death.
2. The Notice must be sent to the Registrar-General as soon as practicable after the autopsy is completed.
3. Once the results of the tests are known or the information is received, an Autopsy Certificate (Form 30) must also be completed and sent to:

The Registrar-General  
Registry of Births, Deaths and Marriages  
PO Box 188  
Brisbane Albert Street QLD 4002