New York Chiropractic College
Anatomical Gift Program
BODY DONATION INFORMATION
NEW YORK CHIROPRACTIC COLLEGE

GENERAL INFORMATION

Anatomical dissection plays an important role in modern health care education and research. New York Chiropractic College accepts body donations from those persons who desire to leave their bodies to natural healthcare science education and research.

WHO CAN MAKE AN ANATOMICAL GIFT?

An anatomical gift of the donor’s body upon death, can be made by a donor 18 years of age or older and of sound mind. To make a donation, the donor must complete and sign a written statement of the intent to make the anatomical gift. After death, the next-of-kin also can donate the decedent’s body as an anatomical gift.

HOW DO I REGISTER TO MAKE AN ANATOMICAL GIFT?

New York Chiropractic College has established a system for documenting the intent to make an anatomical gift upon death. You may obtain donor forms by writing or calling the New York Chiropractic College Anatomy Center at (315) 568-3240.

Any adult who wishes to donate his or her body to our Anatomical Gift program may do so by signing an Anatomical Gift Authorization in the presence of two responsible witnesses and sending the completed authorization to the Anatomy Center, New York Chiropractic College. Each witness must be 18 years of age or older, and may be family members, friends or co-workers. Notarization is not required. An Anatomical Gift Authorization and attached Personal Data Form must be completed. The vital statistics information required on the form is necessary for completion of the death certificate which is required by the State of New York.

The Anatomical Gift Authorization is not a contract. It is a document that declares your wish to be a body donor at New York Chiropractic College. This form indicates your preference, and is not a binding contract.

Please keep documentation of the signed Anatomical Gift Authorization in your billfold or purse, sign or make at least three copies of the Authorization. You should keep an original in your files, send one to us at the address shown below, and give the other to your family members or other responsible parties.

Mail a copy of the completed authorization form to us at:

Michael P. Zumpano, Ph.D., D.C.
Director, Anatomical Gift Program
Department of Basic Sciences
New York Chiropractic College
2360 State Route 89
Seneca Falls, NY 13148-0800
MAY I DONATE THE BODY OF A FAMILY MEMBER?

Yes. Following death, New York State law allows the next-of-kin, or other authorized persons if there is no available next-of-kin, to make an anatomical gift. If the next-of-kin wishes to assist with a donation on behalf of a dying or recently deceased relative, he or she may call the Anatomy Center for information.

SHOULD RELATIVES BE INFORMED OF MY DONATION?

Yes. It is a very good idea to inform your next-of-kin of your wishes. New York Chiropractic College will not accept your donated body if your nearest living relative objects after death occurs. You are, therefore, encouraged to make your donation known to your family, close friends, minister and attorney. *If you have a will, you should include a statement regarding the donation in your will.*

MAY I WITHDRAW AT ANY TIME?

Yes. Please notify us in writing that you wish to withdraw from the program.

SHOULD I CONSIDER ALTERNATIVE ARRANGEMENTS?

Yes. You should discuss alternative plans with your family. As described on page 8, it is possible the College will not be able to accept your gift of body at the time of death, and alternative arrangements may be required.
WHAT ARE THE FINANCIAL CONSIDERATIONS?

Upon acceptance of a body donation, New York Chiropractic College will be financially responsible for the following:

- Removal of body from a hospital or nursing home in Seneca County;
- Transportation of the body to New York Chiropractic College or to our agent from within Seneca County, provided death does not occur at home;
- Permits for transportation and cremation;
- Cremation.

New York Chiropractic College is not responsible for funerals, memorial services, obituaries, or any other services not specifically mentioned above.

The cost of providing our services is a factor that limits the number of body donations we can accept each year. Monetary contributions to the Anatomical Gift Program are gratefully accepted and allow us to make our services available to a greater number of donors.

WHERE SHOULD MY FAMILY CALL AT THE TIME OF DEATH?

Please call the office of the Anatomical Gift Program at (315) 568-3240.

WHAT IS THE PROCEDURE OF DONATION AFTER DEATH?

We should be notified immediately after the time of death. We will ask a few questions about the cause of death and about the condition of the body. If we accept the donation, we will make the arrangements to remove and transport the body at no cost. If your family calls a funeral director before calling us, they may incur expenses for which we will not pay.

If death occurs at a local hospital or nursing home in Seneca County, our agent will transport the body to New York Chiropractic College at no cost. If your local funeral director transports the body, your family or estate must pay all costs.

WHAT IF DEATH DOES NOT OCCUR IN A HOSPITAL OR NURSING HOME?

We cannot transport a body until the death certificate is signed by a physician. When death occurs at home, there is often a delay in obtaining the death certification. Under these circumstances it may be necessary to hire a local funeral director to hold the body until we can transport it. We are not responsible for this expense.

At the time of death, a physician makes a pronouncement of death and signs the required death certificate, certifying the time and cause of death. After the physician signs and completes the medical portion of the death certificate, New York Chiropractic College should be notified.
If death occurs at home, your family should arrange for your body to be transported by your local funeral director to New York Chiropractic College. The cost of transportation is the responsibility of the estate or family. We require a photocopy of the certified death certificate and an original Burial/Transit permit. We prefer to obtain the body as soon after death as possible, without prior embalming. Commercially embalmed bodies can present potential exposure risks for personnel and students, and result in deterioration of the body’s tissues.

WHAT HAPPENS IF DEATH OCCURS OUTSIDE SENeca COUNTY OR NEW YORK STATE?

Your donation will always be welcome here, but the expense of returning your body to New York Chiropractic College will have to be paid for by your survivors or your estate.

If death occurs outside Seneca County, the funeral director in attendance files the death certificate in the county where the death occurs. The registrar then issues the equivalent of a Burial/Transit Cremation Permit which authorizes the removal and final disposition. Copies of death certificates may be obtained (for a nominal fee) from the Bureau of Vital Statistics in the county where death occurred. A photocopy of the certified original death certificate and an original Burial/Transit Permit must accompany the deceased to our institution. It is the responsibility of your funeral director to deliver these to New York Chiropractic College’s funeral director. Your family or estate must pay all expenses occurred in removal and transportation.

If death occurs while on vacation or at a distant location, contact the nearest chiropractic or medical school. Final acceptance by another school is contingent upon their policy regarding bequeathals and donations.

If you move outside the state, you should consider revoking your donation here and making a new donation to an institution nearer your new home. Similar programs exist throughout the United States and Canada.

DO I NEED A CASKET?

No. A casket is not required for transportation if death occurs in or near Seneca County. If transportation is by common carrier from a distant location, then all regulations for proper containment must be met. All arrangements for transportation and all expenses incurred are the responsibility of your survivors or estate.

ARE THERE ANY ADDITIONAL FAMILY RESPONSIBILITIES?

Yes. Arrangements for funeral services or memorial services, death notices and notification of death to the Social Security Administration, Veterans Administration, Railroad Retirement Board, or any private pension fund are the family’s responsibility.
WILL PAYMENT BE MADE FOR THE USE OF THE BODY?

No. The laws of New York State and all other states prohibit the giving of anything of value in return for a bequeathal or donation of organs or bodies. This means that no cash payment can be made to a donor or to survivors.

WHAT IS THE FINAL DISPOSITION OF THE DONATED BODY?

Our studies may take up to two years or more to complete. All bodies are cremated at the completion of our studies. In accordance with the donor’s wishes (as noted on the Anatomical Gift Authorization Form), we will return the ashes to the next-of-kin or to NYCC, and the next-of-kin assumes responsibility for the ashes and any burial costs. If preferred, NYCC will respectfully inter the ashes (at our expense).

It is the policy of New York Chiropractic College to accept changes regarding disposition of the ashes by the survivors if the request is made within two weeks following your death. Any request for change of disposition regarding ashes by your survivors must be made in writing to us. Therefore, we cannot honor any telephone requests concerning this issue.

On occasion, a body has a pacemaker, artificial limb or joint, dental reconstruction or other prosthesis. These items cannot be cremated and are removed from the body. Any of these items will be returned, upon request, to the next-of-kin after our studies are completed. The request should be made shortly after the time of death, before we begin our studies.

Small samples of tissue, equivalent to a medical biopsy, may be held indefinitely for research purposes.

MAY A DONATION BE CHANGED OR REVOKED?

Yes. You may, at any time, change your mind and revise or revoke your donation. Completing a donation form does not, in any way, comprise a contract. It is only a pronouncement of your wishes and intentions. Your donation form will be returned to you at any time, should you wish to revoke your donation.

In addition, should you marry, remarry, or change your surname or address, you are requested to let us know in writing of this fact. We will note the appropriate change, and send you new donation forms to update our current records.

CAN MY FAMILY HAVE A FUNERAL OR MEMORIAL SERVICE?

A funeral service is a service held in the presence of a body. A memorial service is one held after the body has been removed. Both are intended to serve the emotional needs of the survivors. New York Chiropractic College prefers to receive the body immediately after death, without embalming. However, if you wish to hold a funeral service, your funeral director should telephone 315-568-3240 for embalming instructions. The estate is responsible for all costs and services rendered by the funeral home.

Once a body has been received by New York Chiropractic College, or by New York Chiropractic College’s funeral director, there can be no viewing.
WILL MY FAMILY RECEIVE AN AUTOPSY REPORT?

We do not perform autopsies. An autopsy is a procedure to study disease, but our studies usually involve normal anatomic structures. When part of a body is diseased, we will usually avoid that part of the body in our studies.

DOES THE COLLEGE ACCEPT GIFTS IN MEMORIAM?

We welcome monetary contributions made in the memory of our donors. Your gift will be used to support the scientific and educational missions of the Anatomy Center. New York Chiropractic College is a not-for-profit educational institution, and your contribution may be tax deductible.

FOR FURTHER INFORMATION OR TO REQUEST REGISTRATION FORMS, PLEASE CONTACT:

Michael P. Zumpano, Ph.D., D.C.
Director, Anatomical Gift Program
Department of Basic Sciences
New York Chiropractic College
2360 State Route 89
Seneca Falls, NY 13148-0800

Phone: (315) 568-3240
Fax: (315) 568-3017
E-mail: mzumpano@nycc.edu
BODY DONATION INSTRUCTION SHEET
NEW YORK CHIROPTACTIC COLLEGE

1. Upon receipt of your completed forms we will send you a letter notifying you of your acceptance in the Anatomical Gift Program. Inform family, close friends, attorney and physician of your wishes; be sure they are familiar with the list of instructions, especially items 2 and 3. Upon entering a hospital, request a copy of your agreement form be attached to your medical chart.

WHAT TO DO WHEN DEATH OCCURS

2. When death occurs, the Anatomical Gift Program office at New York Chiropractic College must be notified. This office will arrange to have the deceased transported to the New York Chiropractic College. When our representative arrives, he will contact the physician or county coroner’s office if necessary. The New York Chiropractic College telephone number is (315) 568-3240. When you call this number you will be given our funeral director’s phone number to call. Please be sure to inform the funeral director that this is a donation for New York Chiropractic College. If the donor has registered with an Organ and Tissue Bank, that office should be contacted first. It is available 24 hours a day.

NOTICE

3. New York Chiropractic College reserves the right to refuse acceptance of a registered donor’s remains for reasons including, but not limited to:

- Delivery of remains later than 24 hours after death;
- Diagnosis of hepatitis, HIV, tuberculosis, and other infectious diseases;
- Weight: Men over 250 lbs.; Women over 225 lbs.;
- Condition of the remains due to organ donation, autopsy, trauma or other accidental injury that precludes or excessively limits use by New York Chiropractic College;
- Suspicion of homicide, suicide, or manslaughter, or other circumstances in which investigations by law enforcement is anticipated;
- Lack of capacity to accept the remains;
- Embalmed bodies. Donations must be not be embalmed in order to be properly prepared.

TRANSPORTATION

There is no charge for transportation of the remains from a hospital or nursing home within Seneca County. For those who live outside the area, we recommend that a local funeral director be consulted about temporarily holding death certificate and transportation fees. The College may impose a fee, payable by the next of kin or the estate, for transportation of remains outside of Seneca County, or you may arrange transportation with your funeral director. The transportation for bodies outside counties adjacent to Seneca County is a flat rate of $125.

When legal matters are involved, as in homicide, suicide, or manslaughter cases, it is often impossible for the body to be released by the medical examiner in time to be used by the College. As described above, other circumstances may preclude use. Therefore, the College strongly recommends that alternate arrangements be made in case the donation cannot be accepted.
ANATOMICAL GIFT AUTHORIZATION
NEW YORK CHIROPRACTIC COLLEGE

It is my wish to donate my body to the Anatomical Gift Program at New York Chiropractic College (NYCC), immediately following my death, for teaching purposes, or such purposes as the College or its authorized representative shall in their sole discretion deem advisable. It is further understood and agreed that final disposition of my body by NYCC shall be in accordance with the State Code.

DATE_______________________

PRINTED NAME OF DONOR ____________________________________________________

SIGNATURE OF DONOR________________________________________________________

PHONE NUMBER_______________ ADDRESS________________________________________

CITY, STATE & ZIP CODE_______________________________________________________

Return ashes to my survivors _____ (initial).

NYCC will be responsible for the disposition of ashes _____ (initial).

We, the witnesses named below, hereby attest that we have witnessed the donor sign this authorization, and that we are signing our names in the presence of the Donor:

DATE_______________________

PRINTED NAME OF FIRST WITNESS_____________________________________________

SIGNATURE OF WITNESS ______________________________________________________

PHONE NUMBER ______________ ADDRESS_____________________________________

CITY, STATE & ZIP CODE _______________________________________________________

DATE_______________________

PRINTED NAME OF SECOND WITNESS __________________________________________

SIGNATURE OF WITNESS ______________________________________________________

PHONE NUMBER _____________ ADDRESS_______________________________________

CITY, STATE & ZIP CODE _______________________________________________________
PERSONAL DATA FORM

A. Presentation of the information requested in Section A is mandatory before you can be enrolled in the Anatomical Gift Program at New York Chiropractic College.

Name of Donor    First______________  Middle __________Last ____________________

Ethnic Origin (choose 1) ___Hispanic or Latino  ___Not Hispanic or Latino

Sex_____________

City & State of Birth____________________________________  Birthdate___/___/_____

Served in Armed Forces? ___________________  (Specify Years) ____________________

Occupation ________________________________________________________________

U.S. Citizen ___________________  Marital Status ____________________

Years of Education ______________  What County_____________________

Name of Nearest Living Relative_______________________________________________

Current or Last Employer_____________________________________________________

B. Next of Kin Information

Name_____________________________________Relationship_____________________

Address___________________________________________________________________

City_______________________  State__________________  Zip Code________________

Phone Number______________________________________________________________

C. After cremation you must decide where your ashes will be stored. Please check your preference below.

   ☐ NYCC will permanently inter the ashes; OR
   ☐ The ashes will be returned to the location listed below.

Name_____________________________________Relationship_____________________

Address___________________________________________________________________

City_______________________  State__________________  Zip Code________________

Phone Number______________________________________________________________
B. Presentation of the following medical history information is not required by law, but is requested so that the maximum benefit may be obtained in use of the body for purposes of teaching and research at New York Chiropractic College.

Physician’s Name___________________________________________________________

Address __________________________________________________________________

Telephone_________________________________________________________________

Major Surgery / Other Major Illnesses (please describe)

1. _______________________________________________________________________
2. _______________________________________________________________________
3. _______________________________________________________________________
4. _______________________________________________________________________
5. _______________________________________________________________________