



ANATOMICAL WHOLE BODY DONOR ACKNOWLEDGEMENT FORM

I acknowledge that _____ (*name of donee Whole Body Donor Program*) informed the undersigned about the following regarding whole body donation of _____ (*name and date of birth of person whose body is donated*) for the advancement of medical, dental, health and forensic science education, training, and/or research. I understand that the whole body gift is altruistic in nature, and neither the donor nor the donor’s estate will be compensated for the gift. I understand that the gift document authorizes the following, and governs to the extent of any conflict: **(Check the boxes that apply)**

1) The donee may or will use the whole body or part of the body donation for:

- Medical education (e.g., medical, dental, or health professions educational courses/labs).
- Research (e.g., anatomical, cellular, and/or tissue studies, medical device innovation).
- Clinical skills training (e.g., medical device training, current or new surgical training).
- Mortuary science education (e.g., training for funeral services, embalming).
- Forensic science education (e.g., studying body decomposition outdoors in the natural elements) or search/rescue training (e.g., canines used to find a body/part buried in debris).
- Other: _____

2) Consequences of the whole body donation will or may include:

- Students/health professionals dissecting or observing the dissection of body/body parts, where the skin and tissue is disarticulated or segmented, to learn about the body by identifying muscles, nerves, vessels, bones, joints, and/or organs.
- The removal/separation of body parts from the body and transfer to multiple locations for trainings, medical device testing, education, etc., by the donee or other TFSC licensees.
- The transfer of body or body part(s) to other facilities in-state or out-of-state.
- Use by students and health professionals at traditional educational settings (e.g., university classrooms/labs), traditional medical facilities (e.g., hospitals, bioskills facilities), or non-traditional facilities (e.g., hotels, convention centers).
- Photo/video use of body or body parts, which may include identifying features.
- Other: _____

3) The final disposition of the whole body donation by the donee may include:

- Cremation and return of the cremated remains to the person designated in the gift document or otherwise authorized by Section 711.002, Health and Safety Code.
- Cremation by the donee or a 3rd-party licensee, and cremated remains will not be returned.
- Other: _____

Donee provided sufficient time to ask questions and receive information on the uses, consequences, and final disposition of the whole body donation.

Donor/Person Legally Authorized Printed Name	Signature	Date Signed
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