



Institut für Plastination

# Body Donation for Plastination

## Donor's Consent

The procedures for donating your body for Plastination after your death are as follows:

1. Read the information brochure "Body Donation for Plastination" carefully.
2. Complete this form (consisting of the Donor's Consent "Body Donation for Plastination," the "Additional Opinions on Donation for Plastination," and the "Personal Statement") in duplicate and sign in all indicated places (6 signatures per form). Return both copies of the form to us, including the signed Authorization for Transportation, and any medical records you may wish to submit to us. If your relatives do not agree with your body donation for Plastination, you should have your signatures on both of the completed copies of your consent form notarized.
3. We will countersign one of the forms and return it to you as confirmation. Please keep this form with your personal documents or give it to a relative or your doctor for safekeeping. You will also receive a body donor identification card that you should carry along with your personal identification.

**This Donor's Consent does not constitute a contract but a declaration of intent, which can be revoked at any time. No reasons are required to be stated.**

**Institute for Plastination**

Office for Body Donation

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## Donor Personal Information

Family name	First (given) name	
Maiden name		
Date of birth	Place of birth	
Street address	Postal Code	City
State	E-mail	
Phone	Cell phone	Fax

—Please notify the IfP of any future changes of address—

### Donor's Consent "Body Donation for Plastination"

I hereby wish and direct that, after my death, my body be made available for the purpose of Plastination. By signing this document, I declare my consent. I do not wish to be buried and decline an autopsy (dissection of the body at an institute of pathology). At the time of death, my body shall instead be transferred as soon as possible to the Institute for Plastination (IfP) or to the PLASTINARIUM of Gubener Plastinate GmbH in Guben with whom the IfP collaborates closely.

My relatives have been informed about and support my decision. If they disapprove of my body donation, this form has either been notarized or signed by at least one witness.

I am aware that the IfP and Gubener Plastinate GmbH are privately held institutes, scientifically directed by the inventor of Plastination, Dr. Gunther von Hagens. Both the IfP and Gubener Plastinate GmbH pledge to release human specimens only to "qualified users." Qualified users are legal or natural persons who will use human plastinates only for research, teaching, medical, diagnostic, or therapeutic purposes. They must provide proof of these purposes. Qualified users include institutions of higher education, hospitals, schools, and museums, as well as physicians, professors, instructors, and similarly trained persons involved in relevant research.

The preparation of plastinated specimens is associated with high costs. Therefore, I agree that specimens made from my body may be sold to qualified users. The invoice to the said institutions that purchase specimens will include a statement to the effect that: "The specimens listed here are only available thanks to a donation made to the IfP's program of Body Donation for Plastination. We thank all our donors for their donation. Therefore, there is no charge for the specimens themselves, only for the cost of preparation." Revenues shall cover the costs of preservation, preparation, and Plastination, fund research into new developments in Plastination and the training of competent Plastination experts, as well as enable the establishment and ongoing support of a Plastination museum.

**I may withdraw my consent for my body to be used for Plastination at any time.**

**The IfP also has the right to issue a statement withdrawing its agreement to accept a body for Plastination.**

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature of body donor including first and last name

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Dr. Angelina Whalley, Director of the Institute for Plastination

## Additional Opinions on Donation for Plastination

The following individual opinions, statements, and directions accompany the Donor's Consent on "Body Donation for Plastination."

These forms provide you with an opportunity to advise us on the specific use(s) of your body and the plastinate(s) developed from it. It is important to us to know which uses you, the body donor, agree to and to which you object. If you have any additional wishes or comments not covered here, please feel free to write them in.

1. Do you have a relative or person you trust whom we can contact after your death if necessary? If yes, please give his or her contact details below:

Family name \_\_\_\_\_

First (given) name \_\_\_\_\_

Phone \_\_\_\_\_

Street, city, and postal code \_\_\_\_\_

Nature of relationship (e.g., daughter, brother) \_\_\_\_\_

2. I am an organ donor.  **Yes**  **No**  
(Organ donation for transplants is compatible with body donation for Plastination. It takes priority over Plastination, but the body can still be used for Plastination once organs have been removed. If you wish to become an organ donor, please contact your local Organ Donation Registry.)

3. I consent to having tissues of my body, such as ligaments, bone tissue, or the cornea, removed and being used for therapeutic and transplantation purposes.  **Yes**  **No**

(Tissue donation for transplant is fundamentally different from organ donation. Unlike in organ donation, no completely functional organs are removed during tissue donation. Tissues can still be harvested long after brain function and cardiovascular function have ceased. Tissue donation does not compromise the body's suitability for the development of Plastinated specimens.)

4. Knowledge of any existing conditions may significantly help our work and may also improve the type of dissection and the results of preservation. For educational and research purposes, it may also be useful to access the medical records of the body donor.  
I agree to have my medical records reviewed after my death.  **Yes**  **No**

5. I agree that my plastinated body can be used for the medical enlightenment of laypeople and, to this end, exhibited in public (e.g. in a museum or in the BODY WORLDS exhibitions).  **Yes**  **No**

6. The body donor's own identity is altered during the anatomical preparation. The process gives both the face and the body a new appearance on the basis of their internal anatomy. Therefore, a plastinated specimen could not be recognized from its external features—that would require complex reconstruction techniques.

I request that my donated body and the permanent specimens prepared from it remain anonymous. (Checking 'Yes' means that, e.g., in a museum exhibit, the donor's name, age, or origin may not be cited.)  **Yes**  **No**



**I hereby confirm my  
“Additional Opinions on Donation for Plastination” as stated on this form.**

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature of body donor including first and last name

**I understand that the IfP cannot guarantee to fulfill my personal requests (special poses etc.) for several reasons but will try to accommodate my individual wishes.**

**I understand that I may revoke**

- a) my “Donor’s Consent to Body Donation for Plastination”, as well as**
- b) the “Additional Opinions on Donation for Plastination”**

**individually or collectively, at any time, and without giving any reasons,  
by notifying the Institute for Plastination of my decision to do so.**

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature of body donor including first and last name

**I understand and hereby confirm that my successor trustee (or executor of my will) is aware of that, if I pass away outside Germany, my successor trustee is responsible for arranging and paying for the transport of my body to the IfP’s laboratory.**

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature of body donor including first and last name

**I hereby agree that my personal data are available to the Institute for Plastination (IFP) and Gubener Plastinate GmbH and are stored on electronic media.**

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature of body donor including first and last name

# Personal Statement

Please answer the questions below and sign this statement.

1. We are committed to providing body donors with information. We recommend that you read the information brochure, "Body Donation for Plastination" and the accompanying information sheet. Have you been provided with a copy of the brochure and the information sheet, and did you use these to learn about the process and purpose of Plastination as well as about potential uses of the resulting plastinates?

- Yes**, I have received and read the information materials named above.  
 **Yes**, I have received the information materials named above, but I have not read them.

If you check yes here, please state why you haven't read through the materials:

- I learned about the process and purpose of Plastination as well as potential uses of the resulting plastinates via other means (e.g., by visiting an exhibition, studying the Institute for Plastination's website, or via contact with the German Federal Association of Body Donors.  
 Different reason (please explain):

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- No**, I did not receive the information materials named above, but I learned about the process and purpose of Plastination as well as potential uses of the resulting plastinates via other means (e.g., by visiting an exhibition, studying the Institute for Plastination's website, or via contact with the German Federal Association of Body Donors.

2. Did anyone assist you in completing the "Donor's Consent to Body Donation for Plastination" and the "Additional Opinions on Body Donation"?

- Yes**, someone assisted me in completing the forms.  
 **No**, nobody assisted me in completing the forms.  
If you answered 'Yes', please explain why and in which way you received assistance.

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3. Has a legal guardian been appointed for you by a court?

- Yes**, a guardian has been appointed for me.  
 **No**, a guardian has not been appointed for me.  
If you answered yes: Does the guardianship solely affect your financial affairs?

**Yes**  **No**

I hereby confirm the above statements.

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature of body donor including first and last name