

Donor Name:

Registration No.:

Academy For Silent Mentor (AFSM)
Agreement for Voluntary Body Donation
for Medical and Liberal Arts Education and Research

Introduction

The body donation programme at AFSM Training Centre relies on the community for the gift of body donation to aid health care professionals in their education on the anatomical concepts of the human body and in surgical simulation training. In addition, AFSM strives to promote the humanistic values of the body donation programme to medical students and non-medical personnel through Liberal Arts Education. Therefore, the body donation programme is considered a “**i-Silent Mentor Programme**” combining science, technology, and humanity to weave professional training with humanistic appreciation.

Statement of Criteria

1. For a body donation to the AFSM Training Centre, the following criteria must be met:
 - 1.1 The donor must be willing to donate his/her body to the AFSM Training Centre at Cheras (hereinafter referred to as AFSM @ Cheras) after death for human anatomy teaching, surgical simulation, applied science/medical research, and liberal arts education in accordance with the specific criteria of these guidelines.
 - 1.2 The AFSM Training Centre will use deep-freezing and/or embalming technology to maintain the integrity of the body for surgical simulation and anatomical teaching.
 - 1.3 AFSM Training Centre does not accept donations from the following bodies:
 - a) Deaths due to, or bodies carrying active, infectious diseases listed in Appendix 1, even if the cause of death was unrelated, and subject to statutory notification requirements under the Ministry of Health Malaysia’s disease control guidelines.
 - b) Upon death, the body has extensive wounds that render it unsuitable for donation.
 - c) Drowning deaths.
 - d) Have undergone a post-mortem examination.
 - e) Deaths by suicide.
 - f) Objections by family members.
 - g) Foreigners (unless the donors have obtained a letter of release of the body from their respective High Commission in Malaysia).
 - h) Deaths occurring in Sabah or outside Malaysia, except where the family or legal representative is able to arrange the necessary preservation and transportation procedures, including soft embalming and air freight of the body back to Malaysia, subject to prior approval and acceptance by AFSM Training Centre.

Remark:

Applicants who have registered for organ donation must declare this in the body donation application form to enable AFSM Training Centre to coordinate the necessary arrangements with the National Organ Donation Centre.

Donor Initials 捐贈者签名缩写 _____

2. The **two (2) trustees** shall meet the following criteria:
 - a) Priority should be given to the immediate family members of the donor, including the legal spouse, parents, children, and siblings.
 - b) In the absence of immediate family members, other close relatives of the donor may be appointed.
 - c) If the donor wishes to appoint a non-relative as a trustee, such appointment shall be supported by a legally valid document prepared by a lawyer, authorising the appointed person to act in accordance with the donor's wishes regarding body donation and disposition of the body.

Body Donation Protocol

1. The steps to complete the Voluntary Body Donation Consent Form are as follows:
 - a) The donor must complete the consent form, indicating their willingness to donate their body.
 - b) The donor must submit a **photocopy** of his/her **IC and/or passport** together with the completed consent form.
 - c) The consent form can be obtained at:
Academy For Silent Mentor
Unit 2-1, No. 1, Jalan Kuari, Cheras, 56100 Kuala Lumpur.
Contact No: 03-9131 5523, 016-726 6898, 012-689 8970
Website: www.isilentmentor.com
Facebook: Academy For Silent Mentor
2. Procedures for the transfer of the donor's body:
 - 2.1 When a donor is critically ill during hospitalisation, the family members shall notify the AFSM Training Centre. AFSM staff will immediately contact the relevant personnel to carry out the following:
 - a) Assess the condition of the donor's body to determine whether it is suitable for donation.
 - b) Collect blood samples to screen for infectious diseases, as required for health hazard control.
 - c) Provide end-of-life companionship and support by medical students upon the request of the donor and/or family members.
 - 2.2 Upon notification by the family that the donor has passed away, AFSM Training Centre shall verify that a valid Register of Death (Daftar Kematian) has been issued by the relevant authority. Upon confirmation of the required documentation, AFSM staff will arrange transportation to transfer the donor's body to the AFSM Training Centre within 6 to 8 hours after death.
 - 2.3 Upon receipt of the donor's body at AFSM Training Centre, the body shall be processed and stored in the deep freezer in accordance with the Centre's procedures.
 - 2.4 If the donor has not completed the Voluntary Body Donation Consent Form during his/her lifetime, body donation consent may be provided by the donor's legal representative or legal guardian, subject to the completion of the required Legal Guardian Body Donation Consent Form and submission of supporting documents, including a photocopy of the donor's IC and/or passport.

Donor Initials 捐赠者签名缩写 _____

3. Care of the donor's body after the workshop teachings/training:
 - 3.1 Upon obtaining verbal consent from the family member or legal guardian, certain organs or tissues from the donor's body may be retained by AFSM for an extended period for research and preservation purposes.
 - 3.2 Medical students or doctors will clean the body and suture all incisions.
 - 3.3 The AFSM Training Centre will arrange for the care of the donor's body, including the sending-off and memorial service at Xiao En Memorial Park, Nilai, of the Xiao En Group. Following the sending-off and memorial service, the donor's body will either be returned to the family for burial or cremated, according to the donor's wishes.
 - 3.4 Care and disposition of the ashes:
 - a) The ashes will be collected by the family at Xiao En Memorial Park, Nilai or Xiao En Centre, Cheras, the day after the cremation for the purpose of esteeming. Any subsequent arrangement for the ashes, including placement in a columbarium, shall be arranged and paid for by the family.
 - b) If the donor has selected sea burial or ash burial, AFSM will arrange the selected burial and bear the associated cost. Ash burial will be arranged at Xiao En Memorial Park, Nilai. For sea burial, the ashes will be temporarily kept by the AFSM Training Centre, which will arrange for the ashes to be scattered in the Strait of Malacca off Port Klang or in the Sarawak River at Muara Tebas.
 - c) If the ashes are unclaimed by the family, they will be placed at the AFSM Training Centre. AFSM will notify the family of the location of the ashes and provide options for sea burial or ash burial. If the ashes remain unclaimed for three (3) months after cremation, AFSM may proceed with sea burial or ash burial in accordance with the arrangements stated above.
 - 3.5 AFSM will take full responsibility for the donor's body if the donor has no family members. Where cremation is required, it will be handled by Xiao En Memorial Park.
4. To express gratitude for the donors' contributions to medical education and research, AFSM Training Centre will hold a regular memorial ceremony and invite their families to participate.

Donor Initials 捐赠者签名缩写 _____

Appendix 1

(The following list serves as a reference guide, subject to the discretion of the AFSM Medical Advisory Committee.)

Category I Infectious Diseases:

Smallpox, plague, Severe Acute Respiratory Syndrome (SARS), rabies, H5N1 Influenza.

Category II Infectious Diseases:

Diphtheria, Typhoid fever and Paratyphoid fever, dengue fever, epidemic of cerebrospinal meningitis, polio / acute paralysis, Bacillary Dysentery, Amoebic dysentery, Malaria, Measles, acute viral Hepatitis A, Enterohemorrhagic Escherichia coli (EHEC) infection, Hantavirus Syndrome, Cholera, Rubella, multidrug-resistant Tuberculosis (MDR TB), Chikungunya, West Nile fever, epidemics of Typhus.

Category III Infectious Diseases:

Pertussis, Tetanus, Japanese Encephalitis, Tuberculosis (MDR-TB in addition to outside), leprosy, Congenital Rubella Syndrome, acute viral hepatitis (B, C, D, E-type), mumps, Legionnaires' disease, invasive Haemophilus type B infection, syphilis, gonorrhoea, neonatal tetanus, severe complications by enterovirus infection.

Category IV Infectious Diseases:

Herpes B Virus infection, Leptospirosis, Burkholderia-related infections, Botulism, Invasive Pneumococcal Disease (IPD), Q fever, Murine (Endemic) Typhus, Lyme Disease, Tularemia, Chigger, chickenpox, Cat-scratch disease (CSD), Toxoplasmosis, influenza with severe complications.

Category V Infectious Diseases:

Rift Valley fever (RVF), Marburg virus disease (MVD), Yellow fever, viral haemorrhagic fever.

Other Infectious Diseases:

HIV infection, Psittacosis, acute flaccid myelitis, Hendra virus infection, Type II Streptococcal infection, viral gastroenteritis.

Donor Initials 捐赠者签名缩写 _____

We are grateful for your altruistic wish to contribute to medical and liberal arts education. To strengthen the bond between you and future medical students, please write any words of encouragement or your thoughts for aspiring students who hope to make a difference in the world (you may attach additional paper if more space is required).

我们感恩您为医学与博雅教育作出贡献的无私心愿。为了让您与未来的医学生建立更紧密的联系，请在此写下您想给予这些有志于为世界带来改变的医学生的鼓励话语或心得寄语（如需更多空间填写，请附加纸张）。

Thank you for your support. To help us better understand your health condition, please tick (✓) the relevant box(es) and provide your medical history (you may attach additional paper if more space is required).

感谢您对我们的支持。为了帮助我们更好地了解您的健康状况，请勾选（✓）相关选项，并提供您的病史资料（如需更多空间填写，请附加纸张）。

☐ I have no known medical conditions and I am in good health.
本人没有已知的医疗状况，并且目前健康状况良好。

☐ I am an organ donor.
我是器官捐赠者。

☐ Previous surgeries or hospitalisations (e.g., 2005 - left knee replacement surgery):
曾接受过的手术或住院治疗（例如：2005 年 - 左膝关节置换手术）：

☐ Chronic or long-term illnesses (e.g., hypertension, diabetes, stroke, cancer):
慢性或长期疾病（例如：高血压、糖尿病、中风、癌症）：

☐ Have you ever tested positive for Hepatitis B, Hepatitis C, or Human Immunodeficiency Virus (HIV)?

是否曾检测出乙型肝炎、丙型肝炎或人类免疫缺陷病毒（HIV）呈阳性？

☐ Other health conditions:
其他健康状况：

Academy For Silent Mentor (AFSM)
Voluntary Body Donation Consent Form: By Donor

I, _____ (*donor name*), hereby voluntarily donate my body to the AFSM Training Centre of the Academy For Silent Mentor for medical and liberal arts education and research purposes after my death, in accordance with the terms and conditions set forth herein. I confirm that I am at least eighteen (18) years of age. I sign this Voluntary Body Donation Consent Form as evidence of my informed and voluntary consent.

Donor Information 捐赠者资料

Name 姓名 (English 英文) : _____

(Chinese 中文) : _____

NRIC 身份证号码 : _____ Date of Birth 出生日期 : _____

Passport No. (*for non-Malaysians*) 护照号码 (非马来西亚公民) : _____

Gender 性别 : Male 男 / Female 女

Religion 宗教信仰 : _____ Occupation 职业 : _____

Permanent Address 居住地址 :

Mailing Address 邮寄地址 :

Phone Number 电话号码 : _____ Email 电邮 : _____

To implement my wishes after my death, I designate two (2) trustees.
 为落实本人身故后的意愿, 本人指定两名信托人。

1st Trustee Name 第一信托人姓名 : _____

NRIC 身份证号码 : _____

2nd Trustee Name 第二信托人姓名 : _____

NRIC 身份证号码 : _____

Please tick (✓) the appropriate option(s) below 请在以下适当选项中打勾 (✓) :

1. Allow the Body to be used for 同意将大体用于

- ☐ Gross anatomy teaching (soft embalming) – 3 to 5 years
解剖教学（防腐处理）– 三至五年
- ☐ Surgical simulation (rapid freezing) – 1 to 2 years
模拟手术教学（急速冷冻）– 一至两年
- ☐ Donation of body tissues for medical research 捐赠身体组织用于医学研究目的
(please fill in AFSM Rapid Tissue Donation Program Consent Form)
(请填写 AFSM 快速组织捐赠计划同意书)
- ☐ Donation of body tissues for museum specimens (for educational display) as a form of continuing education.
捐赠身体组织作为博物馆标本（用于教育展示），作为一种继续教育的形式。

Remark 备注

If both “Gross Anatomy Teaching” and “Surgical Simulation” are selected, the donor’s body will be used for either type of teaching, depending on freezer availability, in order to honour the donor’s wish to donate his/her body for medical education.

若同时选择“解剖教学”和“模拟手术教学”，无语良师学院将根据冰库容量决定适用的教学方式，以尊重捐赠者为医学教育捐献大体的心愿。

2. In addition to the medical education described above, AFSM also organises liberal arts education programmes to cultivate humanistic values (such as altruism and empathy) and encourage reflection on life and death among medical and non-medical participants. Are you willing to allow your donated body to be used for these programmes?

除了上述的医学教育，无语良师学院也通过博雅教育课程，培养医疗与非医疗参与者的人文精神（例如利他主义和同理心），并鼓励大家思考生命与死亡。请问您是否愿意将所捐赠的大体用于这些课程？

(a) Liberal Arts Education for Medical and Non-Medical Participants (e.g. students, adults, medical professionals, and general public)

医疗与非医疗参与者的博雅教育课程（例如：学生、成人、医疗专业人员及社会大众）

- ☐ Yes 我愿意
- ☐ No 我不愿意

(b) 32 Body Parts & Asubha Workshop for Buddhist Monastics and Lay Practitioners

佛教出家众与在家修行者的三十二身分与不净观工作坊

- ☐ Yes 我愿意
- ☐ No 我不愿意

3. I consent to the retrieval and use of the following organs/tissues from my donated body after death, subject to the availability of appropriate facilities and arrangements at the time of donation:
本人同意于身故后, 在当时具备适当设施及相关安排的情况下, 从本人所捐赠的大体中取用及使用以下器官/组织:

- ☐ Cornea 眼角膜
☐ Skin 皮肤
☐ Bone(s) 骨组织
☐ Whole skeleton 全身骨骼

4. Donor's wishes regarding the disposition of the body and ashes:

捐赠者对大体及骨灰处理方式的意愿:

- ☐ Return the body to the family for burial 将大体交还给家属进行土葬
☐ Return the ashes to the family for placement in a columbarium
将骨灰交还给家属安奉于骨灰塔
☐ Sea burial arranged by the AFSM Training Centre 无语良师学院安排海葬
☐ Ash burial arranged by the AFSM Training Centre 无语良师学院安排植存葬
(Please complete the Ash Burial Application Form 请填写植存葬申请表格)

My trustees and I have carefully read and considered all the information stated in this Agreement. I have expressed my wish to donate my body to the AFSM Training Centre for medical and liberal arts education, research, and other purposes as selected above, and neither I nor my trustees have any objection to this donation.

本人及本人的信托人已仔细阅读并审阅本协议所载的全部资料。本人已表达意愿, 将大体捐赠予无语良师学院培训中心, 用于上述所选择的医学及博雅教育、研究及其他用途。本人及本人的信托人均对此项捐赠没有任何异议。

Donor Signature 捐赠者签名: _____

Date 日期: _____

IN THE PRESENCE OF A WITNESS 见证人

(Please ensure that the witness is NOT the donor or any of the trustees)

(请确保见证人不是捐赠者或任何一位信托人)

Name 姓名 : _____

NRIC 身份证号码: _____ Occupation 职业 : _____

Witness Signature 见证人签名: _____

Date 日期: _____

Academy For Silent Mentor (AFSM)
Voluntary Body Donation Consent Form: By Trustee

Consent is given by 同意由以下信托人代表作出：

1st Trustee 第一信托人：_____

2nd Trustee 第二信托人：_____

On behalf of the donor (Donor Name) 代表捐赠者（捐赠者姓名）：_____

To consent to the donation of the donor's body to the AFSM Training Centre of the Academy For Silent Mentor for medical education and research purposes.

同意将捐赠者的大体捐赠予无语良师学院培训中心，用于医学教育及研究。

First Trustee 第一信托人

Name 姓名：_____ NRIC 身份证号码：_____

Relationship with Donor 与捐赠者的关系：_____

Phone Number 电话号码：_____ Email 电邮：_____

Address 地址：_____

I, as the first trustee, confirm that I have carefully read and understood all the information contained in this Agreement. I acknowledge and respect the donor's expressed wish to donate his/her body to the AFSM Training Centre for medical and liberal arts education, research, and other purposes as selected by the donor, and I have no objection to this donation.

本人作为第一信托人，确认已仔细阅读并理解本协议所载的全部内容。本人知悉并尊重捐赠者所表达的意愿，即将其大体捐赠予无语良师学院培训中心，用于捐赠者所选择的医学及博雅教育、研究及其他用途，并对此项捐赠没有任何异议。

1st Trustee Signature 第一信托人签名：_____ Date 日期：_____

IN THE PRESENCE OF A WITNESS 见证人

(Please ensure that the witness is NOT the donor or any of the trustees)

（请确保见证人不是捐赠者或任何一位信托人）

Name 姓名：_____

NRIC 身份证号码：_____ Occupation 职业：_____

Witness Signature 见证人签名：_____ Date 日期：_____

Second Trustee 第二信托人

Name 姓名 : _____ NRIC 身份证号码 : _____

Relationship with Donor 与捐赠者的关系 : _____

Phone Number 电话号码 : _____ Email 电邮 : _____

Address 地址 : _____

I, as the first trustee, confirm that I have carefully read and understood all the information contained in this Agreement. I acknowledge and respect the donor's expressed wish to donate his/her body to the AFSM Training Centre for medical and liberal arts education, research, and other purposes as selected by the donor, and I have no objection to this donation.

本人作为第一信托人，确认已仔细阅读并理解本协议所载的全部内容。本人知悉并尊重捐赠者所表达的意愿，即将其大体捐赠予无语良师学院培训中心，用于捐赠者所选择的医学及博雅教育、研究及其他用途，并对此项捐赠没有任何异议。

2nd Trustee Signature 第二信托人签名 : _____ Date 日期 : _____

IN THE PRESENCE OF A WITNESS 见证人

(Please ensure that the witness is NOT the donor or any of the trustees)

(请确保见证人不是捐赠者或任何一位信托人)

Name 姓名 : _____

NRIC 身份证号码 : _____ Occupation 职业 : _____

Witness Signature 见证人签名 : _____ Date 日期 : _____

Submission Method 提交方式

After completing the above forms, please submit the completed forms together with a **photocopy of the donor's NRIC (front and back) or passport** to the address below. Thank you.

填写完上述表格后，请将填写完整的表格连同**捐赠者身份证（正反面）或护照复印件**，一并提交至以下地址。谢谢。

Academy For Silent Mentor

Unit 2-1, No. 1, Jalan Kuari, Cheras, 56100 Kuala Lumpur.

Tel: 03-9131 5523 Mobile: 016-726 6898 / 012-689 8970

Checklist 检查清单

To avoid any delay in processing, please refer to the checklist below to ensure that all required sections of the form have been properly completed.

为避免处理过程受到延误，请参阅以下检查清单，确认表格各项内容已正确并完整填写。

Item	Please tick ✓	For administrative use only
Donor's initials completed (Pages 1-4)	☐	
Medical history completed (Pages 5-6)	☐	
Donor's particulars and signature completed (Pages 7-9)	☐	
Trustees' particulars and signatures completed (Pages 10-11)	☐	
Witness signature completed (<i>Must NOT be the donor or a trustee</i>) (Pages 10-11)	☐	
Teaching option(s) selected (Page 8)	☐	
Ash management option selected (Page 9)	☐	
Photocopy of NRIC (front and back) or Passport (for non- Malaysians) attached	☐	
Date Form Received	N/A	
Donor Registration Number	N/A	

* AFSM will issue a donor card to the donor once the consent form has been duly completed and received.

* 当同意书已妥善填写并提交后，AFSM 将向捐赠者发出捐赠者卡。

* Please keep a photocopy of this consent form for your safekeeping, as it may be required for local procedures related to body disposition.

* 请保留一份本同意书的复印件并妥善保存，以备办理相关大体处理程序时使用。