In his *De fabrica corporis humana* (1543, and 1555) Andreas Vesalius (1514-1564) frequently discussed the strenuous hunt for suitable autopsical material. Apart from advertising his heroic feats in the service of medical science, which entailed stealing from gibbets and graves and enduring the stench of decaying human remains in his dwellings, these complaints were also motivated by his concerns with the criteria cadavers should or should not meet. In book V of his *opus magnum*, where he explained the best method for conducting an autopsy, Vesalius acted not as the empirical scientist modern medical doctors over the years wanted him to be; instead, by hailing the standards of the ancient Greek sculptor Polycletus, he emerged as a learned Renaissance scholar *pur sang*. He asserted that:

> 'a body employed for public dissection be as *temperantissimum* or average as possible according to its sex and of medium age, so that you can compare it to other bodies as if to the statue of Polycleitus. In private dissections, which are undertaken very frequently, any body can be profitably employed because you will also be able to examine whatever its variations and consider the differences of bodies and the true nature of many diseases'.

By and large, physical standards for cadavers were not very strict, as their scarcity forced the medical doctors to secure whatever they were able to lay their anatomizing hands on. Generally speaking, Vesalius aimed at Polycletian bodies, meaning that he preferred young cadavers of excellent constitution without any abnormalities. Authorities were pressured or bribed to surrender the remains of criminals put to death or even, such as seems to have been the case between Vesalius and the Padovan judge Marcantonio Contarini, to synchronize the time of execution with the medical demand for suitable corpses. Sometimes dissections revolved around battered bodies, especially in case of the rarely available female cadavers but that was not viewed as an optimal solution. Certainly in case of public dissections, which were performed before a mixed audience of not only medical colleagues and students, but also representatives of the civic, ecclesiastical and courtly elite, standards were set higher. These medical performances were merely theatrical performances and can be interpreted as expressions of the self-fashioning of a fairly new professional group, the academically trained medical