Status **Active** PolicyStat ID **16549481**

Origination	05/1989
Last Approved	12/2024
Effective	12/2024
Last Revised	12/2024
Next Review	12/2026

Contact	Amanda Berry: Quality & Data Analytics Coord
Area	Nursing
Applicability	Erlanger Health - Western Carolina

Organ and Tissue Donation

PURPOSE:

A. To identify potential organ and/or tissue donors
B. To educate families on organ/ tissue donation and inform them of donation options
C. To coordinate the recovery of donated organs and tissues with LifeShare Carolinas
D. To comply with federal and state regulations and accreditation requirements

RESPONSIBILITY:

A. It is the responsibility of the nurse/care provider to report all deaths and imminent deaths occurring in the hospital to LifeShare Carolinas.
B. It is the responsibility of Department Managers to ensure compliance with this policy.

POLICY:

A. Erlanger Western Carolina Hospital EWCH endorses transplanting viable organs and tissues.
B. All patients expiring will be assessed for potential donation.
C. Information on organ donation will be available to any interested patient or person.
D. The LifeShare staff will be available 24 hours a day to accept responsibility for on-the-scene and/or by telephone assistance, including:
    1. Evaluation of the potential donor.
    2. Assisting with organ donor management.
    3. Arranging organ or tissue recovery.
    4. Preservation and shipping of organs and tissues.

E. All nursing staff will be trained in the appropriate donation procedures and protocols.

PROCEDURE

A. The following statements summarize the steps to be followed in identifying potential and/or actual organ/ tissue donors.
    1. Complete the "Routine Request for Organ and Tissue" electronic form on all deaths, including patients dead on arrival (DOA).
    2. Call LifeShare to notify all cardiac deaths within one hour of death or on arrival for patients DOA. (1-800-932-4483)
    3. Call Lifeshare to report imminent death within one hour of meeting clinical triggers set forth in Organ Donation Section below.

EYE & TISSUE DONATION

A. LifeShare will evaluate the deceased patient for potential donation
    1. State and federal law allows and requires the release of medical information for the purpose of this evaluation.

B. LifeShare will inform EWCH staff of the patient's donation eligibility.

C. If the patient is a candidate for donation, EWCH staff member will assist the LifeShare screener to identify and speak with the legal next-of-kin (NOK).

D. If the NOK is not available at the hospital, facility staff will provide the LifeShare screener with contact information for the next of kin.

E. LifeShare will make the NOK aware that someone will speak to them about "end-of-life decisions".

F. Facility staff will not discuss donation with the NOK.

G. The request for donation, the consent and the medical/social screening will be conducted by LifeShare staff.

H. Facility staff will be informed of the next of kin's decision.
    1. If the NOK declines donation or if the deceased is ruled-out during the medical/ social screening, the process is complete and the deceased may be released to the funeral home.
    2. If the NOK consents to donation and the deceased is not ruled-out in the medical/ social screening, LifeShare will inform the facility staff member about the steps necessary to facilitate recovery of the donation.

I. LifeShare will contact the facility Operating Room staff to arrange a convenient time for recovery of the donated tissues.
    1. LifeShare will perform the recovery and will inform facility staff when the deceased may be released to the funeral home
    2. LifeShare will return the OR to a usable condition following the recovery.

ORGAN DONATION

A. **Clinical Triggers for Imminent Death**

1. Emergency Department and ICU staff will notify LifeShare of the imminent death of all ventilated patients with neurologic injury and Glasgow Coma Scale of 5 or less regardless of paralytics/sedation:
    a. When a patient meets Imminent Death criteria, contact LifeShare within one hour.
    b. Contact LifeShare immediately if plans are made to discontinue support of a ventilated patient.
    c. Contact LifeShare immediately anytime a ventilated patient's family brings up donation with the staff.

    The medical staff of Erlanger Western Carolina Hospital will continue to provide hemodynamic, fluid and electrolyte support to ventilated patients until they are evaluated by LifeShare for potential donation and, if a potential donor, until LifeShare can offer the option of donation to the family.

B. Refer to Donation After Cardiac Death Policy

C. If the family consents to organ donation, the charge nurse or designee will notify the admitting office that the patient is an organ donor

1. The Business office will register the organ donor patient as an outpatient account with a new account number. The patient will be discharged from the inpatient account using "expired" as the discharge disposition.
2. A new patient account number will be assigned to the patient. The physician in the system will be changed to "LifeShare Physician"
3. A new medical record chart will be setup for all organ donor patients when the patient has been pronounced brain dead, consent has been obtained and the patient is officially an organ donor
4. Both the inpatient and outpatient account will be sent to the LifeShare (both the Charlotte and Asheville offices) for review and payment.

    Charlotte Office:
    LifeShare Carolinas, 5000-D Airport Center Parkway, Charlotte, NC 28208

    Asheville Office:
    LifeShare Carolinas, 1200 Ridgefield Blvd. Suite 150, Asheville, NC 28806

D. The procurement coordinator is responsible for:

1. If the case falls under the jurisdiction of the Medical Examiner, LifeShare will obtain consent from the Medical Examiner before recovery of any organs, eyes and/or tissue.
2. Assessing potential donors and coordinating the clinical aspects related to the

organ and tissue donors.

3. Contacting and coordinating activities throughout donor management and recovery. This includes but may not be limited to labs, diagnostic tests, orders and surgical procedures.
4. Assuring the organs are sterility recovered and packaged by the recovery team. Providing all of the tissue recovery staff and supplies for nonvascular tissue donors, i.e. eye and tissue.

E. The facility is responsible for:
    1. Providing the necessary personnel, equipment and supplies to assist in vascular organ recovery. An anesthesiologist or nurse anesthetist, scrub/ surgical tech and circulating RN will be provided to assist in the OR as necessary.
    2. If the potential donor is a Medical Examiner case, nursing staff will also need clearance from LifeShare to release to funeral home.

DETERMINATION OF DEATH

A. The determination of death of a potential donor remains a clinical decision of the attending physician.
B. The declaration of death must be made in accordance with State Law, and must be made by a physician who is not a member of the transplant or procurement team
C. The patient must be declared dead before removal of organs. (Brain Death = Death)

RECORD KEEPING

A. Erlanger Western Carolina Hospital will audit, maintain and provide records to demonstrate that all deaths and imminent deaths were appropriately reported to LifeShare.
    1. This includes the auditing of ED & ICU deaths to insure that all imminent deaths of all ventilated patients were appropriately and timely referred to LifeShare.

B. LifeShare will provide documentation to demonstrate the evaluation for donation and the consent and recovery rates for potential donors
    1. Documentation provided to EWCH will include:
        a. Eye & Tissue Consent Rate: Consents / Potential donors
        b. Eye & Tissue Conversion Rate: Recovered Donors / Potential donors
        c. Organ Consent rate: Organ Consents / Organ Eligible Potentials
        d. Organ Yield: Organs Transplanted / Donors Recovered

Reference:

- Cross Reference: Badge Buddies provided by LifeShare
- LifeShare of the Carolinas. Accessed https://www.lifesharecarolinas.org/professional-partners/

Approval Signatures

Step Description	Approver	Date
BOD	Monique Matheny: Accreditation Coordinator	12/2024
MEC	Monique Matheny: Accreditation Coordinator	10/2024
CNO	Teresa Bowleg: Administrator - ACNO EWC	09/2024
	Amanda Berry: Quality & Data Analytics Coord	09/2024

Applicability

Erlanger Health - Western Carolina