

	POLICY Number: 7311-60-031 Title: Organ and Tissue Donor Referral Policy
Authorization <input type="checkbox"/> President and CEO <input checked="" type="checkbox"/> Vice President, Finance and Corporate Services	Source: Director for Saskatchewan Transplant Program Cross Index: Date Approved: November 27, 2013 Date Revised: Date Effective: November 29, 2013 Scope: Acute Care

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OVERVIEW

Organ donation is possible in both rural and urban settings. Rural patients are transferred to either Regina or Saskatoon for donation. Tissue donation is currently limited to Saskatoon and Regina hospitals.

Saskatoon Health Region (SHR) believes in the right to self-determination and that every person has the right to express their personal values and unique expectations relating to their own end of life care. According to *The Human Tissue Gift Act*, the next of kin fulfills this role if the individual is unable to participate. This policy applies to organ and tissue donation from deceased individuals only.

DEFINITIONS

End-of-Life Care means medical care not only of patients in the final hours or days of their lives, but more broadly, care of all those with a terminal illness or terminal condition that has become advanced, progressive and incurable.

Organ Donor means a legally deceased person who meets specific criteria for organ donation. Heart, lungs, kidneys, liver, pancreas, and small bowel may be considered for donation in Saskatchewan.

Staff means SHR employees, practitioner staff and professional staff.

Tissue Donor means a person that dies and is determined suitable, by meeting specific criteria, for tissue donation. Corneas, bone, tendons and heart valves may be considered for donation in Saskatchewan.

1. PURPOSE

The purpose of this policy is to ensure patients, who meet donor criteria (and when applicable the next of kin), are provided the opportunity to choose organ and tissue donation.

2. PRINCIPLE

All patients who meet donor criteria have a right to choose Organ and Tissue Donation as an end of life care option.

3. POLICY

3.1 SHR supports and will provide Organ and Tissue Donation as an end of life care option to all patients (and/or their next of kin proxy or legal guardian) who meet the criteria outlined in Appendix A.

3.1.1 Organ donation is offered at urban and rural acute care sites.

3.1.2 Tissue donation is offered at Saskatoon and Regina acute care sites.

3.2 SHR requires staff to notify the Saskatchewan Transplant Program when a patient, meets the donation criteria (Appendix A).

3.3 SHR requires that the staff document the referral to the Saskatchewan Transplant Program as per Appendix A.

4. ROLES AND RESPONSIBILITIES

4.1 Staff

4.1.1 SHR staff caring for a patient who dies or whose death is imminent assess eligibility for organ and tissue donation using Appendix A.

4.1.2 If the patient is eligible based on the Organ and Tissue Donation Assessment Form (Appendix A). The SHR staff or physician contact the Saskatchewan Transplant Program Coordinator via switchboard.

4.1.3 If the patient is not eligible based on Appendix A the SHR staff or physician fax the Saskatchewan Transplant Program the completed form (Appendix A).

4.1.4 SHR staff and physicians are responsible for the patient's care and will communicate with the next of kin regarding end of life and where applicable notification of neurological death.

4.1.5 Introduce the Saskatchewan Transplant Program staff to the patient/family.

4.2 Saskatchewan Transplant Program -- Transplant Coordinator or Tissue Donor Coordinator

4.2.1 Support staff and physicians in the referral process.

4.2.2 Collaborate with staff and physicians regarding offering donation as an end of life care option.

4.2.3 Gain consent from the patient, proxy or if none, nearest relative prior to reviewing the patient's chart to determine eligibility.¹

4.2.4 Attend the unit to discuss the opportunity to donate with the nearest relative.

¹ The Health Information Protection Act

- 4.2.5 Obtain consent for Organ and Tissue Donation. If consent is granted, donation process will follow as per Saskatchewan Transplant Program Standard Operating Procedures for Organ and/or Tissue Donation.

5. POLICY MANAGEMENT

The management of this policy including policy education, monitoring, implementation and amendment is the responsibility of the Director for Saskatchewan Transplant Program.

6. NON-COMPLIANCE/BREACH

Noncompliance with this policy will be reported to the Saskatchewan Transplant Program and the unit manager (urban) and Site Leader (rural).

7. REFERENCES

Alberta Health Services: Southern Alberta Organ Donation Program: Tissue Donation Flowchart
British Columbia: Consent to Donation Regulation. February 27, 2013
Capital Health: Organ & Tissue Donation Guidelines. February 19, 2008
The Health Care Directives and Substitute Health Care Decision Makers Act (Saskatchewan)
The Human Tissue Gift Act (Saskatchewan)

PROCEDURE

Number: 7311-60-031

Title: Organ & Tissue Donation Procedure

Authorization

President and CEO
 Vice President, Finance and Corporate Services

Source: Director for Saskatchewan Transplant Program

Cross Index:

Date Approved: November 27, 2013

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Date Reaffirmed:

Scope: Acute Care

1. PURPOSE

The purpose of this procedure is to establish the process to ensure patients and when applicable, their next of kin are provided options for organ and tissue donation.

2. PROCEDURE

2.1 Organ Donation (SHR Acute Care - Urban and Rural)

2.1.1 SHR staff caring for a patient who dies or whose death is imminent determine whether patient is eligible to donate by completing Appendix A.

2.1.2 If the patient is not eligible based on Appendix A, the SHR staff or physician fax the form to the Saskatchewan Transplant Program.

2.1.3 If the patient is eligible based on Appendix A, the SHR staff or physician contact the Transplant Coordinator via switchboard.

2.1.4 The Transplant Coordinator will discuss the referral with the staff person to determine if the individual is eligible to donate. Only de-identified information will be shared.

2.1.5 SHR staff and/or physician caring for the patient discuss end of life and where applicable determination of neurological death.

2.1.6 SHR staff will check the patient's advanced care directive and Saskatchewan health card for direction regarding the patient's interest to be a donor.

2.1.6.1 If there is an organ donor sticker on the Saskatchewan Health Card that indicates the patient consent to organ donation, or if the advanced care directive indicates the patient's wish to donate, the Transplant Coordinator will review the chart.

2.1.6.2 If there is no indication of the above, the staff introduces the Transplant Coordinator to the proxy/substitute decision maker; if there is none appointed, then next of kin. The Transplant Coordinator obtains verbal consent to review the chart

2.1.6.3 In rural, this occurs via telephone.

2.1.7 If the patient is eligible for organ donation based on initial screening and review of the patient chart the Transplant Coordinator will discuss the opportunity to donate with the next of kin.

2.1.8 If written consent for donation is granted, the donation process will follow as per the Saskatchewan Transplant Program Standard Operating Procedures for Organ Donation.

2.2 Tissue Donation (SHR Acute Care – Urban)

2.2.1 SHR staff caring for a patient who dies or whose death is imminent determine whether patient is eligible to donate by completing Appendix A.

2.2.2 If the patient is not eligible based on Appendix A, the SHR staff or physician fax the form to the Saskatchewan Transplant Program.

2.2.3 If the patient is eligible based on Appendix A, the SHR staff or physician contact the Tissue Donor Coordinator via switchboard.

2.2.4 The Tissue Donor Coordinator will discuss the referral with the staff person to determine if the individual is eligible to donate. Only de-identified information will be shared.

2.2.5 SHR staff and/or physician caring for the patient discuss end of life.

2.2.6 SHR staff checks the patient's advanced care directive and Saskatchewan health card for direction regarding the patient's interest to be a donor.

2.2.6.1 If there is an indicator, the Tissue Donor Coordinator will review the chart.

2.2.6.2 If there is no indicator, the staff introduces the Transplant Coordinator to the next of kin. The Tissue Donor Coordinator obtains verbal consent of an appointed proxy, or if none, the nearest relative to review the patient's chart.

2.2.6.3 If the patient is eligible for tissue donation based on initial screening and review of the patient chart the Tissue Donor Coordinator will discuss the opportunity to donate with the next of kin.

2.2.6.4 If written consent for donation is granted, the donation process will follow as per Saskatchewan Transplant Program Standard Operating Procedures for Tissue Donation.

3. PROCEDURE MANAGEMENT

The management of this policy including policy education, monitoring, implementation and amendment is the responsibility of the Director for the Saskatchewan Transplant Program

4. NON-COMPLIANCE/BREACH

Noncompliance with this procedure shall be reported to the Saskatchewan Transplant Program and the unit manager.

5. REFERENCES

Alberta Health Services: Southern Alberta Organ Donation Program: Tissue Donation Flowchart

British Columbia: Consent to Donation Regulation. February 27, 2013

Capital Health: Organ & Tissue Donation Guidelines. February 19, 2008

The Health Care Directives and Substitute Health Care Decision Makers Act (Saskatchewan)

The Human Tissue Gift Act (Saskatchewan)

No Patient Identifier

*Saskatchewan
Transplant Program*



Regina Office – Kidney Health Centre
235 Albert Street N.
Regina, SK S4R 3C2
Phone: 306.766.6477
Fax: 306.766.7049

Saskatoon Office- St. Paul's Hospital
1702 20th Street West
Saskatoon, SK S7M 0Z9
Phone: 306.655.5054
Fax: 306.655.5946

Organ & Tissue Donor Assessment Form

Date: _____ Time: _____ Signature: _____

Site: _____ Unit: _____

1. Organ Donor Assessment:

All patients who meet the GIVE criteria or who meet the Neurological Determination Death criteria are potential organ donors.

►► **CALL** the Transplant Coordinator on call via switchboard when the patient meets the GIVE criteria.

Glasgow Coma Scale <5
Injured Brain
Ventilated
End of Life Discussion

2. Tissue Donor Assessment:

For all deaths:

- | | Yes | No |
|--------------------------------------------------------------------------|--------------------------|--------------------------|
| • Is your patient older than 71 | <input type="checkbox"/> | <input type="checkbox"/> |
| • Does your patient have active Leukemia/ Lymphoma? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Does your patient have a neurological disease of unknown etiology? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Does your patient have an infectious disease? (Hep B,C, HIV) | <input type="checkbox"/> | <input type="checkbox"/> |
| • Does your patient have MRSA or VRE? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Does your patient have confirmed active sepsis? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Is your patient a known cocaine or IV drug user? (in the last 5 years) | <input type="checkbox"/> | <input type="checkbox"/> |

If No to all questions, the patient is a potential tissue donor

►► **CALL** the Tissue Donor Coordinator on call via switchboard.

If you have answered "YES" to any of the questions above the patient is not eligible to be a tissue donor.

►► **FAX** this form to the Saskatchewan Transplant Program at 306-655-5946 and give the original form to your unit manager.

**If you are unsure or have any questions
call the Transplant Coordinator on call via switchboard for assistance.**