ORGAN, TISSUE, AND EYE DONATION

POLICY:

Family members of potential organ/tissue/eye donors will be offered by a Certified Designated Requestor (CDR) the option to donate or decline to donate organs and/or tissue for transplantation or research. Iowa Donor Network (IDN) will be notified by appropriate personnel of every death occurring at MMSC. (Administrative Policy 127)

SPECIAL INFORMATION:

A. Identification of Patients for Donation
1. Tissue and eye donors
   a. Upon confirmation of death a CDR (Department Director, Associate Director, or ER Charge Nurse) will call 800-831-4131 to refer death to IDN for evaluation of tissue or eye donation as prescribed on Form #MR 134 “Post Mortem Care”.
   b. IDN representative will ask a few questions to evaluate the patient:
      • Document of Gift/First Person Consent/ on Donor Registry
      • Age/sex/race
      • Medical history
      • Cause of death.
2. Organ donors
   a. When brain death is imminent or has been pronounced, call IDN. In order for patient to be an organ donor, patient must be supported on mechanical ventilation. By calling before brain death. IDN can provide support to the family and coordinate the donor process.
   b. IDN donation coordinator assumes medical care of the potential donor after brain death confirmed.
   c. Circumstances surrounding non-beating heart donation or ”controlled organ donation after cardiac death” is defined in Administrative policy #156.
   d. IDN donation coordinator orchestrates care of the patient leading to cardiac death. See policy #156.
B. Donor Evaluation and Offering of Donation to the Family.
1. In all cases in which IDN determines that the patient meets initial medical criteria for organ donation, an IDN representative travels on-site to evaluate the patient and to provide information and support to the patient’s family. The option of donation is presented by the IDN representative and Certified Designated Requestor (CDR).
2. Families need to understand brain death before they are approached about organ donation. Do not discuss donation with the family prior to calling IDN, unless the family initiates the subject.

Tissue & Eye Donors:
1. Potential tissue and eye donors are evaluated over the telephone by IDN representative. If a patient is a suitable candidate, a representative from the eye or tissue bank will discuss donation with the family whenever possible. However, certain situations (such as distance, the family’s wish to leave the hospital, nurse’s rapport with the family) may indicate that someone from the hospital discuss tissue and eye donation (see Organ and Tissue Procurement Manual Section IV, Approaching the Donor Family). If the patient’s next-of-kin is not present at the hospital, the eye or tissue bank representative makes the request by telephone.
2. Document that the death was referred to IDN on the organ/tissue/eye donation on the Post Mortem Care (MR#134).
3. If the family decides to donate eyes or tissue in the absence of the eye or tissue bank representative, have them sign the consent form and place it in the patient’s chart.
C. Medical Examiner
The initial referral to IDN is made prior to obtaining permission from the county medical examiner. If the patient’s death is within the jurisdiction of the county medical examiner, his/her permission is obtained before the patient’s next-of-kin is offered the opportunity to donate. For Medical Examiner criteria refer to Administrative Policy 127.

D. Organ Donor Medical Management
1. The IDN coordinator assumes responsibility for medical management of the organ donor after brain death has been declared and the family has given consent for organ donation. IV fluids and vasopressive medications, among other therapies, are determined by the IDN coordinator. Laboratory tests are ordered to evaluate each organ system for function in possible transplant recipients.
2. The potential organ donor is kept in intensive care unit on the ventilator. Once the IDN coordinator has completed necessary testing and contracted transplant surgeons, the potential donor is taken to the operating room. This usually occurs 8-12 hours after brain death is pronounced.
3. The hospital give temporary privileges to non-physicians performing the organ recovery.
4. If the family has given consent for tissue and eye donation in addition to organ donation, the IDN coordinator will contact the tissue and eye bank to recover the tissue after the organs are removed.
5. The time of death is the time brain death has been determined. In cardiac death, time of death is determined by documentation of asystole in 2 leads.

E. Billing Procedures
Organ Donor Billing:
After brain death is pronounced and consent is obtained, charges for organ donation purposes are continued under the same patient billing number. Following donation, the entire patient bill is sent to IDN for review of charges. IDN reimburses Marshalltown Medical & Surgical Center for costs incurred during the patient’s stay that are related to donation. The patient bill is returned to Marshalltown Medical & Surgical Center. Payment is made by IDN for the charges. The family incurs no cost related to the donation procedure. The family is responsible for paying for any life-saving procedures performed prior to brain death declaration, cardiac death, and funeral costs.
Tissue Donor Billing:
The designated tissue bank will reimburse for charges incurred during the recovery procedure. The tissue bank brings most supplies to the hospital. However, should any hospital equipment be used, Marshalltown Medical & Surgical Center bills the tissue bank for costs incurred. The tissue bank does not require hospital staff assistance. The family incurs no costs related to the donation procedure.
Eye Enucleation:
This procedure may take place at Marshalltown Medical & Surgical Center or at the requested Funeral Home. The transportation of the eyes to the Iowa Lions Eye Bank by the Iowa Highway Patrol is done voluntarily. The family incurs no cost related to the enucleation procedure.

REFERENCES:
Iowa Donor Network
Iowa LifeNet Tissue Services
National Organ Transplant Act 1984
Uniform Anatomical Gift Act of Iowa 142c.1-142c.14
Iowa Lions Eye Bank Enucleation Procedure Manual
P:\CAREPT\cpt4.7r1.doc