Organ/Tissue Removal by Procurement Organizations for Donation and Transplant

Policy: The Office of the Chief Medical Examiner will accommodate Organ Procurement Organizations and cooperate with organ procurement and tissue removal procedures provided such activities do not interfere with the statutory obligations of this office and are not prohibited by law or other policies. After a family consents to organ or tissue donation, pathologists will cooperate with procurement organizations to obtain medical records and lend guidance to recovery of organs, tissue or specimens.

Protocol:

1. These are the procedures for handling cases that involve organ donation.
2. The Telecommunications or Investigations staff will inform the on-call pathologist whenever they are notified of a case involving the potential for organ or tissue donation. If the Office takes jurisdiction of the case:

1. The pathologist will identify restrictions which could interfere with determining the cause and manner of death;

1. The Organ Procurement Organization (OPO) will

a) inform the Office of the next-of-kin’s decision regarding donation and

b) advise Office about the approximate time the body will be available for pick-up.

c) provide information about what tissues / organs they seek to recover.

3. The Telecommunications staff shall enter into Case Manager all information provided as described in section A.1. and A. 2.a) & 2.b) & 2.c) at the time the information is received.

4. Investigations staff will request medical records and a hold on blood samples.

B. When the report is of a Brain Death anticipating a death, the Telecommunications staff:

1. will assign a case number in Case Manager and instruct the caller to contact OCME after the patient expires.

2. classify the case as “Clinical Case, non-deceased.”

3. proceed as described in section I. A. (above).

4. when OCME is notified that the remains are ready for transport, reclassify the disposition to OCME case and alert the Forensic Technicians regarding a pick-up.

1. Once the OPO obtains consent for donation, OCME staff cooperates by delaying retrieval of the body until recovery is completed. However, OCME staff will not delay retrieval if the OPO’s actions are pending locating/communicating with family to obtain consent.

D. When the OPO is following a decedent for donation but the body is already en route or at OCME the OCME will retrieve blood for the OPO and refrain from drawing vitreous fluid. The OPO can then recover tissues/eyes following the autopsy examination. In cases such as this the body is put on HOLD until the OPO has notified OCME of their outcome (consent obtained, case released).

1. a notation is made in the CaseManagement System that recovery will occur following autopsy.

2. the case information is highlighted in red on the CaseLog Excel Spreadsheet, indicating an OPO Hold.

3. a red slip of paper is placed in the paper chart to remind staff that the body cannot be released to a funeral home until donation is complete.

E. When an Organ Procurement Organization requests an organ/tissue recovery be done at the OCME facility although the Office is not taking jurisdiction of the death:

1. the Telecommunications staff will assign a case number in Case Manager;

2. the disposition of the case will be “Clinical Consult, deceased”;

3. the usual procedures are used to check-in and check-out the body (use OCME Form ME-12 and enter information into Case Manager);

4. the designated organ recovery room or the autopsy suite is reserved for the procedure.

F. OCME CaseManager System sends automated notifications to New England Donor Services (NEDS) about deaths that occur outside of hospital.

1. The notification is sent once the body is logged into the morgue section of CaseManager.

2. All of the information contained in the verbal report at the time of check-in is transmitted electronically to NEDS.

3. Representatives from NEDS may contact OCME to obtain telephone contact numbers for police officers or Next of Kin, in order to pursue consent for donation.

4. OCME staff can release this information for these purposes.

G. When the OCME staff is asked to retrieve blood for the Organ Procurement Organization for performing laboratory tests outside OCME, they will use the materials and methods designated by that Organization.

H. When the Organ Procurement Organization obtains specimens for toxicology testing at the OCME Toxicology Laboratory, they will use materials and methods provided by the Office and will comply with our chain-of-custody protocol including documentation.

1. The OPO will retain blood in two gray top tubes for OCME.

2. The OPO will collect a jar with all of the blood and clot at the time of heart removal.

3. The OPO will collect vitreous fluid in a red top tube.

4. All samples will be labeled with patient’s name and OCME case number and kept refrigerated with the body until the time of examination by the pathologist.

I. If OCME declines jurisdiction and recovery is not done at this facility, the agency has no further role in the Organ Procurement Organizations’ recovery procedures.

II. Employees of the Office of the Chief Medical Examiner accept no compensation from Organ Procurement Organizations for professional services rendered, materials used, facilities used, or any other service or supply connected with the recovery.

III. Employees of the Office of the Chief Medical Examiner will not solicit organ or tissue donation from next of kin, but will provide as much assistance as practicable if the next of kin expresses a desire to donate.