CRITICAL ACCESS HOSPITALS

ORGAN, TISSUE AND EYE PROCUREMENT

Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments
Note: See also 194.233, RSMo Anatomical gifts.					
If the hospital has a written agreement with an organ procurement organization does the agreement: a. addresses the criteria for referral, including the referral of all individuals whose death is imminent or who have died in the hospital?	❏	❏	❏		
b. includes a definition of "imminent death?"	❏	❏	❏		
c. includes a definition of "timely notification?"	❏	❏	❏		
d. addresses the OPO's responsibility to determine medical suitability for organ donation?	❏	❏	❏		
e. specifies how the tissue and/or eye bank will be notified about potential donors to include notification protocols developed by the OPO in consultation with tissue and eye bank?	❏	❏	❏		
f. provides for notification of each individual death in a timely manner to the OPO (or designated third-party) in accordance with the terms of the agreement?	❏	❏	❏		
g. ensures that the designated requestor training program offered by the OPO has been developed in cooperation with the tissue bank and eye bank designated by the hospital?	❏	❏	❏		
h. permits the OPO, tissue bank, and eye bank access to the hospital's death record information according to a designated schedule, i.e., monthly or quarterly?	❏	❏	❏		
i. includes a statement that the hospital is not required to perform credential reviews for, or grant privileges to, members of organ recovery teams as long as the OPO only sends "qualified, trained individuals" to perform organ recovery?	❏	❏	❏		
j. includes the interventions the hospital will utilize to maintain potential organ donor patients so that the patient organs remain viable?	❏	❏	❏		
Are there policies and records that prove the hospital works with the OPO, tissue bank and eye bank in reviewing death records?	❏	❏	❏		
Do you have a process to ensure confidentiality throughout the death, donating and record review process?	❏	❏	❏		
Do death records document that:					

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a. the hospital has implemented its organ procurement policies?	❏	❏	❏		
b. the OPO screened for medical suitability, in order to select potential donors?	❏	❏	❏		
c. the family of each potential donor was informed of organ, tissue and eye donation options, including the option to decline to donate?	❏	❏	❏		
d. a designated requestor or an organizational representative of a tissue or eye bank initiated the donor request to the family?	❏	❏	❏		
e. all potential donor families were approached about donating, despite circumstances, views and beliefs?	❏	❏	❏		
Does the CAH notify the OPO of every death or imminent death in the CAH?	❏	❏	❏		
When death is imminent, does the CAH notify the OPO both before a potential donor is removed from a ventilator and while the potential donor's organs are still viable?	❏	❏	❏		
Does the definition of 'imminent death' include specific triggers for notifying the OPO about an imminent death?	❏	❏	❏		
Does the definition of 'imminent death' strike a balance between the needs of the OPO and the needs of the CAH's caregivers to continue treatment of a patient until brain death is declared or the patient's family has made the decision to withdraw supportive measures?	❏	❏	❏		
Does the CAH avoid using 'batch reporting' for deaths by providing the OPO with periodic lists of patient deaths, even if instructed to do so by the OPO?	❏	❏	❏		
Whenever possible, is the referral made early enough to allow the OPO to assess the patient's suitability for organ donation before brain death is declared and before the option of organ donation is presented to the family of the potential donor?	❏	❏	❏		
If the patient dies during a transfer does the receiving CAH notify the OPO?	❏	❏	❏		
If the OPO agreement does not include retrieval of eye and tissue, does the facility have at least one agreement with at least one tissue bank and at least one eye bank to cooperate in the retrieval,	❏	❏	❏		

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processing, preservation, storage and distribution of tissues and eyes are obtained from potential donors, insofar as such as agreement does not interfere with organ procurement?					
Are staff aware of the hospital's policies and procedures for organ, tissue and eye procurement?	❏	❏	❏		
Are appropriate hospital staff, including all patient care staff, trained on donation issues including: a. the consent process? b. importance of using discretion and sensitivity? c. role of the designated requestor? d. transplantation and donation including pediatrics if appropriate? e. QI activities and the role of OPOs? f. role of the organ procurement organization?	❏ ❏ ❏ ❏ ❏ ❏	❏ ❏ ❏ ❏ ❏ ❏	❏ ❏ ❏ ❏ ❏ ❏		
Is this training provided annually for new employees, with policy/procedure changes or when problems are determined through the hospital QA/PI program?	❏	❏	❏		
Have all designated requestors completed an OPO approved training course?	❏	❏	❏		
Is there documentation about the designated requestors' training?	❏	❏	❏		
Does your hospital have a process that ensures that only designated requestors and organizational representatives are approaching families about organ donations?	❏	❏	❏		
Do you have policies and procedures for working with the OPO to review death records to improve the identification of potential donors?	❏	❏	❏		
Is the effectiveness of these policies and procedures monitored as part of the QA/PI program?	❏	❏	❏		
Do you have policies and procedures to ensure the coordination between facility staff and OPO staff in maintaining the potential donor?	❏	❏	❏		
Is the organ, tissue and eye donation program integrated in the hospital's QA/PI program?	❏	❏	❏		
Does your QA/PI program monitor the effectiveness of protocols and policies?	❏	❏	❏		

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Self-Assessment Questions	**YES**	**NO**	**N/A**	**Date/Initials**	**Comments**
Does your QA/PI program have a mechanism in place to ensure that the families of all potential donors are informed of their options?	❏	❏	❏		
Does your hospital have written policies and procedures addressing organ procurement responsibilities?	❏	❏	❏		

Helpful Hints

Key Resources and Links
- COP §485.643