# **Overview of Donation and Transplantation in BC**

#### **BC Transplant**

## Vision: All British Columbians eligible for a transplant will receive one.

- Is responsible for all organ donation in the province of BC, and directs, delivers or contracts for all organ transplant services across BC
- Is funded through the BC Ministry of Health Services, and is an agency of Provincial Health Services Authority (PHSA)
- Follows the legal framework of the Human Tissue Gift Act (Provincial), Consent to Donation Regulations (Provincial), and Health Canada Regulations/CSA Standards (Federal)

#### **History of Solid Organ/Transplantation in BC**

- 1968 First renal transplant
- 1976 First living related kidney transplant
- 1985 BC Transplant Society created
- 1986 Retrieval Division created
- 1988 Heart Transplant Program established
- 1989 Lung, Pancreas and Liver Programs established
- 2001 First living related liver transplant
- 2002 First islet cell transplant
- 2007 First paired kidney exchange
- 2008 First Donation after Cardio-circulatory Death (DCD) donor

#### **Organs and Tissue Recovered in BC**

**BC Transplant** = Heart, Lungs, Liver, Pancreas (whole or islets), Kidneys **Eye Bank of BC** = Corneas, Sclera

# **Types of Organ and Tissue Donation in BC**

- Living Donation:
  - Related, unrelated and paired exchange = Kidneys
  - Related only = Liver
- Post Mortem Donation: 1) Solid Organs and Tissue
  - Donation after Neurological Determination of Death (NDD) = Heart, lungs, liver, pancreas (whole or islets), kidney, cornea
  - Donation after Cardio-circulatory Death (DCD) = Lungs, liver, kidney, pancreas for islets, cornea
- Post Mortem Donation: 2) Tissue Only
  - Donation after Death = Cornea



### **Organ Donation Process:**

- 1. Identification of potential donor by hospital personnel
- 2. Referral
- 3. Neurological Determination of Death (NDD) or WLST Declarations written (DCD)
- 4. Consent for organ donation
- 5. Donor/Patient screening and organ evaluation
- 6. Medical management of the Donor/Patient
- 7. Organ Allocation
- 8. DCD only WLST
- 9. DCD only Declarations of Death
- 10.Organ recovery surgery

Note: Throughout the process, BC Transplant will be providing the family and hospital with support

#### **BC Transplant Team Members**

#### Organ Donation Specialist (ODS)

- o Receive referrals from hospitals
- Support donor families through donation process obtain consent, complete Med/Social questionnaire with families
- Assist ICU team with managing potential donors
- Allocate organs
- Coordinate all aspects of donation until OR is scheduled and case is passed over to SRS
- Post case support of hospitals and families

#### Surgical Recovery Specialist (SRS)

- o Coordinate the surgical recovery of solid organs for transplantation
- Support healthcare providers through the surgical recovery process
- Coordinate the preservation, packaging, and labelling of organs as they are recovered and transported to recipient hospitals
- Support donor families through the surgical recovery process
- Post case support of hospitals and families

### Organ Donation Practitioners (ODP)

Trained as both ODS and SRS – able to take call for either role

#### In Hospital Coordinators (IHC)

 Responsible for the education and policy development within their assigned hospital/health region



Also take call as ODS

#### Organ Recovery Assistant (ORA)

- Assist the SRS during organ recovery surgery
- o Provide teaching and support to OR staff
- Responsible for the perfusion and packaging of organs within the sterile field

## **BCT Quality and Training Requirements**

 All BCT staff, directly responsible for organ retrieval and transplantation, are required to maintain competency in current legislature, regulations and standard operating procedures (SOPs) as related to organ donation and procurement processes.

