

This checklist outlines BC Transplant's information requirements for each stage of the organ donation process. It is intended to be used by healthcare providers as a reference.

Related Documents: BCT Rationale for Donor Management Provincial Guidelines

1. Identification and Referral

- Follow BC Transplant GIVE criteria for donor identification:
 - G:** Grave prognosis
 - I:** Intention to move towards comfort care
 - V:** Ventilated
 - E:** Eligibility and registration check with BCT prior to family meeting

- Call **1-877- DONOR- BC (366-6722)**, a BCT coordinator will call back as soon as possible to determine donation potential.

Initial Information BCT Coordinator Will Require:

- Patient's name, DOB, PHN
- Admission history, cause of death
- Medical history
- Hemodynamic status
- Neurological status
- Family information
- Has Neurological Determination of Death been established?
- Plan of care

2. Neurological Determination of Death (NDD)

Time of First NDD is the legal time of death

- Two confirmations of NDD completed and signed
 - Completed by two licensed physicians. Declaration form found on [BCT Website](#)
 - Please fax completed declarations to BCT

3. Consent for Organ Donation

- Ensure BCT has family contact information, BCT will arrange a time to speak with family
- Consent form (completed by BCT coordinator)
- Pastoral care or Social worker referral for donor family, if appropriate
- If a Coroner's case, Coroner notified by physician. Provide Coroner name and number for ODHD.

4. Donor Screening, Maintenance and Organ Evaluation (Review requirements with BCT)

- Draw Red Blood Box (this can be done prior to written consent if verbal consent obtained from family)
 - Label vials and arrange for blood to be sent to Vancouver General Hospital for tissue typing and serology testing. Complete labels with date and same time on each vial.
 - BCT will require the volume/type of IV crystalloid infused one hour prior to the blood draw AND the volume/type of Blood/Colloid infusions 48 hours prior to the blood draw
- * NOTE: For Pediatric donors, consult with ODHD prior to sending blood requirements (May also require maternal blood).
- Follow Organ Donor Management (BCT coordinator will review guidelines with MD, RN and RT)
 - Eye care for cornea donors (consult with Eye Bank of BC, phone # 1-800-667-2060)

The BCT Coordinator Will:

- Monitor all lab results/cultures/urinalysis via Care Connect
- Contact the bedside RN approx. Q6H to obtain VS, ventilator settings, fluid status, medication administration, urine output and general updates
- Obtain requested diagnostic results/reports from Care Connect (if difficulties obtaining, may require these to be faxed)
- Discuss need for further diagnostic requests from transplant programs
- Require medication start times and dosing for all BCT medications initiated
- Be available for questions/support 24/7

Forms BCT Coordinator Will Require:

Copies of the following to be faxed to (604) 708-2129 once completed:

- Signed confirmation of Neurological Determination of Death Declarations X 2 (*Current version downloaded from BCT Website → under [Health Professionals](#) → [Neurological Determination of Death](#))*)
- Recent EHS and ER report, 12 lead ECG, ICU consult/admission note
- Signed BCT Physical Assessment Form**
(*Current version downloaded from BCT Website → under [Health Professionals](#) → [Forms](#)*)
- Completed and signed Bronchoscopy for Organ Donation form (if bronchoscopy requested by BCT;
(*Current version downloaded from BCT Website → under [Health Professionals](#) → [Forms](#)*)

****Height should be measured with no pillows and lying flat (as tolerated). Measure from crown of head to bottom of heel along patient's side. Should be done with two people to ensure accuracy. Lungs are allocated according to size, therefore important to have accurate height. If dry admission weight not available, take patient weight without any pillows/blankets on the bed.**

5. OR Prep Checklist

- OR timing (BCT Coordinator will arrange and provide this information)
- Hold feeds 8 hours prior to scheduled OR time
- Patient labels printed and with chart
- Chart in order and complete, ready to accompany patient to the OR
- Once OR ready, OR team will arrive in ICU to pick up patient for organ recovery

6. Family Follow up

- If requested by family, BCT coordinator will update family following the completion of organ recovery

7. Staff Follow up

- Post case follow up / debriefing requested by hospital staff: Please inform BCT Coordinator

Additional Information:

Please contact the BCT Coordinator with any questions or concerns during or after the case.