

Abdominal Perfusion

*This Management Process Description replaces
MPD889/2.1*

Copy Number

Effective 01/09/15

Summary of Significant Changes

Document streamlined entirely and brought into line with the National Standards for Organ Donation.

No shading - train to entire document.

Flowchart of process added into document and all associated INFs deleted: INF940, INF941, INF942, INF943, INF944, INF945, INF946

Policy

Specialist Nurses in Organ Donation (SNODs) working for NHS Blood and Transplant (NHSBT) will, at times, facilitate abdominal perfusion in theatre during the organ retrieval operation. This function supports the abdominal National Organ Retrieval Service (NORS) in ensuring the safe and efficient retrieval of organs for transplantation

Purpose

To provide the SNOD with the appropriate information and guidance in abdominal perfusion.

Responsibilities

Specialist Nurse in Organ Donation

To work to this MPD in undertaking abdominal perfusion during the organ retrieval process, under the advice and guidance of the Lead Abdominal Retrieval Surgeon from NORS.

To seek immediate advice and guidance where required, from a Team Manager (TM) or Regional Manager (RM).

Applicable Documents

[MPD385](#) – Good Documentation Practice

[MPD885](#) – In Theatre Support

[MPD1043](#) - National Standards for Organ Retrieval from Deceased Donors

[MPD884](#) - Organising Solid Organ Retrieval

Abdominal Perfusion

1. INTRODUCTION

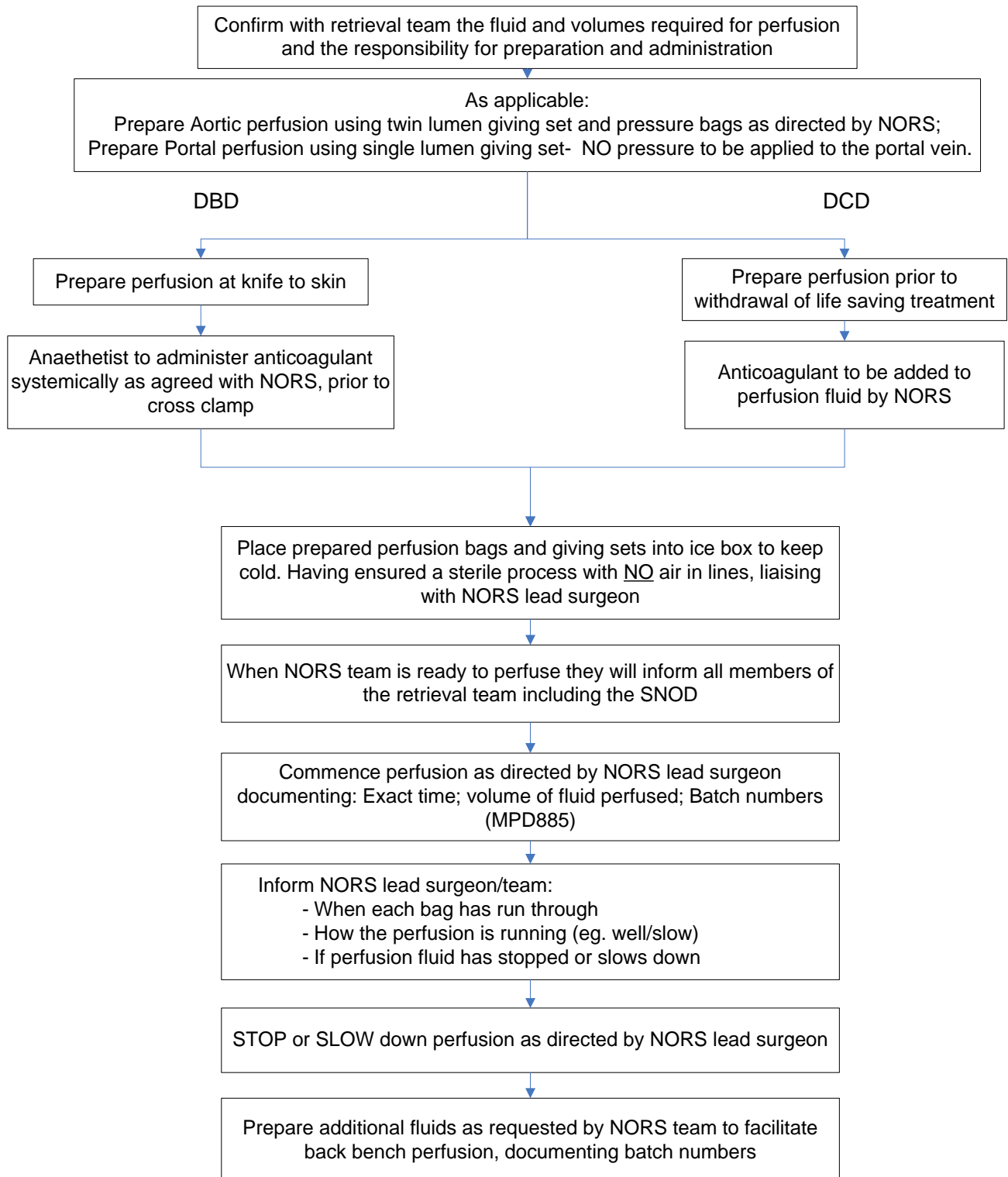
- 1.1. Abdominal perfusion is the process of perfusing organs with preservation solutions, as directed by the lead abdominal retrieval surgeon during the organ retrieval operation. It involves perfusing the organs firstly *in-situ* and, after they have been removed from the body, perfusing them again on the 'back bench'.
- 1.2. Different perfusion fluids are used dependent upon the form of donation that is occurring (Donation following Brain Death (DBD) or Donation following Circulatory Death (DCD)), and on which organs are being retrieved or whether a paediatric donor. This outlines the role of the SNOD in abdominal perfusion during the organ retrieval operation.
- 1.3. The SNOD works under the advice and guidance of a registered medical practitioner. In the case of NHS Blood and Transplant, this is the Associate Medical Director – ODT or nominee. When involved in organ perfusion, the SNOD will also work under the advice of the lead abdominal retrieval surgeon.

2. NORS

- 2.1. The NORS team must include, as a minimum, a lead abdominal retrieval surgeon, an assistant surgeon and a scrub practitioner ([MPD1043](#)). Where the minimum staff are in attendance the SNOD is responsible for undertaking abdominal perfusion.
- 2.2. Some NORS teams may also provide a perfusionist to undertake abdominal perfusion. In these instances the SNOD will not need to perform abdominal perfusion.
- 2.3. The SNOD should confirm the members of the team when speaking with the NORS contact when requesting their attendance. ([MPD884](#)).

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3 Abdominal Perfusion flow chart



NOTE Equipment provided by NORS
 If pressurisation of fluids is requested by NORS-200mmHg is the recommended amount (MPD1043)
 SNOD performing perfusion must record batch numbers, fluid perfused and volume on to HTA forms