

STANDARD OPERATING PROCEDURE SOP3925/3.2

Manual Organ Donation Process for a Potential Organ and/or Tissue Donor in the event of DonorPath/IT network unavailability

This SOP replaces

SOP3925/3.1

Copy Number

Effective

17/02/17

Summary of Significant Changes

In the case of DonorPath unavailability EOS can be used in the first instance (if available) to submit the Core Donor Data. FRM4211 (Patient Assessment) will need to be faxed or emailed to the duty office.

Purpose

To guide the SN-OD in the process of registering a potential organ donor with NHSBT Duty Office when DonorPath is unavailable.

Responsibilities

Specialist Nurse – Organ Donation (SN-OD) – to follow the guidance in this SOP to ensure that all relevant data is transmitted to the Duty Office to allow the registration of a potential donor, whilst minimising the of transferring Patient Identifiable Data (PID)

Administration Team – to be aware that DonorPath is unavailable and facilitate necessary administration tasks as directed by the SN-OD/TM/RM

Definitions

DonorPath

The secure electronic system that SN-ODs utilise to upload clinical information about the patient. Data is shared with EOS (Electronic Offering System) which can be accessed by the RCPoCs, so decisions can be made on whether to accept organs for transplant.

National Transplant Database (NTxD)

Includes details of all donors and patients who are waiting for, or who have received, a transplant.

ODR (Organ Donor Register)

The NHS Organ Donor Register is a confidential, computerised database recording people's legal wishes in respect to organ donation.

PID (Person Identifiable Data)

Any data that can identify an individual that can be sensitive in nature.

Items Required

[FRM4193](#) – Core Donor Data - SNOD (Used as EOS back-up)

[FRM4211](#) – Patient Assessment Form (PA1)

[FMR4212](#) – Organ Donation Clinical Pathway

[FRM4039](#) – NHSBT Referral for Coroner/Procurator Fiscal

[FRM4228](#) – Potential Donor Referral

[FRM4156](#) – Organ Retrieval Information

[FRM4135](#) – NHSBT Surgical Safety Checklist

[FRM4131](#) - DCD Observation Chart

[FRM4153](#) - Proceeding and Non Proceeding Donors after Cardiac Death

Fax Machine

[SOP3649](#) – Telephone recording of organ donation clinical conversations

[MPD886](#) – Collection, Labelling and Packaging of Organs and Samples

[MPD888](#) – Access to the Organ Donor Register

[MPD884](#) – Organising Solid Organ Retrieval

[MPD910](#) – Medical Records Entries

[MPD885](#) – In Theatre Support

[POL162](#) – Donor Characterisation

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STEP	DETAILS	INFORMATION		
<p style="text-align: center;">Note:</p> <p>If DonorPath / IT networks are down, this means that networked printers and faxes may also be unavailable (e.g. ODST Regional Office Faxes and Printers).</p> <p>In this instance SN-ODs must ensure that they communicate referral/donor activity to their ODST Regional Office verbally (via telephone).</p> <p>In these instances voice recording must be used as evidence of action in addition to documenting action to the donor file (please refer to SOP3649 for detailed guidance).</p>				
<p>SN-OD – Confirming DonorPath &/or ODR Check availability</p>				
<p>1. Confirm that DonorPath (iPad & Web versions) &/or ODR checking is unavailable</p>	<p>1.1. Confirm with TM/RM that DonorPath &/or ODR checking is unavailable</p> <p>OR</p> <p>1.2. If TM/RM unavailable confirm with Duty Office that DonorPath &/or ODR checking is unavailable</p>	<p>DonorPath may become unavailable at any time during the on call period, therefore regional TM/RM may not be available out of hours and the Duty Office should be contacted in the first instance.</p>		
<p>2. Are you able to check ODR Registration online?</p>	<table border="1" style="width: 100%; text-align: center;"> <tr> <td data-bbox="614 994 833 1137"> <p>No</p> <p>↓</p> <p>3</p> </td> <td data-bbox="833 994 1053 1137"> <p>Yes</p> <p>↓</p> <p>4</p> </td> </tr> </table>	<p>No</p> <p>↓</p> <p>3</p>	<p>Yes</p> <p>↓</p> <p>4</p>	
<p>No</p> <p>↓</p> <p>3</p>	<p>Yes</p> <p>↓</p> <p>4</p>			
<p>3. Request ODR Registration check.</p>	<p>3.1. Telephone Duty Office.</p> <p>3.2. Request ODR Registration Check.</p> <p>3.3. Provide required information, which includes:</p> <ul style="list-style-type: none"> • Patient Name • Date of Birth • NHS Number (if available) • Post Code of place of residence <p>3.4. If patient on ODR, request hard copy for faxing (where possible)</p>	<p>In the event that DonorPath is unavailable, other IT based systems may also be unavailable.</p> <p>If the ODR is unavailable for SN-ODs to check online then the responsibility falls to the Duty Office staff, who will already have increased workloads. In this event and to prevent additional work, best practice would indicate that obtaining a hard copy of the ODR registration will help both the SN-OD and the Duty Office staff, by minimising multiple requests.</p>		

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SN-OD – Registering Potential Donor (requesting ODT Donor Number)		
<p>4. Following consent/authorisation, if EOS is available the Core Donor Data (FRM4193) can be entered there and a donor number will be generated. If EOS is unavailable provide verbal Person Identifiable Data (PID) to the Duty Office via telephone conversation to generate ODT donor record number.</p>	<p>4.1. If EOS is unavailable following consent/authorisation, telephone the Duty Office to provide mandatory donor details which include:</p> <ul style="list-style-type: none"> • Patient Name • Date of Birth • Donor Hospital • Blood Group (if available) <p>4.2. Receive ODT Number from Duty Office staff</p>	
<p>5. If EOS is unavailable complete FRM4193 (Core Donor Data Form) and FRM4211 (Patient Assessment) both without PID. Regardless of EOS availability the FRM4211 (Patient Assessment) will need to be faxed / emailed to the Duty Office</p>	<p>5.1. Complete FRM4193 and FRM4211 without entering in PID, which includes:</p> <ul style="list-style-type: none"> • Patient Name • Date of birth • Date of death • Cause of death • NHS/CHI number <p>5.2. Ensure all other relevant clinical information is completed on FRM4193 and FRM4211 prior to contacting the Duty Office</p>	
<p>6. Contact the Duty Office to inform them of incoming fax or email</p>	<p>6.1. Telephone the Duty Office.</p> <p>6.2. Confirm ODT number of potential organ donor</p> <p>6.3. If faxing confirm the correct fax number.</p> <p>6.4. If emailing confirm the correct email address</p>	<p>Duty Office fax machine. (01179 757599)</p> <p>Email - duty.office@nhsbt.nhs.uk</p>




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STEP	DETAILS	INFORMATION
7. Fax FRM4193 and FRM4211 to the Duty Office or email using the Genius Scan App	<p>7.1. Ensure that a cover sheet marked Private and Confidential with the number of sheets being faxed precedes FRM4193 and FRM4211</p> <p>7.2. Fax FRM4193 and FRM4211 to Duty Office fax machine. (01179 757599)</p> <p>7.3. In not faxing, email FRM4193 and FRM4211 to duty.office@nhsbt.nhs.uk</p>	FRM4193 and FRM4211 (plus any continuation sheet for free text) is the only paperwork that is to be faxed to the Duty Office to register a patient as a potential organ donor. Any other paperwork that is used for data collection purposes must not be faxed, and is kept for local donor records only .
8. Confirm receipt of the fax or email with the Duty Office	<p>8.1. Telephone the Duty Office</p> <p>8.2. Confirm that a fax or email has been received with the same ODT number.</p> <p>8.3. Confirm the number of pages received.</p>	
9. Confirm mandatory information with Duty Office	<p>9.1. Confirm blood group of patient with Duty Office</p> <p>9.2. Confirm height of patient in centimetres with Duty Office</p> <p>9.3. Confirm height of patient in inches with Duty Office</p>	
10. Provide remaining Person Identifiable Data to Duty Office	<p>10.1. Confirm any additional Person Identifiable Data to Duty Office, which includes:</p> <ul style="list-style-type: none"> • Date of birth • Date of death • Cause of death • NHS/CHI number 	







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STEP	DETAILS	INFORMATION
11. Confirm with the Duty Office that data from FRM4193 and FRM4211 has been submitted to NTxD	11.1. If Possible SN-OD should access EOS or EOS Mobile to review the core donor data and patient assessment PDFs 11.2. If unable to access EOS or EOS Mobile request that duty office fax or email a PDF of core donor data and patient assessment to SN-OD 11.3. Following review the SN-OD should confirm with the duty office by telephone that the data is accurate and complete	
SN-OD – Offering Organs		
12. Are you ready to begin offering sequence?	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <p>No</p> <p>13</p>  </div> <div style="text-align: center;"> <p>Yes</p> <p>14</p>  </div> </div>	
13. Continue with donor process until ready	13.1. Inform Duty Office not ready to begin offering sequence 13.2. Continue with donor process as required in preparation for organ offering <div style="text-align: center;">  <p>12</p> </div>	Please refer to POL162 and associated procedural documentation for detail on ensuring complete donor characterisation and MPD884 for further guidance on arranging solid organ retrieval and offering
14. Agree responsibility for offering	14.1. Confirm readiness with Duty Office to begin offering organs 14.2. Agree responsibility for offering specific organs to RCPoCs. 14.3. Document agreed responsibilities for donor documentation. 14.4. Sign, date and time the entry.	If EOS or EOS Mobile is unavailable, there will be additional requirements placed upon the Duty Office. Therefore, the national agreement for offering organs may need to be altered and the SN-OD may be required to offer more organs than usual. This decision must be agreed and clear areas of responsibility agreed between the SN-OD and the Duty Office.








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STEP	DETAILS	INFORMATION				
15. Confirm offering sequence	15.1. Confirm offering sequence for each organ 15.2. Document offering sequence utilising donor documentation/ FRM4212 Organ Donation Clinical Pathway	FRM4212 Organ Donation Clinical Pathway can be used to document the offering sequence for the majority of organs.				
16. Are the RCPoCs able to access EOS or EOS Mobile?	<table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 50%;">Yes</td> <td style="width: 50%;">No</td> </tr> <tr> <td></td> <td></td> </tr> </table>	Yes	No			
Yes	No					
						
17. Offer Organs to Recipient Centres	17.1. Commence offering organs in sequence provided by Duty Office. 17.2. Telephone RCPoCs sequentially. 17.3. Use voice recording system as evidence of action. 17.4. Explain to the RCPoC(s) that EOS is unavailable for NHSBT staff only . 17.5. Provide RCPoC(s) with ODT number, case and hospital IDs 17.6. Await decision from RCPoC. 17.7. Proceed with offering of organs until all centres declined or organ is accepted.	Please refer to MPD884 Organising Solid Organ Retrieval for detailed guidance on offering organs. Refer to SOP3649 for guidance on how to utilise telephone recording system for organ donation clinical conversations.				

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STEP	DETAILS	INFORMATION				
18. Offer organs to Recipient Centres	18.1. Commence offering organs in sequence provided by Duty Office. 18.2. Telephone RCPoCs sequentially. 18.3. Use voice recording system as evidence of action. 18.4. Explain to RCPoC that EOS is unavailable. 18.5. Request that a verbal offer be taken. 18.6. Provide clinical offer to RCPoC. 18.7. Await decision from RCPoC. 18.8. Proceed with ongoing offering of organs until all centres declined or organ is accepted.	Please refer to MPD884 Organising Solid Organ Retrieval for detailed guidance on offering organs. Refer to SOP3649 for guidance on how to utilise telephone recording system for organ donation clinical conversations.				
19. Have organs been accepted for transplantation	<table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 50%;">No</td> <td style="width: 50%;">Yes</td> </tr> <tr> <td> 20</td> <td> 21</td> </tr> </table>	No	Yes	 20	 21	
No	Yes					
 20	 21					
20. Inform Duty Office and stand organ donation process down	20.1. Telephone Duty Office. 20.2. Confirm ODT number. 20.3. Provide reasons that organs have not been accepted for transplantation. 20.4. Confirm if patient to donate tissue/eye tissue. 20.5. Complete donation process. 	Please refer to MPD910 for detail on content of medical records entry for non proceeding donation. Please refer to MPD910 for detailed guidance on relevant paperwork to complete if patient is to donate tissue/eye tissue.				

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STEP	DETAILS	INFORMATION
21. Proceed with organ donation process	21.1. Telephone Duty Office 21.2. Confirm ODT number 21.3. Provide confirmation of Recipient Centres that have accepted organs for transplantation. 21.4. Confirm if patient is to donate tissue/eye tissue. 21.5. Proceed with organ donation process.	

SN-OD – Providing Donor Characterisation Information to Recipient Centres

NOTE: When photocopying FRM4193 to accompany an organ to a Recipient Centre all PID must be removed		
22. Can the RCPoC(s) access EOS?	No  23	Yes  24
23. Prepare donor characterisation documentation to accompany organ	23.1. Photocopy FRM4193 to ensure that a copy of the form accompanies each organ. 23.2. Ensure that all PID has been removed from the photocopies, which includes: <ul style="list-style-type: none"> • Patient Name • Date of birth • Hospital number • Post Code • NHS/CHI number 23.3. Ensure that a copy of FRM4193 accompanies each organ .	FRM4193 (plus any continuation sheet for free text) is the only paperwork that is to accompany an organ that describes donor characterisation. Any other paperwork that is used for data collection purposes should not accompany the organ, and must be kept for local donor records only . Copies of FRM4193 must be given to NORS team personnel for organs being transported by NORS teams. Please refer to MPD885 Collection, Labelling and Packaging of Organs and Samples for detailed guidance on other mandatory paperwork required to accompany an organ for transplantation.

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24. Prepare documentation to accompany organs to recipient centres	24.1. Complete mandatory documentation. 24.2. Liaise with NORS retrieval team to complete mandatory organ characterisation documentation.	Please refer to MPD886 for detailed guidance on required documentation to accompany organs for transplantation.
25. Continue with donor process	25.1. Continue with mandatory actions to complete the organ donation process. 25.2. Document actions for the donor record. 25.3. Sign, date and time the entries. <div style="text-align: center;"></div>	Please refer to MPD885 for detailed guidance on actions to take to support the donor process in theatre. Please refer to MPD910 for detailed guidance on Medical Notes Entries for proceeding organ and/or tissue donation.
Additional Paperwork		
26. In addition to FRM4193 (core donor data) and FRM4211 (patient assessment) the following forms are routinely completed in DonorPath and will need to be completed on paper if DonorPath is unavailable: <ul style="list-style-type: none"> - FRM4228 – Potential Donor Referral - FRM4039 – Coroner / Procurator Fiscal Referral - FRM4212 – Organ Donation Clinical Pathway - FRM4156 – Organ Retrieval Information - FRM4135 – Surgical Safety Checklist - FRM4153 - (DCD only) Proceeding and Non-proceeding DCD information) - FRM4131 - (DCD only) DCD observations chart 	26.1. Information already submitted to DonorPath prior to it becoming unavailable will already be stored and does not need to be duplicated on paper 26.2. Data not submitted to DonorPath should be completed on the appropriate forms 26.3. It is the responsibility of the SN-OD completing the paper form to input it to DonorPath once the system is available post-donation 26.4. Paper forms completed at the time of donation should be scanned &/or stored in the donor file	SN ODs should utilise the emergency back up donor packs supplied by Donor Records Department in this instance.