

Policy

Organ donation is a complex process that requires detailed accounts of communication to provide confirmation that consent / authorisation has been ascertained within the legal frameworks across the UK. It is essential that the Specialist Nurse Organ Donation (SNOD) documents their actions within the process and a standard medical records entry template ([INF963/INF964/INF966](#) or [LET240/LET241/LET242](#) (Scotland only)) should be used by the SNOD when documenting in the patient's medical records to capture the pertinent points in the donation process. Clear and accurate documentation helps in communicating significant events in the donation process and maintains open lines of communication to help ensure the safety and quality of organs for transplantation.

Objective

To provide the Specialist Nurse Organ Donation (SNOD)/Specialist Requester(SR)/Family Care(FC) Nurse with guidance on the information to be documented in the patient's medical records.

Changes in this version

Guidance added for evidential documentation.

Roles

- **SNOD/SR/FC** – to provide a summary of events in the patient's medical record detailing the consent / authorisation conversation and the donation process.
- **Team Manager / Regional Manager** – to provide support and advice to the SNOD, where required.

Items Required

- Access to Genius Scan
- Access to DonorPath

1. Proceeding Organ and / or Tissue Donation Medical Record Entry

- 1.1. The SNOD should utilise INF963 or LET242 (Scotland) for guidance when documenting in the patient's medical record for a proceeding organ and / or tissue donor.
- 1.2. Following formal consent / authorisation, a copy of the Consent / Authorisation form (FRM4281 / FRM1538) must be filed in the patient's medical record.
- 1.3. If any previously unknown, relevant past medical, social, behavioural or travel history is identified during the Donor Characterisation process, the SNOD must document this in the patient's medical record.
- 1.4. The SNOD must document the details of communication with other health care professionals who have provided information or advice as part of the characterisation process.
- 1.5. If the patient is referred to the Coroner / Procurator Fiscal, the SNOD must document in the patient's medical record the details of the referral and the subsequent outcome, including detail of any restrictions placed on donation.
- 1.6. The SNOD must document any planned referral for tissue donation to the National Referral Centre (NRC) or the Scottish National Blood Transfusion Service (SNBTS).

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- 1.7. The SNOD must document any specific requests from the family in relation to end of life care for the patient, including items to be kept with the patient, any clothes to be dressed in post donation, or keepsakes such as prints and/or hair locks.
 - 1.8. The SNOD must document any arrangements that have been agreed with the family for further contact and communication.
 - 1.9. The SNOD must ensure that an entry is made for the attention of the pathologist at the end of the medical record entry. This is to request that if a post mortem examination is performed, that the Pathologist immediately contact [Hub Operations](#) should they identify any pathology that is, or may be, relevant for the health or future health of the transplant recipient(s) and / or the patient's family.
 - 1.10. A copy of the medical record entry must be photocopied for the donor file

2. Non Proceeding Organ Donation Medical Record Entry

- 2.1. The SNOD must ensure that a medical record entry is completed in the patient's medical record for a non-proceeding organ and / or tissue donor should utilise INF964 or LET241 (Scotland) for guidance.
- 2.2. Following formal consent / authorisation, a copy of the Consent / Authorisation form (FRM4281 / FRM1538) must be filed in the patient's medical record.
- 2.3. The SNOD must document the reason why donation could not proceed in the patient's medical record.
- 2.4. If any previously unknown, relevant past medical, social, behavioural or travel history is identified during the Donor Characterisation process prior to donation being stood down, the SNOD must document this in the patient's medical record.
- 2.5. The SNOD must document the details of communication with other health care professionals who have provided information or advice as part of the characterisation process.
- 2.6. The SNOD must confirm any additional family care and support provided following the decision not to proceed with organ and / or tissue donation.
- 2.7. The SNOD must document if a referral for tissue donation has been made to the NRC or SNBTS.
- 2.8. The SNOD must document any specific requests from the family in relation to end of life care for the patient, including items to be kept with the patient, any clothes to be dressed in, after they have died or keepsakes such as prints and/or hair locks.
- 2.9. The SNOD must document the arrangements that have been agreed with the family for further contact and communication.
- 2.10. The SNOD must ensure that an entry is made for the attention of the pathologist at the end of the medical record entry. This is to request that if a post mortem examination is performed, that the Pathologist immediately contact [Hub Operations](#) should they identify any pathology that is, or may be, relevant for the health or future health of the transplant recipient(s) and / or the patient's family.
- 2.11. A copy of the medical record entry must be photocopied for the non-proceeding donor file.

3. Family decline medical record entry

- 3.1. The SNOD must ensure that a medical record entry is completed for the patient's medical records if the family object to / decline donation and should utilise INF966 or LET240 (Scotland) for guidance.
- 3.2. The SNOD must outline the reason why the family objected to / declined the option of donation.
- 3.3. The SNOD must confirm any care / support provided to the family following the decision not to proceed with donation.
- 3.4. The SNOD must document any specific requests from the family in relation to end of life care for the patient, including items to be kept with the patient, any clothes to be dressed in, after they have died or keepsakes such as prints and/or hair locks.
- 3.5. The SNOD must document if arrangements have been agreed with the family for further contact and communication.
- 3.6. The SNOD must either attach the medical record entry to DonorPath or, ensuring 3 points of identification, photocopy the entry and post it to the Donor Records Department for scanning and attaching to DonorPath.

4. Evidential documentation

- 4.1. Information copied from the patient's / donor's hospital records should be done where the SNOD / SR feels a need for evidential documentation to be stored in the hard copy donor file and a copy uploaded to donor path. This would be to support characterisation already noted within donor path in regard to PMH, hospital admission, testing, microbiology etc. For example, a patient that had been reviewed for possible Cancer, details would be noted on donor path but the clinic notes / outcome of investigation may be stored as supportive evidence.
There is no requirement to copy medical notes that have been thoroughly reviewed and where by information is clearly documented within donor path.

Definitions

- **PID** – Person Identifiable Information

Related Documents / References

- [INF963](#) - ODT Medical Record Entry for Proceeding Organ and / or Tissue Donation
- [INF964](#) - ODT Medical Record Entry for Non Proceeding Organ Donation
- [INF966](#) - ODT Medical Record Entry - Family Decline
- [LET240](#) - Family Decline Medical Record Entry Scotland
- [LET241](#) - Non Proceeding Medical Record Entry Scotland
- [LET242](#) - Proceeding Medical Record Entry Scotland
- [FRM4281](#) – Consent - [for Organ and/or Tissue Donation](#)
- [FRM1538](#) - Authorisation – solid organ and tissue donation (Scotland)
- [Advisory Committee on the Safety of Blood, Tissues and Organs \(SaBTO\)](#) – SaBTO
- <http://www.legislation.gov.uk/ukpga/2004/30/contents> - HT Act
- <http://www.hta.gov.uk/legislationpoliciesandcodesofpractice/codesofpractice.cfm>
- <http://www.legislation.gov.uk/ukpga/2005/9/contents> - Human Tissue Authority Codes of Practice
- <http://www.legislation.gov.uk/asp/2006/4/contents> - HT Scotland Act
- <http://www.legislation.gov.uk/asp/2006/4/notes/contents> - HT Scotland Act (Explanatory Notes)
- <http://www.legislation.gov.uk/anaw/2013/5/contents/enacted>
- [http://www.hta.gov.uk/db/documents/HTA_CoP_on_Human_Transplantation_\(Wales\)_Act_2013_-_Final_-_May_2014.pdf](http://www.hta.gov.uk/db/documents/HTA_CoP_on_Human_Transplantation_(Wales)_Act_2013_-_Final_-_May_2014.pdf) - Codes of practice on the Human Transplantation (Wales) Act 2013
- <https://www.nmc.org.uk/standards/code/record-keeping> - Record keeping Guidance for Nurses and Midwives
- <http://nhsbtweb/userfiles/final%206%20IG%20proofs.pdf> - NHSBT Guidance on Handling Person Identifiable Information