
Policy

Organ Preservation Practitioners (OPPs) working as part of the National Organ Retrieval Service (NORS) cardiothoracic retrieval teams will facilitate cardiothoracic organ perfusion and preservation in theatre during the organ retrieval operation. This function supports the surgical team in ensuring the safe and efficient retrieval of organs for transplantation.

Objective

To provide the OPP with the appropriate information and guidance in cardiothoracic perfusion.

Changes in this version

Removal of references to INOAR.

Roles

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| <ul style="list-style-type: none">• Cardiothoracic Organ Preservation Practitioner - To work to this MPD in undertaking cardiothoracic organ perfusion and preservation during the organ retrieval/removal process, under the advice and guidance of the Lead Cardiothoracic Retrieval Surgeon from NORS. | <p>To work collaboratively with the Specialist Nurse for Organ Donation (SNOD) in ensuring that all organs, tissues and blood samples retrieved for transplant and other/scheduled purposes are correctly packaged and labelled for transportation.</p> |
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1. Introduction

- 1.1. Cardiothoracic organ perfusion and preservation is the process of perfusing organs with preservation solutions, as directed by the lead cardiothoracic retrieval surgeon during the organ retrieval/removal operation. It involves perfusing the organs firstly in-situ and if required after they have been removed from the body, perfusing them again on the 'back bench'. Perfusion will be performed on organs being retrieved for transplantation.
- 1.2. Packaging of the Organs and placement in the organ transport boxes are important components of organ preservation. Procurement of blood, vessels and tissue samples to support organ transplantation are an essential aspect in providing positive outcomes for transplant.
- 1.3. Different perfusion fluids are used depending on which organs are being retrieved and volumes will vary dependant on the size and weight of the donor. This outlines the role of the OPP in cardiothoracic organ perfusion and preservation during the organ retrieval/removal operation.
- 1.4. Organ perfusion and preservation is the responsibility of a registered medical practitioner. In the case of NORS, this is the nominated lead cardiothoracic retrieval surgeon. Therefore, when involved in organ perfusion and preservation, the OPP will work under the advice and direction of the lead cardiothoracic retrieval surgeon.

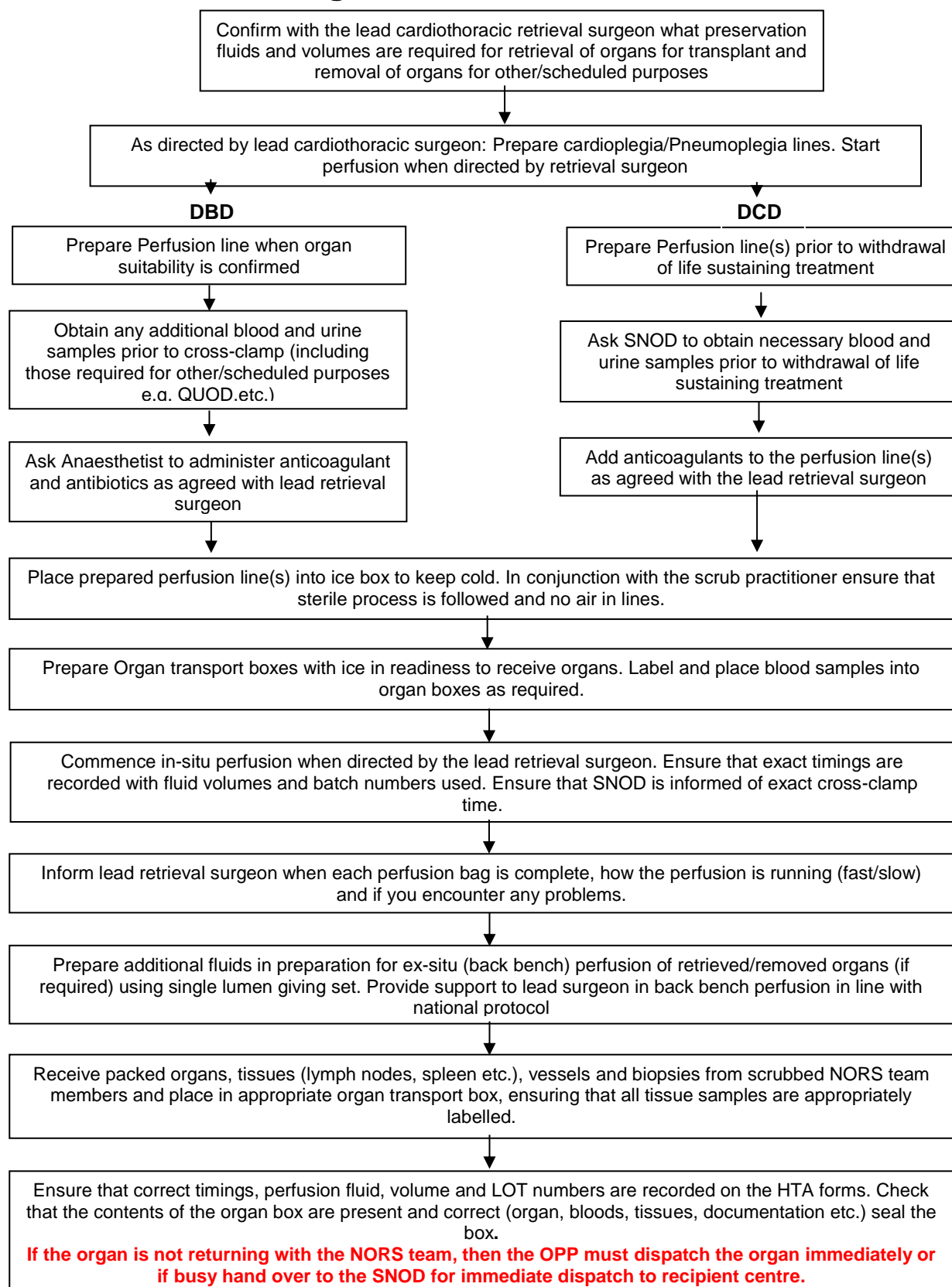
2. NORS

- 2.1. The NORS team should include the minimum roles, a lead cardiothoracic retrieval surgeon, a surgical assistant, scrub practitioner and organ preservation practitioner.
- 2.2. The NORS team is responsible for providing all equipment, consumables and pharmaceuticals required for organ perfusion and preservation of organs being retrieved for transplantation.
- 2.3. The SNOD is responsible for obtaining and labelling blood samples prior to theatre. The OPP is responsible for obtaining any additional bloods requested by the recipient centre. The OPP is responsible for obtaining tissue samples to support organ transplantation.
- 2.4. The NORS team OPP is responsible for completing the timings and perfusion section on the HTA-A form. The SNOD will complete the donor demographics.
- 2.5. The HTA-A form will accompany organs retrieved for transplant.
- 2.6. The NORS team OPP is responsible for the packaging, sealing and labelling of boxes containing organs for transplant ready for dispatch.
- 2.7. The NORS team OPP is responsible for the immediate dispatch of organs to recipient centres, if however, the OPP is still required in theatre this responsibility can be handed over to the SNOD.

3. Specialist Nurse in Organ Donation (SNOD)

- 3.1. The SNOD will maintain a presence in theatre to ensure continued co-ordination of the retrieval process.
- 3.2. The SNOD will record all essential timings on the white board in theatre visible for all team members to see.
- 3.3. The SNOD will ensure that the core donor information has been fully completed on DonorPath.
- 3.4. The SNOD will advise the organs to be retrieved for transplant at the donor handover.
- 3.5. The SNOD will complete the Donor demographic section on the HTA-A form.
- 3.6. The SNOD will ensure a copy of the donors' blood group form is provided for the OPP for organs being retrieved for transplant.
- 3.7. The SNOD is responsible for the completion of the Organ Handover Form (FRM4217).
- 3.8. The SNOD may be requested to dispatch the organs if the NORS OPP is still required in theatre.

4. Cardiothoracic Organ Perfusion and Preservation flow chart



Related Documents / References

- [MPD1043](#) - National Standards for Organ Retrieval from Deceased Donors
- [SOP5499](#) - Theatre Manual for Deceased Organ Donors
- [FRM4217](#) - Organ Handover Form