
Objective

All users of this Standard Operating Procedure must act in accordance with current legislative frameworks for consent/authorisation in place across all territories of the United Kingdom. The purpose of this document is to guide the ODS Team Manager (TM), Specialist Nurse Organ Donation (SNOD), Specialist Nurse Organ Donation Specialist Requester (SNOD SR), and Specialist Nurse Organ Donation Family Care (SNOD FC) when receiving a potential organ and/or tissue donor referral.

Changes in this version

Addition of step 5 regarding actions to take if an Opt-Out decision is recorded on the ODR.

Roles

- **TM/SNOD/SNODSR** - To answer the pager and document the potential donor's referral details on DonorPath – Please use [FRM4228](#) in the event that DonorPath is unavailable.
- To assess suitability of the referral as a potential organ donor.
- To make a plan with the referring staff on how the referral will or will not proceed.
- To capture all referrals on Donor Path

Restrictions

- N/A.

Items Required

- Donor Path App

Instructions

Pager Holder

1. Receive incoming page

- 1.1 Identify hospital that page is being received from.

2. Pager Holder to answer the pager within 20 minutes. For ODST's not operating with a Specialist Requester, contact resident SN-OD based at referring hospital if available to action the referral ensuring that response times are not delayed.

- 2.1 Respond to the pager via phone or in person. Confirm the following:
 - Your name & designation.
 - That the page is to refer a patient as a potential organ donor.
 - Name and designation of the person who made the referral.
 - Ensure when answering the pager, you are able to talk ensuring:
 - Health and Safety
 - Privacy
 - Confidentiality

3. Complete DonorPath/[FRM4228](#) whilst speaking to the HCP

- 3.1 Confirm that the medical practitioner (Consultant level) is aware of the referral. - The information provided on DonorPath may be used at a later date and must be clear for others to review if required.
- 3.2 Complete the assessment module of DonorPath.

4. Is this a potential organ donor?

- [If opted out on ODR go to Step 5](#)
- [If No go to Step 6](#)
- [If Yes go to Step 7](#)

- Refer to [POL188](#) - Absolute Contraindications to Donation for detailed guidance.
- Consider [SOP5003](#) – ODT Donor Assessment Form Guidance for SNODs
- Consider [SOP5058](#) – Organ Donation from Infants < 2 years old and [FRM5510](#) Infant Donor Assessment and Organ Screening

5. Is there an Opt-Out record on the ODR?

If there is an expressed decision on the ODR that the person did not want to be a donor, this SHOULD be communicated to the family by the SNOD/ SR or medical team. Each opt out referral is assessed on a case by case basis by the pager holder. Points for pager holder to consider:

- 5.1 If SNOD/ SR is onsite or nearby and donor activity allows, then a SNOD/SR could attend the referral
- 5.2 If no SNOD/ SR is nearby or very busy period of activity, the clinician contacts the pager holder to discuss the case, pager holder coaches the clinician in the discussion to have with the family and agree actions.
- 5.3 If the family so wish, they can speak to the pager holder / SNOD/ SR over the phone (whomever is most appropriate).
- 5.4 If it looks like there is further information of a more recent decision (family advise the potential donor had changed their mind on the opt out decision), a SNOD/ SR will attend to have a discussion with the family.

This approach will be kept under close review, with stop-checks at 6 months and 12 months.

6. Decline the referral and change the status on DonorPath to 'Non Proceeding' and provide a reason.

- 6.1 Give reasons to the HCP for not proceeding with organ donation. - [MPD888](#) – Access to the Organ Donor Register.
- 6.2 Give advice and relevant contact details for potential tissue donation (if appropriate). - [SOP3817](#) - Access for SN-ODs to the Organ Donor Register (ODR). - [SOP3925](#) - Manual Organ Donation. Process for a potential Organ and/or Tissue Donor in the event of Donor Path/IT network unavailability.
- 6.3 Ascertain patient's organ donation decision by accessing the ODR and Inform embedded SN-OD (if not already aware) of referral and complete EOS referral.
- 6.4 In the event of Donor Path Outage refer to [SOP3925](#).

→ ● [End of Procedure](#) ●

7. Accept the referral.

- 7.1 Accept and explain that donation is a possibility. - The decision to mobilise a SNOD SR/ SNOD or SNOD FC will be at the discretion of the TM and in line with [SOP5495](#) considering geographical location, training needs and exposure.
- 7.2 Determine who will attend the referral.
- 7.3 Mobilise attending SNOD SR/SN-OD/SNOD FC.

Pager Holder/Attending SNOD/SNODSR/SNODFC

8. Confirm plan of action, including arrival time of SNOD SR/SNOD/SNOD FC with HCP making referral.

- 8.1 Give an estimated journey time and that HCP will be informed if there are any delays. - Refer to [SOP3630](#) – blood tests for detailed guidance.
- 8.2 If appropriate, request a full set of blood tests to be taken, including blood group.
- 8.3 Request if any significant clinical changes occur that the HCP contacts the pager service as soon as possible.

9. Transport self or arrange transport with national transport provider.

9.1 Confirm:

- Pick up location and destination.
- Departure time.
- Estimated travel time and time of arrival.
 - If the estimated time of arrival exceeds your estimation, or any delays are experienced, ensure that the HCP making the referral is aware of any delays.

10. Activate Lone Worker App

- 10.1 Activate Lone Worker App if applicable. - [MPD364](#) Lone Working.

11. Arrive in referring area and change status on DonorPath to 'Assessing on site'.

- 11.1 Introduce yourself to relevant HCP. - [MPD888](#) – Access to the Organ Donor Register.
- 11.2 Speak with medical practitioner responsible for the patient's care. - [SOP3817](#) - Access for SN-ODs to the Organ Donor Register (ODR).
- 11.3 Ascertain patient's organ donation decision if not already done so by accessing the ODR.
- 11.4 Proceed with donation conversation.

12. Complete the referral on EOS in collaboration with the embedded SNOD

- 12.1 Complete EOS referral.

13. Actions in the Event of outage of SNOD Pager System

- 13.1 SNOD/TM to Inform IT service desk of any known outage immediately.
- 13.2 SNOD/TM to Inform ODT HUB Operations/DRD/NRC.
- 13.3 SNOD/TM Inform RM On Call.
- 13.4 RM to inform SMT and all SNOD teams of outage.
- 13.5 If out of hours RM to contact PageOne to ascertain the problem and advise SNOD teams and SMT of likely timescales to resolve.

 **End of Procedure**

Definitions

- N/A.

Related Documents/References

- [FRM4228](#) - Potential Donor Referral & Assessment
- [MPD364](#) - Lone Working
- [POL188](#) - Contraindications to Organ Donation - A Guide for SNOD's
- [MPD888](#) – Access to the Organ Donor Register
- [SOP5003](#) – ODT Donor Assessment Form Guidance for SNODs
- [SOP3925](#) – Manual Organ Donation Process for a potential Organ and/or Tissue Donor in the event of Donor Path/IT network unavailability
- [SOP5058](#) - Organ Donation from Infants < 2 years old
- [FRM5510](#) – Infant Donor Assessment and Organ Screening
- [SOP3817](#) - Access for SN-ODs to the Organ Donor Register (ODR)
- [SOP5495](#) -Role of the Specialist Nurse Organ Donation Family Care (SNOD FC), and Role of the Specialist Nurse Organ Donation Specialist Requester (SR)
- [SOP3630](#) – Diagnostic Blood Tests