

Objective

To outline the SNOD's role in the management of microbiological blood results at the time of donation.

Changes in this version

RM pager number updated and question 6 edited.

Roles

Specialist Nurse Organ Donation - SNOD

- Send, receive and record microbiological blood results
- Where required discuss results with Biomedical Scientist (BMS) / laboratory technician and escalate to the Microbiologist at the local testing centre if further clarity needed
- Facilitate discussion between the Microbiologist at the local testing centre and the Transplanting surgeon if required.

- Communicate results to the recipient centre point of contact (RcPoC) and/or tissue establishments (TE)

- Communicate with the family as appropriate if donation is unable to proceed or is delayed

Team Manager (TM) / Regional Manager (RM)

- Advise and guide the SNOD should they require support

Hub Operations

- To implement the simultaneous offering process in the event of positive microbiology

Restrictions

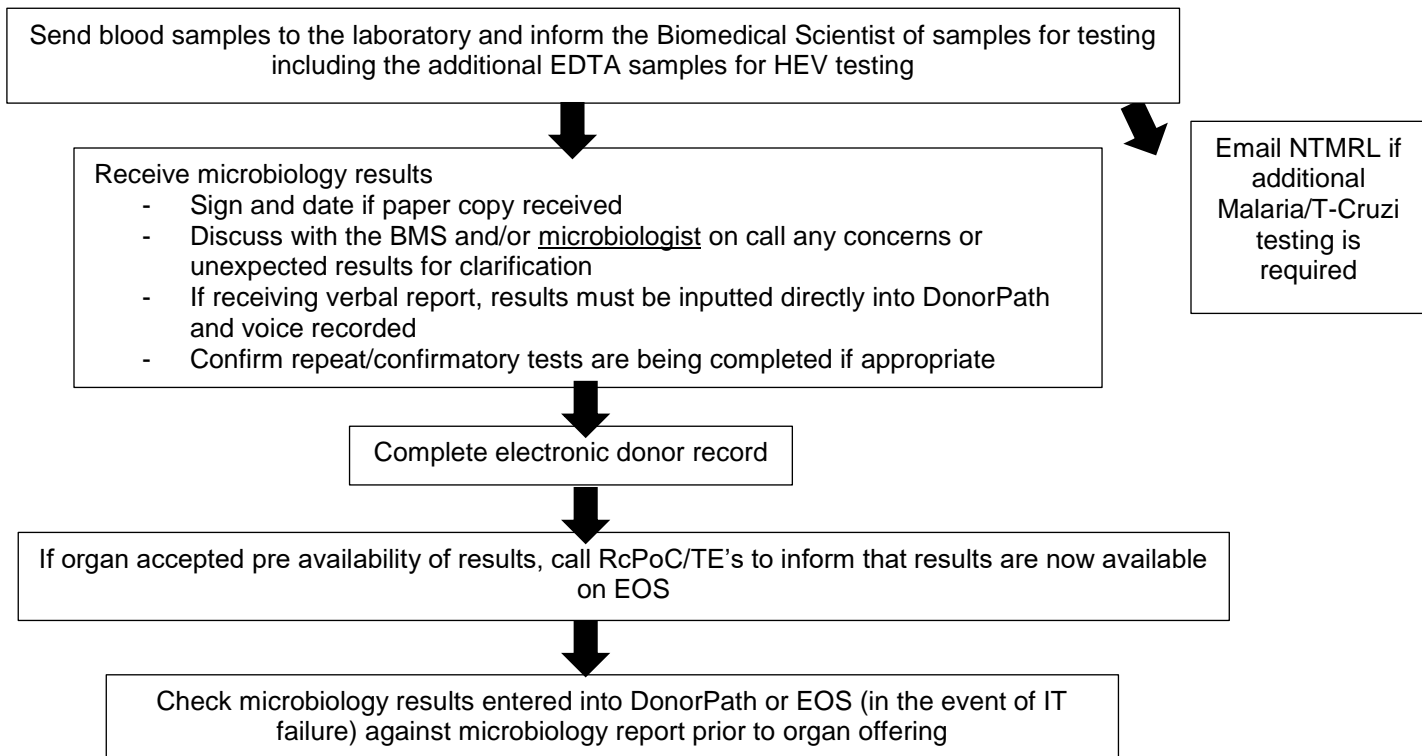
- N/A

Items Required

- N/A

Instructions

Figure 1: Managing microbiology results at the time of donation



1. Collect blood sample(s) for microbiology testing

- 1.1 Refer to **SOP3630** – Diagnostics – Blood Tests

2. Receive Microbiology blood results

- 2.1 Receive Microbiology blood results, either visually or verbally. - Results may be received via secure email, fax, directly or via phone.
- 2.2 Confirm correct report has been received, check demographics and content of report
- 2.3 If received by EMAIL; print out the result, if possible, annotate with date and time and sign
- 2.4 If received on PAPER; annotate with date and time and sign
- 2.5 If received VERBALLY; enter results directly into DonorPath (follow step 3) Conversation must be voice recorded. - Confirming each result individually will minimise the risk of misinterpretation. If unable to record on DonorPath follow **SOP3925**.
- 2.6 On completion of the VERBAL reporting of the Microbiology blood results, repeat the results recorded on DonorPath back to the BMS/technician individually. - HEV results will be available from NTMRL/SNBTS up to 5 days post donation and results will be emailed to DRD. On receipt of results follow **SOP3579**.

3. Enter the Microbiology blood results onto DonorPath

- 3.1 Enter the Microbiology blood results directly onto DonorPath. - Enter results directly onto DonorPath to reduce transcription errors.
- 3.2 Check results entered onto DonorPath for accuracy. - A provisional positive or initial reactive result must be entered into DonorPath as a positive result until the confirmatory testing has been complete. If unable to record on DonorPath follow **SOP3925**.

Advice

The SNOD should escalate their enquiry to the clinical microbiologist at the local testing centre if:
There is any uncertainty about any result
Any result which is not 'negative/not detected', unless they relate to CMV, EBV or Toxoplasmosis results

4. Discuss with the BMS/technician at the local testing centre if there is concern about any microbiology blood result at the earliest opportunity

- 4.1 Request clarification of the results (anything other than "negative/not detected") with the biomedical scientist/ technician at the local testing centre unless they relate to CMV, EBV or Toxoplasmosis results. - able to advice on the impact of the result for transplantation. A conversation between the Microbiologist and the transplant surgeon may need to be facilitated by the SNOD

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- 4.2 If there is any concern, ambiguity, difference in routine reporting, unfamiliar terminology or change in laboratory process to that which the SNOD is familiar with (including working out of region) – the report **must** be discussed with the BMS/technician and escalated as appropriate. - react appropriately in order to facilitate discussion with the BMS/technician prior to them leaving the laboratory.
- All SNODs must receive training in how to read laboratory reports and enter appropriately onto DonorPath prior to practising independently on the on call rota
- 4.3 Ascertain the plan for additional testing if required and the expected time for the result
- 4.4 Ascertain the name and contact number of the Microbiologist on call at the local testing centre if further advice required. Ascertain if BMS / technician has discussed results with local microbiologist
- 4.5 Add any further information gained into the General Comments section on DonorPath

5. Contact the microbiologist at the local testing centre, if required

- 5.1 Telephone the microbiologist on call and voice record conversation. - The risk of transplantation is determined by the transplanting surgeon. Any further information given by the clinical microbiologist regarding the significance of the result on the transplant recipient should be entered onto DonorPath and RCPoCs informed
- 5.2 Discuss the significance of result(s) and plan for further testing
- 5.3 Request an interim report which includes an interpretation of the results
- 5.4 Facilitate discussion between microbiologist and transplanting surgeon if required
- 5.5 Document in the General Comments section any additional information/ interpretation of results given by clinical microbiologist

Advice

If at any point microbiology blood results are received and are likely to delay or stop the donation process, seek advice from the RM if required and inform family of the delay/ halt in donation. Unconfirmed microbiology results should not be discussed at this stage. See **MPD1131 Donor Microbiology - Role of the SNOD and Family Contact** **RM pager: 07623 512222**

6. If positive Hep B surface antigen (not hepatitis B core antibody), Hepatitis C antibody, HIV 1 and 2 antibody and HTLV 1 and 2 antibody have been confirmed contact Hub Operations and request that they commence the positive microbiology offering process

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- 6.1 If the HLA has not been received, contact the local HLA laboratory to enquire of timings and then inform Hub Operations once a time has been given for results to be available. - It is important to ensure that the HLA is back prior to commencing the simultaneous offering process as organ allocation will be made in accordance with current allocation policy, many of which require HLA. The SNOD should inform Hub Operations that offering for donor XXXXXX should be commenced via the positive virology simultaneous offering process

7. If an organ has been accepted prior to the microbiology blood results being available on the electronic donor record or the results have been amended on DonorPath, contact the RCPoC/TE's at the accepting centre (and Hub Operations if responsibility for offering organs is shared)

- 7.1 Alert the RCPoC/TE's at the accepting centre(s) when the microbiology results are available on DonorPath. - The SNOD must also verbally communicate the results to all RCPoC/TE's and Duty office detailing any advice sought from the local microbiology laboratory on significance of results
- 7.2 Alert the RCPoC/TE's to any specific results that are anything other than negative/not detected and the significance of the results as per the microbiologist advice
- 7.3 Alert RCPoC/TE's if any additional tests are being processed
- 7.4 If RCPoC/TE's decline any organs accepted prior to the microbiological blood results being available inform Hub Operations and then follow step 6.

8. Final check of microbiology results entered into DonorPath prior to offering organs

- 8.1 Check each result entered into DonorPath individually against microbiology blood report **before organs are offered**
→ [If a discrepancy is found, go to Step 3](#)
- 8.2 If organs are offered before microbiology results are available, the final check of each result entered into DonorPath against the microbiology blood report must be attended **prior to mobilisation to theatre**

⊖ End of Procedure

SOP4618/4.1 – Receipt and Management of Microbiological Blood Results at the Time of Donation



Blood and Transplant

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Definitions

- **NTMRL** – National Transfusion Microbiology Reference Laboratory
- **GDRI** - Geographical Disease Risk Index
- **SNBTS** – Scottish National Blood Transfusion Service
- **HEV** - Hepatitis E Virus
- **DonorPath** – Secure electronic system to upload clinical information.

Related Documents/References

- **SOP3649** - Voice recording of organ donor clinical conversations
- **MPD1131** - Donor microbiology – Role of the SNOD and family contact
- **FRM4278** - National Virology/Microbiology Request Form
- **FRM4279** - National HLA Typing Request Form
- **FRM5025** - HEV/Malaria/ T.Cruzi Request Form
- **FRM5044** - Malaria request form – Scotland Only
- **FRM5814** - Multi Organ Donor NAT Blood Request Form
- **SOP3925** - Manual Organ Donation Process for a Potential Organ and/or Tissue Donor in the event of DonorPath/IT network unavailability
- **INF1130** - Microbiological Screening Tables
- **INF1131** - Organ Donor Screening - Significance of the confirmed positive result
- **INF1171** - Communicating with families about past Hepatitis B infection
- **INF1205** - Communicating with families about confirmed Hepatitis C antibody blood results
- **INF947** - Rationale Document for Patient Assessment Form (PA1)
- **INF1359** - NAT Testing of Scottish Organ Donors by SNBTS Tissues and Cells on behalf of NHSBT
- **POL180** - Management of Microbiological Blood Results in the Deceased Organ/Tissue donor
- **SOP3579** - Management of Microbiological results received post organ and/or tissue donation
- **SOP3630** - Diagnostics - Blood Tests