

This document is written to provide NORS teams, transplant and research centres with information on use of the small organ transport box.

The document also provides guidance and information on the system of colour coding to prevent any errors in packaging and transportation of organs.

Information on cleaning and maintaining the boxes is provided, as well as contact details for ordering consumables, such as labels, sealing tape and sterile ties.

## Summary of changes:

The discontinuation of the use of plastic security tags to seal closed the small organ boxes, with removal of any references or images.

The introduction of organ box sealing tape, the use of, how and where to apply.

Detailed updated cleaning protocol

Ice level top ups once the box has been opened

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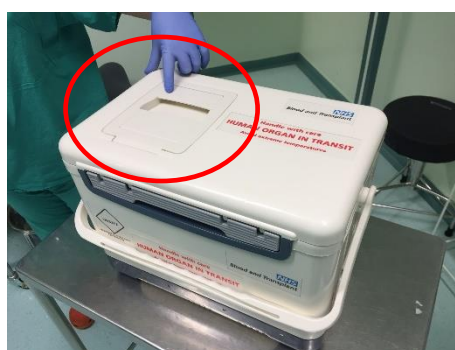
## INTRODUCTION

The small organ transport boxes are used to transport the kidney, pancreas, blood vessels, hearts retrieved for valves and research tissue.

The boxes have been validated with wet ice only. Do not use with dry ice. Using dry ice in a sealed container causes it to sublimate into carbon dioxide - this causes a build-up of pressure which very quickly causes the box to expand and even explode.

DO NOT attempt to open the service hatch in the lid. This is sealed shut and attempting to open it could damage the box.

**Figure One – Service Hatch:**



## AT THE NORS CENTRE

Ensure your ice machine has sufficient capacity to fill four boxes with crushed, melting water ice. These boxes will require approximately 6 kg of ice to ensure the organ is fully covered. You do not need to completely fill the box with ice when the organ is packed (see Figure Two below), but it is important you have enough to surround and protect the organ in transit.

**Figure Two – Box Packed with Ice:**



It is important you maintain the hygiene of the ice machine by emptying it weekly and disinfecting the ice storage area, or in line with the manufacturer's instructions.

Before use, wipe the inside of the box, underside of the lid and with a Clinell or Tristell wipe (or equivalent). Ensure you wipe the seal area and check the seal for damage.

Check the inside of the box ensuring it is free from any stains. If you notice any staining, this **MUST** be removed with a mild detergent and warm water. Follow by thoroughly wiping the inside and the sealing surfaces with a solution of warm water and 5.25% sodium hypochlorite (bleach). Air dry the box before use or closing the lid.

DO NOT use abrasive cleaners of any kind on the inside or outside surfaces of the box.

CHECK that the drainage valve on the side of the box is closed before filling the box with ice.

Fill the small organ transport boxes with crushed or flaked melting water ice and close the lid. NOTE: the ice must not be at a temperature lower than 0°C

Close the lid one side at a time by pressing down firmly on the lid with both palms, while using the fingers to close both ends of the catch evenly.

Do not force the lid closed or attempt to close the catch unevenly as damage may result. Light to firm, even pressure is all that is needed.

NOTE: The lid catches are designed to operate as hinges, should opening the lid from one side be required. It is important to remember this when sealing the box.

Ensure you have sufficient organ specific colour coded labels, organ specific colour coded sterile ties, organ box sealing tape and plastic bags to transport samples and paperwork.

The organ box sealing tape is supplied on a roll and perforated at 45cm lengths. (Figure 3)

**Figure – Three:**



The 45cm length of sealing tape is cut into 2 pieces (Figure 4)

Figure Four:



The refill kit supplied by Brandon Trust will contain 8 such pieces, enough to secure 4 small organ boxes, right/left kidney, pancreas and heart for valves. The OPP will need to supply additional tape to place inside the organ box, so the box can be resealed when samples have been removed

## AT THE DONOR HOSPITAL

The organ boxes should be positioned in the operating theatre in a systematic way considering moving and handling guidelines.

The colour coded label must be attached to the handle of the box prior to the organ being accepted by the OPP/SNOD for packaging.

When handing over the organ for back benching, the surgeon must clearly state the organ they are handing over, e.g. "right kidney". The scrub practitioner should verbally confirm this, e.g. "right kidney". The organ will be triple bagged, with an organ specific colour coded label applied to the first and third bag **or** a coloured coded tie attached to the neck of the outside of the third bag.

This member of the NORS team must then verbally confirm with the OPP/SNOD the organ they are handing over; a confirmation response should be audible. The organ should be placed immediately in the organ box.

You do not need to line the box with clear bags. The volume of melting water ice in the box should be sufficient to ensure the packaged organ will not be in contact with the box structure. Further melting water ice will be added later once the packaged organ is in place.

## ORGAN SPECIFIC COLOUR CODING



The Organ Specific form and blood group should be placed in the Document Bag with 2 pieces of organ box sealing tape so the box can be resealed after samples have been removed.

## SEALING THE BOX

The position of the bar code varies on the boxes, it's important to avoid placing the sealing tape over the bar code. The decision to place the sealing tape horizontal or vertical to avoid covering the bar code is the decision of the individuals sealing the box.

# INF1512/3 – Instructions for Use – Small Organ Boxes



Blood and Transplant

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The 2 pieces of sealing tape are used to seal the box front and back. (Figure 5) Placing over the hinge clasps, but not over the bar code sticker.

Figure Five:



Please avoid placing the sealing tape on or over the bar code sticker. (Figure 6) When the tape is removed it may remove some of the label. In future all new boxes will have the bar code sticker secured lower down the box.

Figure Six:



The SNOD and OPP will undertake an item check of the box contents prior to sealing the box. The box is then sealed closed with organ box sealing tape. It is important the OPP and SNOD agree the organ box is sufficiently sealed to ensure the safety of the contents. The addresses are applied to the labels once known.

The SNOD will record the box number on Donor Path; (Figure 7) the last 5 digits after AAA are the only part of the long number that needs to be recorded.

**Figure Seven.**



## **HANDLING THE PACKED ORGAN BOX**

The boxes contain melting water ice and there is a risk that spilt water could cause slips, trips and falls. Please be aware of any spillages and ensure these are dealt with rapidly.

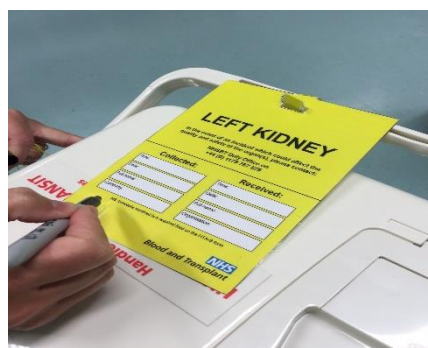
The boxes may weigh around 12.5 kg or less when packed with an organ, so precautions must be taken when lifting the boxes, particularly in restricted spaces, and when carrying the boxes. Avoid the need for any manual handling which might involve a risk of injury, so far as is reasonably practicable, use a wheeled trolley to carry the packed organ.

Where the need for manual handling is unavoidable, please ensure all staff are up to date in their manual handling training.

## **ON RECEIPT OF AN ORGAN**

Whoever takes custody of an organ from the transport driver should complete the date/time received field on the label (Figure 8) this is mandatory information required on the HTA-B form.

**Figure Eight – completing the date/time received field on the label:**



The coloured organ label should remain on the organ box until transplantation. It should then be kept with the recipient's medical records or until the date and time of receipt has been successfully and accurately transcribed on to the HTA B form. The coloured label can then be disposed of.



To open the box, remove the organ box sealing tape, supporting the hinge mechanism.

The ice level should be checked each time the box is opened and more crushed ice added if needed, the aim to ensure the organ/samples are surrounded and covered by ice.

The 'Contents of the Box' checklist (Figure 9) is for use by the SNOD/OPP at the donor hospital. It is an aide memoir prior to the organ leaving the establishment and does not reflect the contents of the box on arrival at the transplant centre (as samples will have been removed by HLA laboratory personnel).

**Figure Nine – Contents checklist:**

Contents of box (check all that apply):		
<input type="checkbox"/> Spleen	<input type="checkbox"/> Documentation	<input type="checkbox"/> Vessels
<input type="checkbox"/> Lymph nodes	<input type="checkbox"/> Blood	

If the organ is subsequently sent on to another establishment for transplantation or Scheduled Purposes, the HCP at Centre 1 should complete 'Delivery Address 2 or 3' as required (Figure 10). The box must then be resealed using sealing tape.

**Figure Ten – Delivery address 2:**

Delivery address 2 (complete only if required):

On receipt of the organ at a second or third delivery address, please ensure the "date/time received" section (Figure Eight) is crossed through and the new date/time received written in.

After unloading the box, thoroughly clean it outside and inside, and check for any damage, particularly seal damage. If damage is noted, please inform [KidneyTransportBoxes@nhsbt.nhs.uk](mailto:KidneyTransportBoxes@nhsbt.nhs.uk)

DO NOT pass the box to another team or allow this to be used for anything other than retrieval of deceased and living donor organs.

## **CLEANING AND MAINTENANCE**

It is extremely important the box is cleaned after every use, inside and out. If there are no stains, an antibacterial wipe can be used, such as Clinell or Tristell. The box should be air dried before the lid is closed. If there are any stains these must be removed immediately. Use a mild detergent and warm water to clean the box inside and out. Follow by thoroughly wiping the inside and the sealing surfaces with a solution of warm water and 5.25% sodium hypochlorite (bleach).

With the use of sealing tape on small organ boxes it is acknowledged that some residue will remain but can be removed during the robust cleaning process that each centre has in place following each organ box use.

Feedback received from NORS practitioners current cleaning processes may include:

- Allow the Clinell/Tristell wipe (or equivalent) to cover and soak the area for a few minutes, prior to wiping.
- The use of mild detergent and warm water with a disposable soft scrub brush to clean the area.

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- The use of a solution of warm water and 5.25% sodium hypochlorite.
  - The use of alcohol gel over the affected area, which is then cleaned with mild detergent and warm water.

NHSBT commissioning are very appreciative of the time taken by clinical staff to provide this cleaning and recycling system of small organ boxes.

DO NOT use abrasive cleaners of any kind on the inside or outside surfaces of the box.

**YOU MUST ENSURE THE INSIDE OF THE BOX IS DRY BEFORE CLOSING AND STORING.**

## **COLLECTION/DELIVERIES**

The administration of small organ boxes is undertaken by NHSBT Information Services

Email: [KidneyTransportBoxes@nhsbt.nhs.uk](mailto:KidneyTransportBoxes@nhsbt.nhs.uk)

Telephone: 0117 975 7436

It is extremely important all box movements are tracked – failure to do this will impact on a team's stock levels. Therefore, please DO NOT pass boxes to another team, or allow anyone to borrow/take boxes for any reason other than for the express purpose of transporting a kidney, pancreas, or heart tissue for valves.

## **REPORTING OF ISSUES**

Any issues with the process for collection/delivery of boxes, or with the use of the boxes, please email [KidneyTransportBoxes@nhsbt.nhs.uk](mailto:KidneyTransportBoxes@nhsbt.nhs.uk)

If there is a patient safety/quality and safety issue, follow the process for reporting incidents to NHSBT (SOP3888).

If there is an operational issue, or if you are unsure on the nature of the problem, please notify [KidneyTransportBoxes@nhsbt.nhs.uk](mailto:KidneyTransportBoxes@nhsbt.nhs.uk)

## **ORDERING RETRIEVAL PACKS AND OTHER CONSUMABLES**

Kidney retrieval packs, labels, sterile ties, organ box sealing tape can be ordered directly from the Brandon Trust by emailing/contacting:

### **Brandon Trust**

Olympus House, Britannia Road, Patchway, Bristol, BS34 5TA

Tel: 0117 907 7200 Fax: 0117 969 9000

Email: [info@brandontrust.org](mailto:info@brandontrust.org) Website: [Home | Brandon Trust](#)

## **GENERAL ENQUIRIES**

For all other enquiries, please contact:  
[KidneyTransportBoxes@nhsbt.nhs.uk](mailto:KidneyTransportBoxes@nhsbt.nhs.uk)