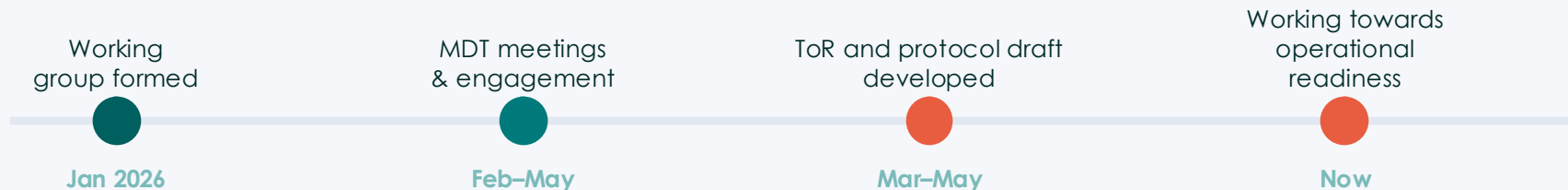


Paediatric A-NRP

Retrieval Advisory Group Meeting - 2026

-  DCD donation is increasing nationally - paediatric pathways have not kept pace
-  Low volume, high impact: every paediatric case matters
-  Adult A-NRP has paved the way - we build on that foundation
-  The goal: getting paediatric A-NRP started safely

WHERE ARE WE NOW?



WHAT WE'VE ACHIEVED

- Broad agreement to progress Paed A-NRP
- National MDT meetings – paed abdominal, CT, perfusion, NHSBT representatives
- Draft protocol under active development
- Adult platforms adaptable for donors ≥ 25 kg

CURRENT PRIORITIES

- Avoid unnecessary implementation delay
- Build collaborative mentorship pathways
- Defining the initial target donor population
- Pathways for donor offers, and case coordination
- Aligning equipment and funding for delivery

A STAGED IMPLEMENTATION

PHASE 1 Initial Programme

- Protocol agreement
- Donors ≥ 25 kg
- Abdominal-only NRP (liver, kidneys)
- Thoracic organs not proceeding
- Cross-specialty training
- Dedicated paediatric perfusion
- Start small - single centre approach to build experience and learn lessons

PHASE 2 Supported Expansion

- Mentorship & proctorship
- Progressive CT engagement
- Protocol and equipment refinement
- Sustainable funding

PHASE 3 Full Integration

- Wider paediatric application (small bowel, very small donors)
- Paediatric national retrieval teams integration
- Continuous audit & learning

WHAT DO WE NEED NATIONALLY?



OPERATIONAL

- Perfusion workforce pathway
- Equipment alignment
- Sustainable funding model



CLINICAL DELIVERY

- National mentorship pathways with supported early cases
- Cross-specialty collaboration



STRATEGIC

- Maintaining momentum - avoiding prolonged delays
- Staged implementation
- Long-term programme vision

Thank you

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