Medical Records Entries for Proceeding and Non Proceeding Organ and/or Tissue Donation

This Management Process Description replaces MPD910/5

Copy Number

Effective

01/09/16

Summary of Significant Changes

Review and revision of whole document and removal of repetition
Change from should to must regarding what needs to be recorded in the medical record entry
Title Changes to INF963, INF964, INF966

Policy

Organ donation is a complex process that requires detailed accounts of communication to provide confirmation that consent / authorisation has been ascertained within the legal frameworks across the UK. It is essential that the Specialist Nurse Organ Donation (SNOD) documents their actions within the process and a standard medical records entry template (INF964/INF966 or LET241/LET242 (Scotland only) should be used by the SNOD when documenting in the patient's medical records to capture the pertinent points in the donation process. Clear and accurate documentation helps in communicating significant events in the donation process and maintains open lines of communication to help ensure the safety and quality of organs for transplantation.

Purpose

To provide the Specialist Nurse Organ Donation (SNOD) with guidance on the information to be documented in the patient's medical records.

Responsibilities

SNOD – to provide a summary of events in the patient's medical record detailing the consent / authorisation conversation and the donation process.

Team Manager / Regional Manager – to provide support and advice to the SNOD, where required.

Items Required

INF963 - ODT Medical Record Entry for Proceeding Organ and / or Tissue Donation

<u>INF964</u> - ODT Medical Record Entry for Non Proceeding Organ Donation

INF966 - ODT Medical Record Entry -

INF966 - ODT Medical Record Entry - Family Decline

<u>LET240</u> - Family Decline Medical Record Entry Scotland

<u>LET241</u> - Non Proceeding Medical Record Entry Scotland

<u>LET242</u> - Proceeding Medical Record Entry Scotland

<u>POL164</u> - Consent/Authorisation for Organ and/or Tissue Donation

<u>MPD901</u> – Approaching the family for organ and/or tissue donation

MPD902 – Consent Conversation for

Organ and Tissue Donation

FRM4281 – Consent – solid organ and tissue donation

MPD598 - Management of the Deceased Donor Family Donation Conversation (Scotland)

<u>FRM1538</u> - Authorisation – solid organ and tissue donation (Scotland)

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(Template Version 07/10/08)

Author(s): Dawn Lee Page 1 of 4

Medical Records Entries for Proceeding and Non Proceeding Organ and/or Tissue Donation

MPD865 – Obtaining Coroner/Procurator Fiscal Decision

MPD888 - Accessing to the ODR FRM4211 - Patient Assessment Form

INF1277 - Abbreviations Access to DonorPath Access to Genius Scan

Applicable Documents

Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO)

HT Act-

http://www.legislation.gov.uk/ukpga/2004/30/contents

Human Tissue Authority Codes of Practice

http://www.hta.gov.uk/legislationpoliciesand codesofpractice/codesofpractice.cfm http://www.legislation.gov.uk/ukpga/2005/9/ contents

HT Scotland Act -

http://www.legislation.gov.uk/asp/2006/4/contents

HT Scotland Act-(Explanatory Notes)

http://www.legislation.gov.uk/asp/2006/4/notes/contents

Codes of practice on the Human Transplantation (Wales) Act 2013

http://www.legislation.gov.uk/anaw/2013/5/contents/enactedhttp://www.hta.gov.uk/_db/_documents/HTA_Co

http://www.hta.gov.uk/_db/_documents/HTA_Co P_on_Human_Transplantation_(Wales)_Act_20 13 - Final - May_2014.pdf

Record keeping Guidance for Nurses and Midwives -

https://www.nmc.org.uk/standards/code/record-keeping

PID – Person Identifiable Information – NHSBT Guidance on Handling Person Identifiable Information:

http://nhsbtweb/userfiles/final%206%20IG%20proofs.pdf

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Author(s): Dawn Lee Page 2 of 4

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PROCEEDING ORGAN AND / OR TISSUE DONATION MEDICAL RECORD ENTRY

- 1.1. The SNOD should utilise <u>INF963</u> or <u>LET242</u> (Scotland) for guidance when documenting in the patient's medical record for a proceeding organ and / or tissue donor.
- 1.2. Following formal consent / authorisation, a copy of the Consent / Authorisation form (FRM4281 / FRM1538) must be filed in the patient's medical record.
- 1.3. If any previously unknown, relevant past medical, social, behavioural or travel history is identified during the Donor Characterisation process, the SNOD must document this in the patient's medical record.
- 1.4. The SNOD must document the details of communication with other health care professionals who have provided information or advice as part of the characterisation process.
- 1.5. If the patient is referred to the Coroner / Procurator Fiscal, the SNOD must document in the patient's medical record the details of the referral and the subsequent outcome, including detail of any restrictions placed on donation.
- 1.6. The SNOD must document any planned referral for tissue donation to the National Referral Centre (NRC) or the Scottish National Blood Transfusion Service (SNBTS).
- 1.7. The SNOD must document any specific requests from the family in relation to end of life care for the patient, including items to be kept with the patient, any clothes to be dressed in post donation, or keepsakes such as prints and/or hair locks.
- 1.8. The SNOD must document any arrangements that have been agreed with the family for further contact and communication.
- 1.9. The SNOD must ensure that an entry is made for the attention of the pathologist at the end of the medical record entry. This is to request that if a post mortem examination is performed, that the Pathologist immediately contact the Duty Office should they identify any pathology that is, or may be, relevant for the health or future health of the transplant recipient(s) and / or the patient's family.
- 1.10. A copy of the medical record entry must be photocopied for the donor file.

2. NON PROCEEDING ORGAN DONATION MEDICAL RECORD ENTRY

- 2.1. The SNOD must ensure that a medical record entry is completed in the patient's medical record for a non proceeding organ and / or tissue donor and should utilise <u>INF964</u> or <u>LET241</u> (Scotland) for guidance.
- 2.2. Following formal consent / authorisation, a copy of the Consent / Authorisation form (FRM4281 / FRM1538) must be filed in the patient's medical record.
- 2.3. The SNOD must document the reason why donation could not proceed in the patient's medical record.
- 2.4. If any previously unknown, relevant past medical, social, behavioural or travel history is identified during the Donor Characterisation process prior to donation being stood down, the SNOD must document this in the patient's medical record.

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(Template Version 07/10/08)

Medical Records Entries for Proceeding and Non Proceeding Organ and/or Tissue Donation

- 2.5. The SNOD must document the details of communication with other health care professionals who have provided information or advice as part of the characterisation process.
- 2.6. The SNOD must confirm any additional family care and support provided following the decision not to proceed with organ and / or tissue donation.
- 2.7. The SNOD must document if a referral for tissue donation has been made to the NRC or SNBTS.
- 2.8. The SNOD must document any specific requests from the family in relation to end of life care for the patient, including items to be kept with the patient, any clothes to be dressed in, after they have died or keepsakes such as prints and/or hair locks.
- 2.9. The SNOD must document the arrangements that have been agreed with the family for further contact and communication.
- 2.10. The SNOD must ensure that an entry is made for the attention of the pathologist at the end of the medical record entry. This is to request that if a post mortem examination is performed, that the Pathologist immediately contact the Duty Office should they identify any pathology that is, or may be, relevant for the health or future health of the transplant recipient(s) and / or the patient's family.
- 2.11. A copy of the medical record entry must be photocopied for the non-proceeding donor file.

3. FAMILY DECLINE MEDICAL RECORD ENTRY

- 3.1. The SNOD must ensure that a medical record entry is completed for the patient's medical records if the family object to / decline donation and should utilise INF966 or LET240 (Scotland) for guidance.
- 3.2. The SNOD must outline the reason why the family objected to / declined the option of donation.
- 3.3. The SNOD must confirm any care / support provided to the family following the decision not to proceed with donation.
- 3.4. The SNOD must document any specific requests from the family in relation to end of life care for the patient, including items to be kept with the patient, any clothes to be dressed in. after they have died or keepsakes such as prints and/or hair locks.
- 3.5. The SNOD must document if arrangements have been agreed with the family for further contact and communication.
- 3.6. The SNOD must either attach the medical record entry to DonorPath or, ensuring 3 points of identification, photocopy the entry and post it to the Donor Records Department for scanning and attaching to DonorPath.

(Template Version 07/10/08) Author(s): Dawn Lee Page 4 of 4