


<b>Name of Policy:</b>	<u>Informed Consent Process/Confidentiality</u>	 <b>THE UNIVERSITY OF TOLEDO</b> <small>1872</small>				
<b>Policy Number:</b>	3364-140-33					
<b>Department:</b>	Kidney Transplant Administration (Nursing Service)					
<b>Approving Officer:</b>	Associate Vice President/ Associate Executive Director Director, Renal Transplant Program Administrative Director, Renal Transplant Program					
<b>Responsible Agent:</b>	Transplant Coordinator					
<b>Scope:</b>	The University of Toledo Medical Center	Effective Date: January 12, 2010 Initial Effective Date: December 27, 2007				
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><input type="checkbox"/> New policy proposal</td> <td style="width: 50%; border: none;"><input type="checkbox"/> Minor/technical revision of existing policy</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Major revision of existing policy</td> <td style="border: none;"><input checked="" type="checkbox"/> Reaffirmation of existing policy</td> </tr> </table>			<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy	<input type="checkbox"/> Major revision of existing policy	<input checked="" type="checkbox"/> Reaffirmation of existing policy
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**(A) Policy Statement**

All prospective living donors will be informed of all aspects of and potential outcomes from living donation.

**(B) Purpose of Policy**

To ensure that all prospective donors are fully informed of all aspects of living donation.

**(C) Procedure**

1. Once a prospective living donor makes initial contact with the living donor coordinator, a general information packet will be provided to the prospective living donor.
2. Upon identification of intended living donor (in the case of multiple prospective donors), the living donor coordinator will meet with intended donor to review informed consent literature.
3. Once literature has been reviewed and discussed and the donor coordinator feels that the donor understands the material presented, the intended donor will consent to proceed with living donation by way of consent form that will remain in the potential donor chart.
4. All prospective living donors are informed of confidentiality upon initial contact either in person or via telephone during medical screening by way of general information packet provided. Once the intended living donor is identified, confidentiality is addressed during review of informed consent.
5. The evaluation process consists of the following items to be discussed with living donor:
  - a. Results of physical evaluation with discussion of how any current medical issues or medication regimen could be affected by donation, or could affect recovery from donation.
  - b. Suitability for donation
  - c. Results of laboratory and donor specific diagnostic testing
  - d. Relevance of any psychosocial issues related to donation
  - e. Financial responsibilities resulting from the living donation as well as expenses, including potential out of pocket expenses if the donor has complications from surgery, needs medication following discharge, or is expected to undergo follow-up testing or a physical exam so that the program can report donor statistics to the OPTN.
  - f. Donor's ongoing health status after donation is reported to the OPTN at the time of donation, 6 months, 1 year, and 2 years after donation.
6. The surgical process is addressed initially in general information packet and a more detailed discussion during informed consent, and also with the donor surgeon at the time of evaluation. The discussion of the surgical process will include:
  - a. Risks associated with surgery
  - b. Risks and effects of general anesthesia

