Name of Policy:	Tracking and Monitoring of Dongan Location During Transports		THE UNIVERSITY OF TOLEDO
Policy Number:	3364-124-76		MEDICAL CENTER
Department:	Nursing Service/Operating Room/Transplant Program		
Approving Officer:	Interim Chief Nursing Officer		
Responsible Officer	Director of Surgical Services		
Scope:	Operating Room (OR)		Effective Date: 7/12/2021
			Initial Effective Date: 9/10/12
	ey proposal ision of existing policy	Minor/technical re	evision of existing policy existing policy

(A) Policy Statement

The location of the deceased or living donor organ will be monitored continuously in the Operating Room (OR) department. Only the transplant surgeon(s) may handle the donor organ itself. An OR RN or surgical technologist, or the transplant coordinator RN, may handle the outer container(s) (shipping box, outer thermal container, transport container) in which a donor organ is shipped, received, stored and/or transported.

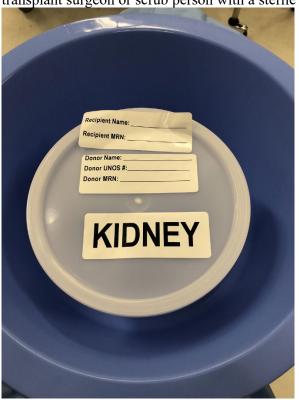
(B) Purpose of Policy

To provide a safe process for monitoring the location of the explanted donor organ until it is implanted in the recipient.

(C) Procedure

- 1. When a deceased or living donor organ is received in the OR department from an outside source, the charge RN receiving the organ will enter the organ arrival time into the OR kidney log book.
- 2. The documentation will include whether a kidney arrived on pump, was taken to an OR room for cleaning/implantation or stored at the OR control desk in view of the OR charge RN.
- 3. All movement of the organ prior to it being taken to the recipient OR will be documented in the OR kidney log. The OR charge RN and/or the RN circulator will document the location of the donor organ at all times.
- 4. When a kidney is taken to the recipient OR room or taken to another operating room for preprocedure cleaning, once it is removed from the original container it will be placed in the approved sterile container with a lid.

5. The container lid label will be filled out with the appropriate information for that case by the transplant surgeon or scrub person with a sterile marker.



- 6. Once a kidney is moved to the recipient OR, all further movement is documented in the electronic medical record by the RN circulator.
- 7. Any time a kidney is not under the direct control and observation of the transplant surgeon(s) the kidney in slush sign will be placed on top of the container in the slush machine.



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8. Consistent with policy 3364-124-74 Intra Operative Hand Off Communication, staff breaks and relief, which are planned during a procedure, will occur after consultation with the attending surgeon regarding appropriateness of the timing of the break. It is the responsibility of the staff member being relieved to consult with the surgeon.

Approved by:		Review/Revision Date: 11/13/12
/s/ Michelle Mallett Director of Surgical Services	Date	2.1.2016 8/5/2020 7/12/21
/s/ Todd Stec Interim Chief Nursing Officer	Date	
Revision completed by: Heidi Pitzen MSN, BBA, RN, CNOR; Perioperative Educator		
Review: Policy & Standard Committee, 2/16, 7/17 Revision: 8/2020, 7/2021		Next Review Date: 7/2024