ODTI Guideline on the Minimum Dataset for Donor Referral

1.0 INTRODUCTION

1.1 BACKGROUND

During the identification and characterisation of potential organ donors, and with consent from next of kin, there is a minimum amount of clinical information that the National Organ Procurement Service (NOPS) and the relevant Transplant Centres require to make a decision about the acceptance of a potential organ for transplant.

Baseline clinical information will be required by transplanting centres and also particular results or tests that are organ specific in order to facilitate organ acceptance.

1.2 OBJECTIVE

The purpose of this Guideline is to define the minimum datasets required by transplanting centres and in turn inform the ICU's / ED's relevant clinical staff of such requirements.

Minimum datasets aim to bring further clarity to staff within relevant clinical areas on what is required when identifying and referring a potential organ donor. The creation of this guideline also aligns with the requirements set out by ODTI, A framework for Quality and Safety of Human Organs Intended for Transplantation, Version 1 December 2014 and S.I. No: 325 of 2012, European Union (Quality and Safety of Human Organs Intended For Transplantation).

2.0 RESPONSIBILITIES

The revision of this guideline is the responsibility of ODTI or designee in conjunction with transplanting centres and organ donation personnel who will provide clinical input and expertise. These organ acceptance criteria must be approved by the Responsible Person/Designee within the respective transplanting centre. The final review and endorsement of the guideline lies with the National Organ Donation and Transplant Advisory Group (NODTAG).

3.0 MINIMUM DATASET FOR REFERRAL TO TRANSPLANT CENTRES.

Whether it is an emergency admission or a prolonged ICU stay, there will come a point in some patient's intensive care journey where treatment options will have been maximised and there is a recognition that changing the direction of care from life sustaining therapy to end of life care is appropriate. It is at this point, where the potential for organ donation as part of end of life care should be assessed in conjunction with the wishes of the patient usually expressed on their behalf by their family. It is important to realise that the ability to offer organ donation an option at the end of life occurs in approximately 10% of ICU deaths.

The creation of a national guideline seeks to support the ICU staff to understand the necessary information required to refer a potential donor to the National Organ Procurement Service (NOPS). Requirements will be clearly laid out below to ensure prompt handover and early collection of the required information that will enable the national transplanting centres to make a decision on the acceptance or decline of an organ or tissue.

In order to begin the characterisation of a potential donor, personal and clinical information relating to the patient needs to be shared with the NOPS Donor Coordinator. Consent for the sharing of this information for the potential purposes of organ donation must be obtained from the patient's next of kin.

Table 1. Minimum dataset for donor referral

Baseline Donor Data	Adult / Paed	Age	DOB	Gender	DBD/DCD	Donor Hospital
	Date of admission	Ventilation Date	Cause of Death	Blood Group	Measured Height	Weight
	History of presenting complaint	Medical/Surgical History	Social History	Alcohol/Drug Use	Smoking status/history	Abdominal/ Thoracic Injuries
	Witnessed/Unwitnessed Cardiac/Respiratory Arrest/Downtime	Brainstem Tests/ DCD Futility	Coroner Contacted			
Current Clinical Status	Blood Pressure (MAP)	Heart Rate/Rhythm	Temp	CVP	Episodes of Hypo /Hypertension	Inotropes & Hormonal Therapy
	Urine Output	Fluid Balance	Chest X-Ray result	Secretions	Infections	Blood Cultures/ Other Micro
	Antibiotics	Sedation	Baseline Fi02%	ABG on Baseline Fi02 and 100% Fi02	PH	PO2
	PC02	HC03	BE	Lactate	Mode of Ventilation an current settings	Covid Hx/Vaccination Hx
	Covid NPA Swab	Covid Deep ET Aspirate				
Required Bloods	WBC	CRP	HB	Lymphocytes	Platelets	INR
	PT	APTT	Calcium	Magnesium	Potassium	Sodium
	Urea	Creatinine	CK	Phosphate	Chloride	Bilirubin
	ALT	Total Protein	Albumin	GGT	AST	Alk Phos
	Glucose					
NOPS to advise if required	ECHO	HBA1C	Amylase	Troponin	Lipase	

3.1 Commencement of a Referral

It is important to note that bedside staff can contact their local Organ Donation Nurse Managers or the National Organ Procurement Service (NOPS) 24/7 for guidance or assistance in relation to a potential organ donor.

An offer cannot be progressed to the transplant centres until the minimum dataset is received to allow an informed decision on the acceptance or decline of an organ.

Early referral is encouraged to allow for the efficient planning and management of logistics surrounding an organ donation case.

4.0 Reference List

The following references were also used in the development of this guideline.

ODTI, A framework for Quality and Safety of Human Organs Intended for Transplantation, Version 1 December 2014.

S.I. No: 325 of 2012, European Union (Quality and Safety of Human Organs Intended For Transplantation)

S.I. No: 198 of 2014, European Union (Quality and Safety of Human Organs Intended for Transplantation (Amendment) Regulations 2014

Commission Directive 2010/53/EC of 7 July 2010 of the European Parliament and the Council of the European Union on standards of quality and safety of human organs intended for transplantation

Guide to the Quality and Safety of Organs for Transplantation, (2022) 8th Ed, European Directorate for the Quality of Medicines in Healthcare (EDQM), France.

5.0 GUIDELINE CIRCULATION

These guidelines will be disseminated to the circulation list identified below following approval.

GUIDELINE CIRCULATION
Guideline Circulation
Director ODTI
Chief Operations Officer ODTI
Director of Quality ODTI
Quality and Biovigilance Manager ODTI
Clinical Leads Organ Donation
Organ Donation Nurse Managers
Responsible Person National Organ Procurement Service
Donor Coordinators National Organ Procurement Service
Quality Manager National Organ Procurement Service
Responsible Person Cardiothoracic Transplant Centre
Quality Manager Cardiothoracic Transplant Centre
Responsible Person Renal Transplant Centre
Quality Manager Renal Transplant Centre
Responsible Person Liver and Pancreas Transplant Centre
Quality Manager Liver and Pancreas Transplant Centre
NOPS Medical Clinical on Call Personnel

6.0 Document Approval

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