
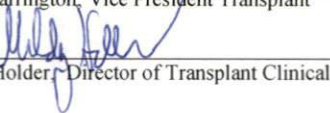
 Methodist Dallas Medical Center	Title: Transplant-Related Occurrence Management Policy	Effective Date: 06/28/2012
	Section: Liver, Kidney and Pancreas	
Approved by:  Denise Harrington, Vice President Transplant  Melody Holder, Director of Transplant Clinical Operations		Revision Date(s): 07/10/2012; 01/15/2015; 02/21/2020; 06/2023; 05/2026
		Next review Date: 5/2029

Purpose: To define the process for identifying and investigating occurrences within the Transplant Programs.

Policy: All occurrences or adverse events will be reported immediately to Transplant Leadership. Occurrences & adverse events will be investigated within 24 hours of notification and reported to the appropriate regulatory body, if indicated. This policy is to be used in conjunction with MHS 004 "Occurrence Management".

Definitions:

- **Occurrence** is any event not consistent with routine patient care and/or operation of the hospital and related facilities, or a visitor injury. This definition shall be applied to all transplant-related events, facilities, patients, and family members.
- **Transplant-related occurrence** is defined as any occurrence not defined within the MHS 004, but is any event or action that potentially violates the policies and bylaws of the United Network for Organ Sharing (UNOS) Organ Procurement and Transplantation Network (OPTN) or the Centers for Medicare & Medicaid Services Conditions of Participation for Transplant Centers (CMS CoPs), or does not follow policies and procedures as defined in transplant-specific policies for the evaluation, transplantation, and follow-up of transplant candidates, recipients, and their donors.
- **Adverse Event** is defined under Transplant Services Quality Plan and is reported and followed up as defined in the plan.

Process:

- Transplant staff and clinicians will utilize the Incidence Reporting System to document any near miss or occurrence. Transplant staff are encouraged and trained to immediately report any occurrence, transplant-related occurrence, or adverse event to Transplant Leadership.
- If an occurrence is not reported as required, corrective action will be taken including education and/or counseling (up to, and including, termination)
- Transplant Leadership will review all occurrences reported within 24 hours of notification (to include a determination as to whether a reportable transplant-related occurrence has taken place). Should a reportable occurrence be determined, Transplant Leadership will inform the appropriate regulatory bodies (if applicable) within the 24-hour period. All other incidents will be reviewed in accordance to the Transplant Quality Plan.