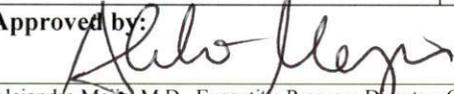
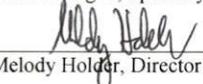


 Methodist Dallas Medical Center	Title: Vessel Storage	Effective Date: 11/06/2009
	Section: Liver, Kidney, Kidney Pancreas	
Approved by:  Alejandro Mejia, M.D., Executive Program Director, Organ Transplantation		Revision Date(s): 11/06/2009; 04/06/2011; 08/31/2011; 02/01/2013; 08/01/2017; 10/04/2018; 02/2021; 08/2024
 Andrea Stegall, Specialty Coordinator Transplant Services		
 Melody Holder, Director of Transplant Clinical Operations		
		Next review Date: 08/2027

Purpose:

To delineate the process for vessel storage, destruction, and use in solid organ transplant cases involving deceased donors

Policy:

The individual at Methodist Dallas Medical Center with overall responsibility for monitoring and maintaining records, destroying vessels, and notifying the OPTN/UNOS of the outcome and/or use of vessels is the O.R. Transplant Specialty Coordinator. In the absence of that individual, the O.R. Transplant Specialty Coordinator or the Director of Surgical Services will identify another individual to assume responsibility. The O.R. Transplant Specialty Coordinator or other assigned individual as identified throughout this protocol, will maintain information on all donor vessels including monitoring and maintaining all records relating to the use and management of donor vessels (e.g. subsequent positive serology testing and monitoring inventory of stored extra vessels).

This person (or their designee) must ensure that the refrigerator is monitored, that records are up to date and available with the vessels, that vessels are destroyed when expired, and that the vessels use or disposal is reported to the OPTN/UNOS within 7 calendar days.

Process

Care of Donor Vessels

- At the time of procurement, appropriate packaging of vessels will be completed in the donor operating room. Methodist Dallas Medical Center staff may not leave the operating room without allowing OPO staff to package and label the organ in accordance with OPTN/UNOS policy.
 - If the donor has tested positive for any of the following, **the extra vessels must not stored:**
 - HIV by antibody, antigen, or nucleic acid test (NAT)
 - Hepatitis B surface antigen (HBsAg)
 - Hepatitis B (HBV) by NAT
 - Hepatitis C (HCV) by antibody or NAT
- These vessels must be documented in the vessel log book and **destroyed immediately.**

- If the organ is repackaged by MDMC staff members, it will be repackaged, labeled, and shipped in accordance with OPTN/UNOS policy and the recovering OPO will immediately be notified of the repackaging.
- The Transplant Nurse will place the donor vessels in the refrigerator after the recovery and will complete the vessel form located in the Vessel Log Book.
- Vessels will be stored in a Food and Drug Administration (FDA) approved preservation solution (e.g. UW, Custodial HTK).
- Vessels will be stored in a rigid, sterile sealed container and will be protected by a triple sterile barrier, one of which must be the rigid container, labeled with the recovery date, ABO, ABO subtype (if that subtype is used for allocation), infectious disease testing results, container contents, and the UNOS Donor ID.
- The standardized vessel label distributed by the OPTN/UNOS contractor must be affixed to the outer most sterile barrier bag and information on the label must include recovery date, ABO, all infectious disease testing results, container contents, and the UNOS Donor ID.
- If the donor meets risk criteria for acute HIV, HBV and HCV infection as defined by the *U.S. Public Health Services (PHS) Guideline*, the label must indicate that the vessels are from a donor who meets the above criteria
- Vessels may be stored up to 12 days from the original recovery date.
- Vessels will be disposed of by the O.R. Transplant Specialty Coordinator or designee and the appropriate paperwork will be completed.
- The OPTN/UNOS will be notified of vessel use or disposal within 7 calendar days of that use or disposal via TIEDI.

Use of Donor Vessels

- Vessels cannot be used other than for the implantation or modification of a solid organ transplant.
- The Transplant Surgeon will have around-the-clock access to the donor information prior to using the donor vessel(s) in a recipient other than the intended recipient.
- Operating room staff must verify the ABO, all serology results, container contents, date of expiration, and the UNOS Donor ID of the vessel with the ABO and all serology results of the recipient prior to implantation.
- The OPTN/UNOS will be notified of the use of vessels for the intended recipient or another transplant recipient, the OPTN/UNOS must be notified.
- Vessels may be shared among transplant centers. If sharing occurs between transplant centers, the implanting program must submit to the OPTN/UNOS a detailed explanation justifying the sharing. The implanting transplant program must notify the OPTN/UNOS of subsequent disposition of the vessel(s).

Care of the Donor Vessel Refrigerator

- Vessels will be stored in a secured refrigerator with central temperature monitoring and maintained within a range of 2-8 degrees Celsius. OR Charge nurse is notified via pager if the refrigerator is out of range.
- If the temperature is out of range, the Charge Nurse will immediately notify the O.R. Transplant Specialty Coordinator.
- Vessels may be stored in the Blood Bank refrigerator in the Surgery Department if the vessel refrigerator is not working properly.