

AATB-AOPO-NFDA

Best Practices for Organ and Tissue Donation

In order to facilitate the organ/tissue donation process and accommodate the specific requirements of a funeral service and burial, the American Association of Tissue Banks (AATB) and the Association of Organ Procurement Organizations (AOPO) [hereafter referred to as “recovery agency(ies)"] and the National Funeral Directors Association (NFDA) have adopted the following “Best Practices.”

Mutual support and recognition of the roles each organization plays in the donation process is imperative in order for any of these “Best Practices” to succeed. In achieving the goals outlined in these “Best Practices,” we not only strengthen our individual organizations, but we form together a strong cord that will better serve the families that we mutually share and, ultimately, each recipient in the transplant communities.

Each organization will promote and educate its members, state associations and others on its contents. This effort is essential if funeral directors, tissue banks and organ procurement organizations are to successfully meet the goals of the federal government’s initiative to increase organ and tissue donation throughout the United States.

1. NOTIFICATION

- a. The recovery agency(ies) should notify the funeral director handling the funeral arrangements for the donor family as soon as details of the anticipated recovery are known. This notification should follow the consent process for the donation. In the event that a funeral home is not known at the time of consent, this notification will take place as soon as the donor family has determined a funeral home.
- b. The recovery agency(ies) handling the donation should, at the time of the initial contact, notify the funeral director of the following:
 - i. The nature of the donation;
 - ii. The geographic location of the donation recovery;
 - iii. The anticipated timing of the donation recovery;
 - iv. A contact person or number for the funeral director to call for updates, questions or concerns; and
 - v. Next of kin information.

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- c. Further, the recovery agency(ies) should contact the funeral director as the situation develops or changes, especially as it relates to the pick-up time and/or location of the donor body. This is especially important when a donor body is to be transported to a medical examiner/coroner for tissue recovery, autopsy or other purpose.
- d. The recovery agency's representative will ensure that the medical examiner/coroner has the name and phone number of the funeral director/home (if known), and that the funeral director should be notified when the body is ready for pick-up.
- e. Finally, the recovery agency(ies) should contact the funeral director/home when the body is ready for pick-up.

2. DISCLOSURE

- a. Once a donor has been medically qualified, the recovery agency's representative who interviews the donor family should inform them that there are many factors that may impact the timing of the funeral, including the timing of the recovery procedure and/or autopsy that need to be completed.
- b. The consent process discussion, or the consent form where applicable, should also include an explanation regarding the impact that the donation process may have on burial arrangements and on the appearance of the body. The family will be encouraged to discuss any particular needs in relation to the timing of the funeral, clothing preferences, and other related issues with their funeral director.
- c. Any consent for anatomical gift form signed by a family should be specific in describing the organs/tissues/eyes to be recovered.

3. RECOVERY PROCEDURES

To facilitate the embalming and preparation process, the following procedures are recommended:

- a. All involved major arteries should be ligated to ensure the integrity of the vascular system;
- b. Replace all recovered bones with prostheses;
- c. Contact the funeral director to determine the preferred type of incision closure prior to the completion of the recovery;
- d. Consider using a U or Y chest incision rather than a midline opening for the chest;
- e. Elevate the head with a head block especially with eye recovery or a prolonged recovery process; and
- f. No facial bone recovery if a viewing (private or public) is planned.

4. REIMBURSEMENT

Every recovery agency should establish a policy regarding compensation of funeral directors if additional time and materials are required to prepare a donor body for embalming and/or viewing. The funeral home should not assess the donor family any additional charges, resulting from the donation.

5. COMMUNICATION/EDUCATION

The most important and essential aspect of a successful relationship between funeral directors and recovery agencies is communication and a better understanding by each of the operational aspects of the other. Therefore, to ensure and facilitate successful organ and tissue donation and the funeral and burial processes for the families we all serve, it is imperative that funeral directors and recovery agencies reach out to each other and establish those lines of communication. By doing so, the issues and concerns of each can be addressed and resolved. This outreach should also include actual visits by each to the other's place of business. These visits may promote a greater appreciation for each entity's role and contribute to a strong, lasting relationship.

6. SUPPORT

The NFDA will publicly support, and encourage its members to support the concept of donation. The funeral director should respect the family's wishes to donate, and use his/her relationship with the donor family to facilitate the donation recovery process. If the funeral director takes exception to a specific donation, he/she should communicate his/her concerns to the tissue bank/OPO before expressing them to the donor family. Ideally, the funeral director will view donation as an integral part of the donor family's efforts to deal with the loss, and as an aid in the progression of the grieving process.

All recovery agency members have an obligation to be cognizant of the manner in which donation and its' effects on the donor body are discussed with families. The recovery agency(ies) should refrain from telling families that absolutely no change to the donor's appearance is guaranteed. The recovery agency(ies) should also be aware of the timing of the donation process and its' effect on the funeral service itself.

Adopted March 11, 2001