Early Referral

Notification of Donor Potential

The hospital that takes ownership of the donation process identifies and refers potential donors early and recognizes that the early referral is not "giving up on a patient;" rather, it is an opportunity to provide families a chance to donate. An early referral also attunes us to the potential donor’s medical and family needs in case treatment cannot prevent a decline in the patient’s condition. Early referral (Glasgow Coma Scale of <4) allows LifeNet Health coordinators to assist the hospital team in preparing the family for the variety of outcomes.

Early Referral is Critical - and Required

The Center for Medicare and Medicaid Service (CMS) requires hospitals to refer all deaths and imminent deaths to the local OPO in a timely manner. These include:

- Imminent brain death: Report as soon as patient shows one or more of the imminent death triggers.
- Cardiac death: Report death as soon as possible, must be within one hour.

Organs can become non-viable during the time the family considers the donation option. It is essential that the potential donor be properly managed at all times so as to enable adequate hydration, ocular care, etc.

Referral to LifeNet Health

Once a potential donor has been identified, the hospital calls LifeNet Health’s 24-hour Donor Referral Line at 866-543-3638. Upon receiving the call, a LifeNet Health Coordinator will arrive at the hospital or call to:

- Review the patient chart for donor suitability. It is not necessary for the LifeNet Health coordinator to approach a family about donation if their loved one is not a candidate.
- Answer any questions or concerns from the hospital staff.
- Be available at the earliest possible time when intervention becomes appropriate.

The Nurse’s Role

The nurse plays an essential role in the organ and tissue donation process. Without the nurse’s referral to LifeNet Health, the hospital and the family will not have access to the essential services that we provide.

There are a number of proactive steps the nurse can take to ensure the family's right to consider the opportunity to donate. They include:

Patient Care

- Maintain vital signs, including blood pressure, heart rate and normal temperature
- Maintain pulmonary care as if the patient were expected to recover (pO2 > 100), even if a DNR or brain death
- Obtain requested/necessary organ-specific labs
- Ensure adequate urine output and fluid resuscitation
- Notify LifeNet Health of any changes in the patient's status
- Donor Management Goals:
  - SBP>100mmHg
  - HR=100/min
  - PaO2>100
  - UO=1-3 mL/kg/hr
  - Core temp=97-100°F
- Maximize function of donor organs for benefit of recipient

Family Care

- Do not mention organ donation to the patient's family. (Premature notification has been shown to reduce family trust in the hospital and caregivers.)
- Identify the family's native/nurturing language
• Notify LifeNet Health of any visits by family members

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