



## Best Practices for Cooperation among OPOs, Tissue Banks, and Funeral Service Professionals

(July 2013)

More than 10 years ago, representatives of the National Funeral Directors Association (NFDA), the American Association of Tissue Banks (AATB) and the Association of Organ Procurement Organizations (AOPO) reached a historic agreement on a set of best practices involving organ and tissue donation. The purpose of this effort was to eliminate as many of the impediments to the facilitation of the donation process as possible. Many of these problems resulted from a lack of communication and understanding of different roles and responsibilities between and among funeral service professionals, tissue banks and organ procurement organizations in order to allow each to better serve the needs of the families in their shared communities.

In succeeding years, the NFDA, AATB and AOPO have promoted these guidelines to their members through workshops, articles and other modes; however, it became clear to each organization that after 10 years, it was time to revisit the best practices document. It was time to update it and discuss how it has worked (or not), how best to further educate our respective members on its provisions, and how to promote its use by the members of each group.

Each organization strongly believes that mutual support and recognition of the roles each organization and its members play in the donation process are imperative in order for any of these best practices to succeed. In achieving the goals outlined, we not only strengthen our individual organizations but also encourage the members of each organization to form a better understanding and a stronger bond at the local level that will better serve families.

It is agreed that each organization will promote and educate its members, state associations and others on the contents of this consensus document. This effort is essential if funeral service professionals, tissue banks and organ procurement organizations are to successfully meet the goals of individuals or families that wish to donate organs and/or tissues after death.

### **1. NOTIFICATION**

- It is preferable that the recovery agency contacts the family as soon as possible after the death of their loved one to inform them regarding the authorization process and necessary donor screening steps. The recovery agency should notify the funeral director handling the funeral arrangements for the donor family as soon as details of the anticipated recovery event are known. This notification should follow the authorization process for the donation. In the event that a funeral home is not known at the time of authorization, this notification will take place as soon as the donor family has selected the funeral home and the tissue recovery agency is informed.
- The recovery agency handling the donation should, at the time of the initial contact, notify the funeral director of the following:
  - The nature of the donation;
  - The geographic location of the tissue recovery;
  - The anticipated timing of the tissue recovery;
  - A contact person or phone number for the funeral director to use for updates, questions or concerns according to the agreed-upon preferred method of communication; and
  - Next-of-kin information.
- Recovery agency personnel and the funeral home director should establish an agreed-upon method of communication and the interval in which these communications should be made.
- Further, recovery agency personnel should contact the funeral home director according to the agreed-upon preferred method of communication as the situation develops or changes in the recovery process as it relates to the condition of the body, the pickup time, and/or the location of the donor body. This is especially important when the body is to be transported to a medical examiner/coroner for tissue recovery, autopsy or other purpose.
- When applicable, the recovery agency's representative will ensure that the medical examiner/coroner has the name and phone number of the funeral director/funeral home (if known) and that the funeral director should be notified when the body is ready for pickup.
- If the body is not left with the medical examiner/coroner, recovery agency personnel should contact the funeral director or other funeral home representative when the body is ready for pickup (according to an agreed upon method of communication).

## **2. DISCLOSURE**

- Once a donor has been screened and deemed qualified (eligible), the recovery agency representative who interviews the donor family should inform them that there are factors that may impact the timing of the funeral, including the timing of the recovery procedure and/or autopsy that need to be completed.
- The authorization process discussion should also include an explanation regarding the impact that the donation process may have on the condition and 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 and the recovery agency representative performing the interview.

- Any authorization for anatomical gift should describe the organs/tissues/eyes to be recovered.

### **3. RELIGIOUS CUSTOMS AND PRACTICES**

The recovery agency should respect and accommodate any religious or ethnic funeral customs and practices of the donor family, and the impact the recovery process may have related to those practices,

### **4. TISSUE RECOVERY PRACTICES**

To facilitate the embalming and preparation process, recovery agency personnel should contact the appropriate person at the receiving funeral home according to the agreed-upon method of communication to determine the exact recovery process that should be followed based on the specific funeral arrangements as determined by the donor family, including any special needs that must be considered. . In that regard, the following general procedures are recommended:

- All major arteries affected by the recovery process should be ligated;
- Prostheses for replacement of all recovered bones shall be provided;
- Prior to the completion of the recovery, contact the funeral home director or designee to determine the preferred type of incision closure;
- Consider using a U or Y chest incision rather than a midline incision;
- Especially with eye recovery or a prolonged recovery process, elevate the head with a head block; and
- If a viewing (private or public) is planned, there shall be no recovery of facial bones.

### **5. 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 and communicate that policy to all funeral homes in the recovery agency's service area. The funeral home should not assess the donor family any additional charges resulting from the donation.

To verify that embalming services have been performed by the funeral home on the donor body, the recovery agency may request the funeral home provide the following information on the reimbursement invoice:

- Confirmation of the embalming and the date the embalming took place.
- Reimbursement is accepted in lieu of additional charges to the decedent's family.

- Signature of person authorized to sign for the funeral home.

The reimbursement invoice with the above statement should be on the funeral home letterhead

## **6. COMMUNICATION/EDUCATION**

The most important and essential aspect of a successful relationship between funeral service professionals and recovery agency personnel 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 service professionals and recovery agency representatives 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 communication may promote a greater appreciation for each entity's role and contribute to a strong, lasting relationship.

In addition, the NFDA, AATB and AOPO all agree to commit to educating their respective members, state associations and other affiliated groups on this *Best Practices* document, including scheduling panel discussions with representatives of each organization at appropriate associations meetings and conventions. Further, designated representatives of NFDA, AATB and AOPO also agree to meet annually to review and update this document based on new or additional practices or other issues that may have arisen during the preceding year.

## **7. SUPPORT**

The NFDA, AATB and AOPO will publicly support and encourage their members to reinforce the concept of donation. The members of each organization should respect the donor'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, these concerns should be communicated to the management of 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. Recovery agency personnel should refrain from telling families that absolutely no change to the donor's appearance is guaranteed. The recovery agency should also be aware of the timing of the donation process and its effect on the funeral service itself.