

UNIVERSITY OF TORONTO HEART TRANSPLANT PROGRAM

HEART RETRIEVAL OPERATIVE NOTE

Hospital: \_\_\_\_\_

Date: \_\_\_\_\_

Patient Name: \_\_\_\_\_

Medical Record Number: \_\_\_\_\_

Surgeons: \_\_\_\_\_

The heart was exposed through a median sternotomy and pericardiotomy. It was assessed clinically for function and presence of atherosclerotic disease in the coronary arteries. The superior vena cava was dissected above the azygos vein. The pulmonary artery was dissected off the aorta to make room for an aortic cross clamp.

Just prior to arrest of the donor heart, a cardioplegia cannula was placed in the ascending aorta. In coordination with other retrieval teams, and after heparin was administered to the donor, the superior vena cava was tied and the heart was arrested by cross-clamping the ascending aorta and infusing three litres of cold Servator C cardioplegia solution into the aortic root. The heart decompressed through an incision in the inferior vena cava above the diaphragm, as well as an incision in either the left pulmonary vein or in the left atrial appendage. Following arrest of the heart, it was excised completely and placed into a jar containing cold Servator C cardioplegia solution where it was examined further for any abnormalities. The jar was then placed into two sterile bags, each tied individually, and was then placed into a cooler full of ice for transportation.

ADDITIONAL NOTES

Hemodynamic Abnormalities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Anatomical Abnormalities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_