



Clinical Process Instruction Manual

Perfusion & Packaging: Parathyroid

Policy:

For cases where Trillium Gift of Life Network (TGLN) provides surgical recovery support, TGLN's Surgical Recovery Coordinator (SRC) or designate will facilitate perfusion and packaging of parathyroid tissue, using aseptic technique and in accordance otherwise with the *Health Canada Safety of Human Cells, Tissues and Organs for Transplantation Regulations*.

The SRC or designate refers to the Clinical Services Coordinator to Surgical Recovery Coordinator Communication Process Instruction, CPI-9-406 prior to departing for recovery.

Process:

Prior to Departing TGLN

1. The SRC obtains the appropriate documentation required for recovery. Forms include:
 - *Reporting Form: Clinical Services Coordinator to Surgical Recovery Coordinator*
 - *Organ Donor Surgery Information Form (ODSIF)*
 - *Parathyroid Allotransplant Operative Note*
 - *Parathyroid Allotransplant Operating Room Data (with attached ABO and Serology)*
 - *HLA Lab Requisition Form*
 - *Public Health Ontario: General Test Requisition (if required)*
 - *Laboratory Services Requisition: STAT/NON-STAT Infectious Disease Testing of Organ Donors (if required)*
 - *Surgical supply list (if needed)*
 - *Specimen Labels*
 - *Interior label*
 - *Exterior label*

2. The SRC or designate prepares the parathyroid tissue surgical recovery kit. The SRC reviews the contents of the kit to ensure that all of the following required supplies are present:
 - 3 Sterile organ bags
 - 1 Sterile 90ml specimen container
 - 1 1L Normal Saline (for flush)
 - 1 1L University of Wisconsin (UW) solution (for storage)
 - 2 Venous return cannulas - sizes 12



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3. The SRC confirms that all sealed items have not been tampered with, equipment is sterile and all supplies are within expiration dates. The SRC replaces supplies and/or equipment if there is any uncertainty with respect to its integrity and places these supplies in a designated area in surgical retrieval room.
4. The SRC obtains 1 red Styrofoam cooler from the TGLN surgical supply store room and lines it with a yellow plastic bag. The SRC then places the following items within the cooler:
 - wet ice (fill 1/3 of the coolers)
5. The SRC picks up the recovery team at a predetermined time and location.

Upon Arrival at Recovery Hospital

6. The SRC notifies the Provincial Resource Centre (PRC) of his/her arrival time.
7. The SRC records the names of the Operating Room (OR) staff (if time permits) and the civic addresses of the donor hospital and contact information on the ODSIF.
8. The SRC introduces the recovery team to the OR staff.
9. The SRC reviews the patient's chart with the recovery team, confirming:
 - ABO,
 - serology results,
 - declarations,
 - consent and Coroner involvement (if required)

If required, the SRC discusses serology results with the Organ and Tissue Donation Coordinator (OTDC) or Clinical Services Coordinator (CSC).

10. The SRC records the first set of donor vitals on the ODSIF, which includes:
 - Time vital signs obtained,
 - Medications given by anaesthetist or currently infusing (RX) and dosage,
 - Blood pressure,
 - Heart rate.
11. The SRC completes the surgical supply list as they remove items from the surgical supply kit.
12. The SRC/designate requests a small back table from the OR nurse to use for parathyroid packaging. SRC scrubs in as per aseptic protocol and prepares the back table with the

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assistance of the circulating nurse. The following materials are required on the back table:

- Sterile specimen container
- 2 sterile organ bags

Surgical Recovery

13. Parathyroid recovery will take place prior to recovery of other organs
14. Upon commencement of surgical recovery, the SRC records the “skin cut time” on the ODSIF and notifies the CSC.
15. The SRC will enter ‘Parathyroid’ on the ODSIF in the space available for other organs. There will be no ‘flush time’ or ‘flush solution’ for parathyroid tissue.
16. The TGH procurement team will be responsible for recovering all parathyroid tissue using standard surgical technique. No other additional recovery or treatment of the parathyroid glands will be necessary.
17. Once recovered, the TGH procurement team will place the parathyroid tissue in the specimen container which will be filled with UW. In order to keep the parathyroid tissue sterile, it will then be packaged in two organ bags to create a triple barrier system. The organ label will be placed on the third barrier as per *Organ and Composite Tissue Labelling Process Instruction, CPI 9-417*
18. The procedure will add approximately 1-2 hours to the donor OR time.
19. The parathyroid specimen will be transported to UHN by the parathyroid recovery team with transportation arranged by the SRC.

Prior to Departing Recovery Hospital

20. The SRC ensures the recovery surgeons sign the *Parathyroid Allotransplant Operative Note* and leave this in the donor’s hospital chart.
21. The SRC ensures all lot numbers and expiry dates of all solutions and supplies used are recorded on the surgical supply list.
22. The SRC notifies the PRC of their time of departure.

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Records:

| Record Name | Form No. (if applicable) | Record Holder | Record Location | Record Retention Time (as a minimum) |
|--|--------------------------|---------------|-----------------|--------------------------------------|
| ODSIF | CSF-9-57 | PRC | PRC | 16 years |
| Surgical Supply List | CSF 9-58 | PRC | PRC | 16 years |
| HLA Lab Requisition Form | CSF-9-23 | PRC | PRC | 16 years |
| Retrieval Operative Note - Parathyroid | CSF-9-241 | PRC | PRC | 16 years |
| OR Data – Parathyroid | CSF-9-245 | PRC | PRC | 16 years |

References:

- Infectious Disease Testing – STAT Process Instruction, CPI-9-211
- Infectious Disease Testing – Non-STAT Process Instruction, CPI-9-213
- Microbiology Testing Process Instruction, CPI-9-214
- Clinical Services Coordinator to Surgical Recovery Coordinator Communication Process Instruction, CPI-9-406
- Organ and Composite Tissue Labelling Process Instruction, CPI-9-417
- Sterilization of Equipment – Organ Process Instruction, CPI-9-708
- Safety of Human Cells, Tissues and Organs for Transplantation. Health Canada, June 2007
- Health Canada Guidance Document for Cell, Tissue and Organ Establishments



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Exhibit 1 Retrieval Operative Note – Parathyroid

CSF-9-241

PARATHYROID RETRIEVAL OPERATIVE NOTE

Hospital: _____ Date: _____
Patient Name: _____ Medical Record Number: _____
Surgeons: _____

A low collar skin incision was made and subplatysmal flaps deepened until the strap muscles were encountered and separated/divided in the midline and dissected off of the thyroid gland beginning on the right side. The thyroid gland was retracted medially and inferiorly and the Right Superior and Right Inferior parathyroid(s) were identified. A similar procedure was performed on the opposite and the Left Superior and Left Inferior parathyroid(s) also identified. Once all of the glands were inspected and appeared normal they were resected in sequence and places in iced saline for transport. The skin was then approximated using biosyn stitches and then closed using a 5-0 subcuticular suture and covered with steristrips.

ADDITIONAL NOTES

Abnormalities: _____

Other: _____

Signature: _____