

Body Parts & Tissue - Storage, Cremation and Return

Document Type	Policy
Function	Clinical Practice
Directorate(s)	All Directorates
Department(s) affected	All clinical departments
Applicable for which patients, clients or residents?	All patients
Applicable for which staff members?	All clinicians
Key words (not part of title)	n/a
Author – role only	Quality Manager, LabPLUS
Owner (see ownership structure)	Chief Medical Officer
Edited by	Document Controller
Date first published	December 2002
Date this version published	February 2017 - updated
Review frequency	3 yearly
Unique Identifier	PP01/PCR/054 – v06.00

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1. Purpose of policy

The purpose of this policy is to ensure that the organisation's expectations are met regarding the legal and cultural obligations pertaining to the storage, return to patient and cremation of body parts and human tissue within Auckland DHB.

Exceptions

The policy covers all body parts and human tissue apart from the following:

- Over 20 weeks stillbirths/neonatal deaths (refer to deceased policy in Associated Auckland DHB documents section).
- Tissue/organs for transplantation
- Coroner's cases
- Consent procedures for body parts and tissue received from private specialists and GPs in the Auckland region. Responsibility rests with the requestor.
- Teeth extractions, hair and nail clippings (Body Parts Form CR2547 not required)
- Tissue fixed in blocks, tissue on microscope slides, and other minute pieces of tissue post processing held at Auckland DHB laboratories for future diagnostic use (for which informed consent must be obtained)
- Implanted medical devices

2. Policy statements

Health and safety regarding infectious material

Infectious material should not be returned if there is any risk to public safety. Safe handling of tissue / body parts that has been stored in formalin is covered in the information sheet "Information for handling of returned Body parts and tissue."

Tikanga / cultural respect

At all times body parts / tissue must be handled and stored with appropriate respect according to Tikanga best practice policy

Handling containers

All containers must be suitable, leak proof and fit for the purpose of use in regards to body parts / tissue.

Consent

A patient (or their representative and / or parent / guardian) must receive sufficient information regarding body parts and tissue management to give informed consent.

The patient / family / whānau should be provided with the appropriate information leaflet prior to giving informed consent and this is to be documented in the clinical record.

The information to the patient / family / whānau regarding management of body parts and tissue must include an explanation on testing, storage, return or disposal by cremation and must be relevant to the patient's clinical management. It is the responsibility of the team carrying out the procedure to gain this consent and to ensure that the patient / family / whānau understands the information regarding the management of body parts and tissue.

Cremation

All tissue not for return to a patient is sent for collective cremation. Any ashes that are produced are scattered in a designated area in the grounds of the Mangere Crematorium.

Collection

Tissue that is unable to be returned directly post procedure must be collected from LabPlus at a pre-arranged time, upon presentation of photographic identification. (A delegate may collect on the patient's

behalf as requested by the patient and on presentation of photographic identification). In exceptional circumstances, LabPlus staff members may agree to an alternative arrangement.

After hours collection

For any urgent collections after hours, the Duty Manager should be contacted to assist with this process. Refer to Duty Manager flow charts at the end of this document.

3. Body parts and tissue for return directly post procedure

Step	Action
1.	Prior to the procedure, the return of body parts / tissue must be discussed with the patient / family / whānau. An information leaflet should be provided at this time.
2.	Patient / family / whānau to indicate on the Agreement to Treatment form if the body part or tissue is to be returned immediately. The consenting doctor must complete the Body Parts / Tissue release form (CR2547) according to information on Agreement to Treatment form.
3.	Upon removal of body part or tissue, it must be placed in an appropriate container with a patient identification label.
4.	From the triplicate Body Parts / Tissue release form: <ul style="list-style-type: none">• One sheet to accompany the body parts / tissue• One sheet to be placed in patient's clinical record• One sheet to be handed to patient / family / whānau
5.	Container and Body Part / Tissue release form to be handed over to patient.
6.	Patient signs the form to confirm receipt of the tissue / body part.

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4. Body parts and tissue for laboratory testing and return to patient

Step	Action
1.	Prior to the procedure, the return of body parts / tissue must be discussed with the patient / family / whānau. An information leaflet should be provided at this time.
2.	Patient / family / whānau to indicate on the Agreement to Treatment form if the body part or tissue is to be returned. The consenting doctor must complete the Body Parts / Tissue release form (CR2547) according to information on Agreement to Treatment form.
3.	Upon removal of body part or tissue, it must be placed in an appropriate container with a patient identification label.
4.	From the triplicate Body Parts / Tissue release form <ul style="list-style-type: none"> • One sheet to accompany the body parts / tissue • One sheet to be placed in patient’s clinical record • One sheet to be handed to patient / family / whānau
5.	<p><u>For any patient that is to have body parts or tissue returned, there must be a “Body part to be returned to patient” sticker affixed to the following:</u></p> <ul style="list-style-type: none"> • the front-sheet in clinical record • the laboratory request form • Body Parts / Tissue release form accompanying specimen • specimen container • a record in the operating room register <p>Note: Limbs to be transported by HCA to LabPlus Level 3 Specimen Reception.</p>
6.	The specimen and form to be sent to LabPlus Specimen Reception Level 3 LabPlus building Grafton.
7.	Hand over to ward clinician regarding body parts / tissue sent to LabPlus.
8.	After testing, LabPlus Tissue Management oversee return.

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5. Body parts and tissue for laboratory testing and cremation

Step	Action
1.	Prior to the procedure, the return of body parts / tissue must be discussed with the patient / family / whānau. An information leaflet should be provided at this time.
2.	Patient / family / whānau to indicate on the Agreement to Treatment form if tissue not to be returned. If for disposal after laboratory testing, the body parts form (CR2547) does not need to be completed.
3.	Upon removal of body part or tissue, it must be placed in an appropriate container with a patient identification label.
4.	The specimen and form to be sent to LabPlus Specimen Reception Level 3 LabPlus building Grafton.
5.	After testing, LabPlus Tissue Management oversee cremation.

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6. Body parts and tissue for return to patient without laboratory testing (only if body part and / or tissue cannot be taken home immediately)

Step	Action
1.	Prior to the procedure, the return of body parts / tissue must be discussed with the patient / family / whānau. An information leaflet should be provided at this time.
2.	Patient / family / whānau to indicate on the Agreement to Treatment form if tissue to be returned. Consenting doctor to complete the Body Parts / Tissue release form (CR2547) according to information on Agreement to Treatment form.
3.	Upon removal of body part or tissue, it must be placed in an appropriate container fresh , not in formalin, with a patient identification label.
4.	From the triplicate of the Body Parts / Tissue release form <ul style="list-style-type: none"> • One sheet to accompany the body parts / tissue • One sheet to be placed in patient's clinical record • One sheet to be handed to patient / family / whānau
5.	For any patient that is to have body parts or tissue returned, there must be a "Body parts to be returned" sticker affixed to the following: <ul style="list-style-type: none"> • 'the front-sheet in clinical record • Body Parts / Tissue release form accompanying specimen • specimen container • a record in the operating room register
6.	Specimen and Body Part / Tissue release form to be sent to LabPlus Specimen Reception (level 3) LabPlus building Grafton. <ul style="list-style-type: none"> • Limbs to be transported by HCA to Freezer in Level 1 LabPlus unless being tested in which case they will be transported by HCA to Level 3 Lab Plus reception. • From Epsom Day Unit - Tissues to be transported to LabPlus via GLCC Phlebotomy
7.	Hand over to ward clinician regarding body parts / tissue sent to LabPlus.
8.	LabPlus Tissue Management oversee return.
9.	On discharge or if an inpatient death occurs, ward staff must contact LabPlus Tissue Management to facilitate release of tissue to patient / family. For any urgent collections after-hours the Duty Manager should be contacted to assist with this process. A yellow Body Parts sticker is on the front sheet of the patient's clinical record and / or a Body Parts / Tissue form in the clinical record for reference.

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7. National Women’s under 20 weeks baby / pregnancy tissue

Step	Action
1.	Prior to the procedure, the return or disposal of fetus (baby) / placenta must be discussed with the patient / family / whānau. An information leaflet should be provided at this time.
2.	Complete the Body Parts / Tissue release form (CR 2547) (triplicate) according to the agreement with the patient / family / whānau or as indicated on Agreement to Treatment form, if required.
3.	If a Post mortem is requested forward to Forensic Pathology with the placenta. <ul style="list-style-type: none"> • After the post mortem, the fetus (baby) / placental tissue is returned to the ward for the family to collect. • Forensic Pathology oversee cremation
4.	If tissue post mortem is not requested but examination of placenta / POC is required, forward to Histology. <ul style="list-style-type: none"> • LabPlus Tissue Management oversee return or cremation
5.	From the triplicate of the Body Parts / Tissue release form <ul style="list-style-type: none"> • One sheet to accompany the baby / pregnancy tissue • One sheet to be placed in patient’s clinical record • One sheet to be handed to patient / family / whānau

8. Body parts and tissue for cremation only

Step	Action
1.	Prior to the procedure, the return or disposal of fetus (baby) / placenta must be discussed with the patient / family / whānau. An information leaflet should be provided at this time.
2.	Patient / family / whānau to indicate on Agreement to Treatment form if tissue for cremation.
3.	Operating room staff member to complete the Body Parts / Tissue release form (CR2547) (triplicate) according to the indication on the Agreement to Treatment form and / or pre-op checklist.
4.	Upon removal of body part or tissue, it must be placed in an appropriate container with a patient identification label
5.	From the triplicate Body Parts / Tissue release form <ul style="list-style-type: none"> • One sheet to accompany the body parts / tissue • One sheet to be placed in patient’s clinical record • One sheet to be handed to patient / family / whānau
6.	Tissue is collected from the relevant unit / department by LabPlus staff member or sent via the Lamson system. Limbs to be transported by HCA to Freezer in Level 1 LabPlus.
7.	LabPlus Tissue Management oversee cremation.

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9. Body parts and tissue in acute / emergency cases

Step	Action
1.	In the case of acute or emergency surgery where no Body part / tissue Release form (CR2547) or Agreement to Treatment form (CR0111) has been filled out, or where the form "Authority to treat without consent (CR 0114) has been completed, then any body part / tissue removed is to be treated as if the patient has requested it to be returned. The OR nurse must complete a Body part / tissue release form (CR2547). The procedure is then followed as if the patient had requested that body part / tissue to be returned.
2.	The ward clinician must discuss with the patient his / her wishes regarding the return and / or retention of body part / tissue.
3.	The ward clinician must inform LabPlus Tissue Management of the outcome of patient's wishes.

10. Tissue storage within operating rooms and Blood Bank

At times it is required that tissue is stored within the operating rooms for the purpose of auto-transplantation. This tissue includes vessels and skin. These are stored in the appropriate fridge / freezer used for tissue storage only.

Bone is stored in the Blood Bank

In the event a patient dies in the ward who has tissue in storage it is the responsibility of the ward nurse to repatriate the tissue with the deceased / tupapaku.

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11. Documentation process for storing tissue for elective procedures

Step	Action
1.	Operating room RN must ensure that the Agreement to Treatment form CR0113 or CR0111 and Body Parts / Tissue Release form CR2547 are completed.
2.	Document in PIMS: <ul style="list-style-type: none"> • Type of body part / tissue stored • Location of storage • If tissue not re-implanted whether it is for disposal or return
3.	If patient consents for return of the body part place the yellow rectangular storage sticker on the patient’s clinical record. Yellow circular “Tissue in storage” sticker on patient’s front sheet.
4.	Package tissue as per surgeon’s preference with patient identification labels on the packaging.
5.	Operating room RN stores body part / tissue in appropriate fridge / freezer and: <ul style="list-style-type: none"> • Completes log book documentation • From the triplicate Body Parts / Tissue release form • One sheet to accompany the body parts / tissue to the freezer and placed in body parts folder • One sheet to be placed in patient’s clinical record • One sheet to be handed to patient / family / whānau
6.	The ward / Intensive care nurse is responsible for informing patient / family / whānau on discharge or death that the tissue is in storage and facilitating return from the operating room.

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12. Documentation process for storing tissue in procedures when consent is not gained (acutes)

Step	Action
1.	When the patient has not signed a consent form it must be assumed that the tissue is to be returned until otherwise advised by the patient / whānau / family.
2.	Document in PIMS: <ul style="list-style-type: none"> • Agreement to treatment (CR 0111) is not signed, or Authority to treat without consent form (CR 0114) has been signed • Type of body part / tissue • Location of storage
3.	Place into patient's clinical record: <ul style="list-style-type: none"> • Body part / tissue rectangular sticker in patient's clinical record (CC5247) • Body part / tissue round yellow sticker (CC5246) onto front sheet • Agreement to treatment form CR0111 • Authority to treat without consent form (CR 0114) • Body part / tissue release form (CR2547) • Yellow rectangular storage sticker on the clinical record • Yellow circular tissue in storage sticker on patient's front sheet
4.	Operating room RN stores body part / tissue in an appropriate fridge / freezer: <ul style="list-style-type: none"> • Completes log book documentation • From the triplicate Body Parts / Tissue release form • One sheet to accompany the body parts / tissue to the freezer and placed in body parts folder • One sheet to be placed in patient's clinical record • One sheet to be handed to patient / family / whānau
5.	The ward / Intensive care clinician is responsible for ensuring that the body Parts / Tissue Release form is completed and for contacting Level 8 Neurosurgery Charge Nurse and or Level 8 Vascular Charge Nurse.
6.	This form is collected / returned to the operating room for storage.
7.	The ward / Intensive care clinician is responsible for informing patient / family / whānau on discharge or death that the tissue is in storage and facilitating its return from the operating room.

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13. Skull bone flap management and storage

Step	Action
1.	Get the NZ Blood Service Kit from Neuro unsterile stock room. Check the Expiry date and integrity of tamper label Follow the instructions on the reverse of Theatre checklist (180F03504) in the kit (Use the ice pack stored in Tisseel freezer).
2.	Circulating nurse to complete the Request for Bone Flap storage Form (180F03604) and if applicable place with Body part / tissue release form (CR2547)
3.	Place sterile specimen bags in unsterile plastic bag with extra patient labels. Place one ice pack directly on top of the sealed bone flap container. Tuck the bubble wrap bag with the specimens beside the bone flap container. Put the plastic bag with documents on the top (Ice will coagulate the blood so keep it as far away as possible).
4.	Seal the chilly bin with sleek.
5.	Contact the Team leader or Scientist in Blood bank (3072834 or extn: 24013 / 24015)
6.	Send the chilly bin to Level 2 Blood Bank with an HCA
7.	Document in PiMs and Bone flap log book (outside Neuro CN office)
8.	Place large yellow bone flap sticker in the patient's clinical notes and small yellow sticker on the front sheet
9.	Confirm plan for skull flap and patient ID with the surgeon during the Sign out
	<i>CONTACT NZBS TISSUE BANK ON 027 567 5291 FOR ANY QUERIES 24/7</i>

14. Liver vascular vessel management and storage

Step	Action
1.	If not already in a sterile pot, scrub nurse to place vessels into 500 mL plastic sterile pot and fill to ¾ full with preservation solution Belzer solution.
2.	Circulating Nurse to label pot with recipient label / donor / zoo number / date / time / surgeon / specimen type / blood group / expiry date (14 days).
3.	Place in 2 x sterile bags, with appropriate documentation. Place in Level 8 tissue fridge and log into tissue book.
4.	Fill in vessel storage book with patient sticker, date, time.
5.	When vessels are removed from fridge the tissue book is completed to record if used or disposed.
6.	After 14 days the tissue is either sent to LabPlus Specimen Reception Level 3 LabPlus building Grafton for return (if requested) or for cremation with the Body parts / Tissue Release form.

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15. Skin management and storage

Step	Action
1.	Scrub nurse to prepare skin as per surgeon's preference e.g. wrap in saline soaked non-raytex gauze swab.
2.	Place in small dry sterile pot.
3.	Circulating nurse to label pot with patient label / date / time / surgeon / specimen type / expiry date (28 days).
4.	Place into biohazard bag with body part / tissue release form or disposal of tissue form.
5.	<ul style="list-style-type: none"> • Place in Level 8 OR tissue / bone fridge • Fill in tissue book.
6.	After 28 days the skin will be disposed of or sent to LabPlus Specimen Reception Level 3 LabPlus building Grafton to be returned to the patient with the Body parts / Tissue Release form if requested.

16. Return or disposal of tissue or skull flap stored in Blood Bank or Operating Rooms no longer required for replantation

Step	Action
1.	Lead surgeon communicates that the tissue or bone is no longer required
2.	For Returns from the OR (skin / vessel / bone): <ul style="list-style-type: none"> • Patient completes Body tissues return / disposal forms for tissue. • OR staff sends Body Parts / Tissue release form with accompanying specimen to the LabPlus Specimen Reception (level 3) LabPlus building Grafton to be returned to patient. • Put stamp "RTP" on register and tissue form
3.	For Returns from Blood Bank (skull flap): <ul style="list-style-type: none"> • Neuro CN sends the appropriate yellow form to the NZ Blood Service on request • The patient will contact the blood bank and collect the tissue from there
4.	If the patient is deceased, the OR is contacted by the ward nurse responsible for the patient's care and tissue is sent to the appropriate ward or to Forensic Pathology to accompany the deceased to the funeral director.
5.	For Disposal: <ul style="list-style-type: none"> • Send to LabPlus Specimen Reception (level 3) LabPlus building Grafton for disposal via the normal LabPlus process. Add stamp "TDIS" to register and tissue form.
6.	Complete appropriate log book and database as appropriate.

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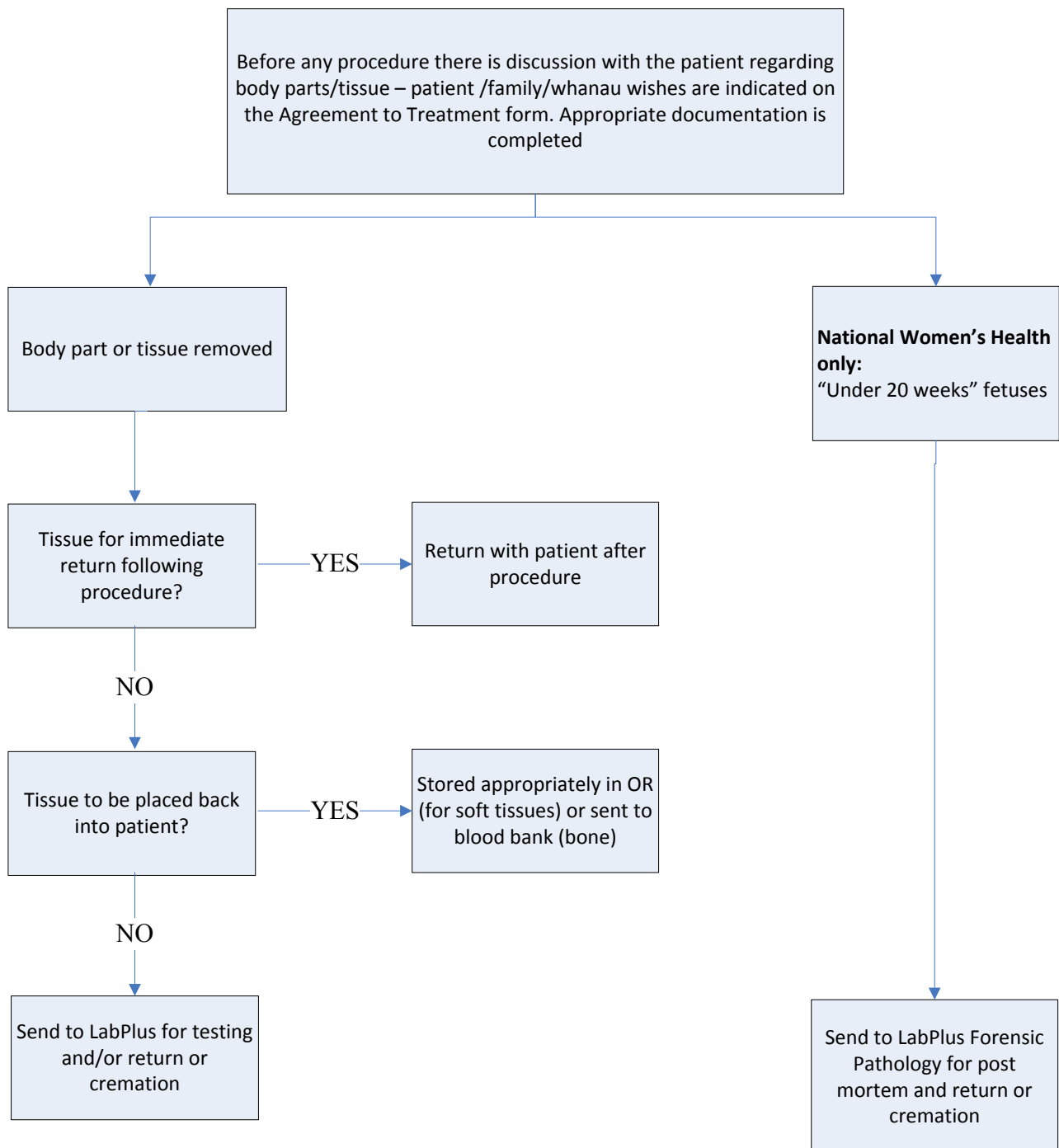
17. Return of donated organs

Organs and tissue that have been donated yet unable to be used are to be returned to the deceased donor in a timely manner.

Step	Action
1.	Where a donated organ or part thereof, is unable to be transplanted the Donor Coordinator must be contacted.
2.	The Donor Coordinator will advise whether the organ or part thereof, is to be returned to the donor family / whānau or is to be respectfully cremated as for per LabPlus disposal of body parts / tissue procedure.
3.	If the organ, or part thereof, is to be returned to the deceased, the Donor Coordinator will make all arrangements for the organ or tissue to be returned. The organ or tissue to be returned is packed in a bowel bag, and put in an ice filled polystyrene chilly bin (as per kidneys) and sealed with sleek. Complete the body part / tissue release form (CR2547) with the donor details which will be provided by the Donor Coordinator. Enclose form in a specimen bag and place form inside chilly bin. Seal and label chilly bin as per Donor Coordinator's instructions. If the Donor Coordinator does not have the address for the organ / tissue to be returned to yet, place a piece of sleek across the top of the chilly bin, write the donor's number, (NHI number and date of birth – will need to get this from the Donor Coordinator). The chilly bin is then placed in blood or specimen fridge.
4.	Make sure this information is passed onto the floor coordinator / team leader. When the courier company picks up the chilly bin, remove the sleek with the patient information and replace with the address the courier is to deliver the chilly-bin.
5.	Any organs, or part thereof, not being transplanted or returned to the deceased, are sent to LabPlus Specimen Reception (level 3) LabPlus building Grafton for disposal via the normal LabPlus process. The donor NHI / ZOO number only must be used on the disposal form as identification.

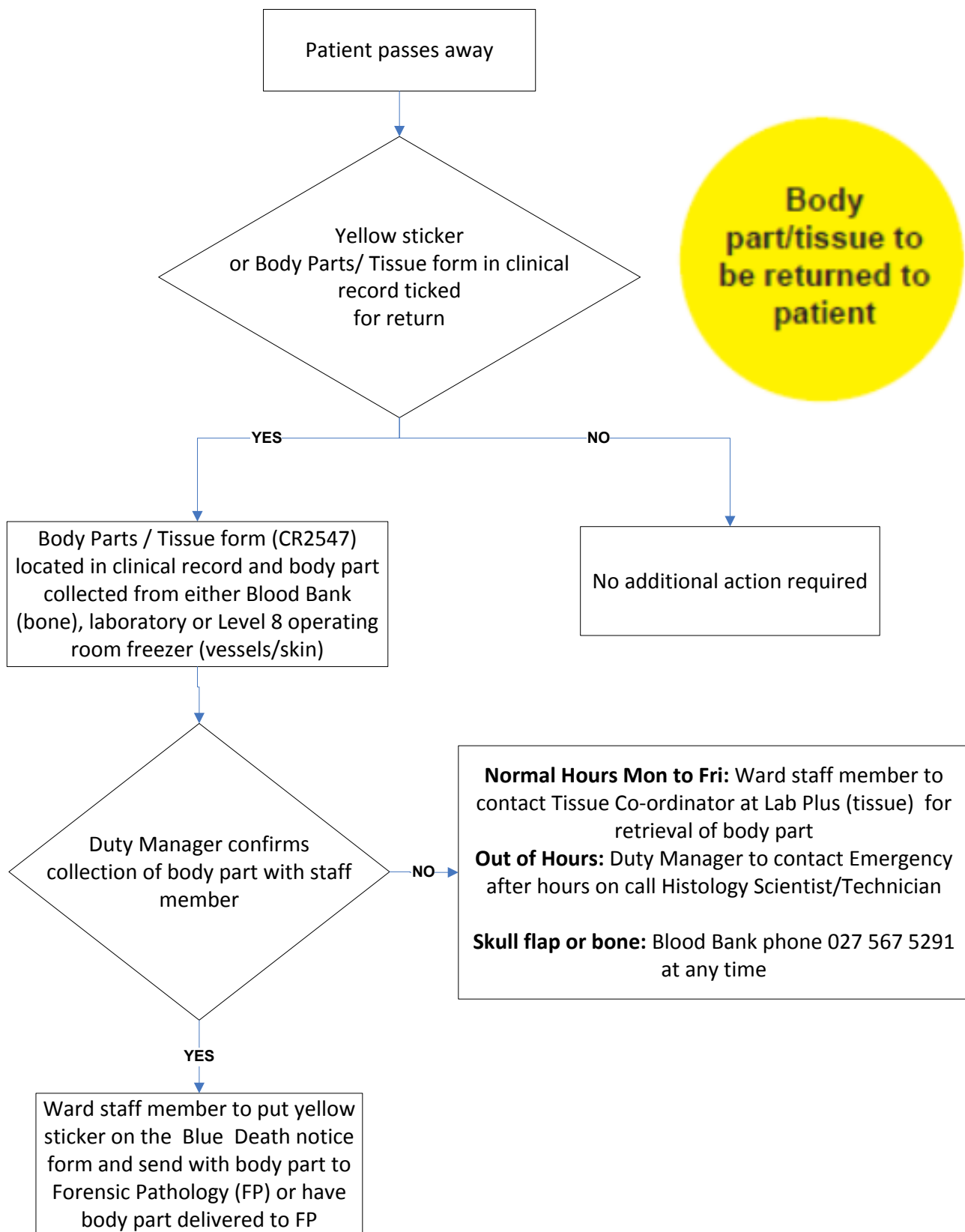
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18. Procedure



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19. Nurse responsible for patient care / Duty manager (all clinical areas)



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20. Body parts yellow sticker



21. Legislation

- Human Tissue Act 2008
- Code of Health and Disability Services Consumers' Rights Regulation 1996
- Hauora o te Tinana me ona tikanga (Guideline)

22. Associated Auckland DHB documents

- [Bicultural Policy](#)
- [Code of Rights](#)
- [Deceased \(Tupapaku\) +/- Referrals to the Coroner](#)
- [Heart Registry](#)
- [Informed Consent](#)
- [Liver Tissue Collection](#)
- [Specimen Management](#)
- [Tikanga Best Practice](#)
- [Waste Management](#)

Leaflets

- [Information for handling of returned Body Parts and Tissue](#) (CC5073)
- Information regarding the Examination, Return and Cremation of Body Parts and Tissue (CC5074)

Clinical forms

- Agreement to Treatment (CR0111)
- Authorisation to retain Heart and Lungs (CR2017)
- Authorisation to retain Liver part (CR8706)
- Authority to treat without consent (CR0114)
- Body parts / Tissue Release form (CR2547)
- National Women's Only: Pink form – Placenta Release form (stillbirths / neonatal deaths CR2024)
- Post mortem Consent non Coroners (CR0025)

23. Disclaimer

No guideline can cover all variations required for specific circumstances. It is the responsibility of the health care practitioners using this Auckland DHB guideline to adapt it for safe use within their own institution, recognise the need for specialist help, and call for it without delay, when an individual patient falls outside of the boundaries of this guideline.

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24. Corrections and amendments

The next scheduled review of this document is as per the document classification table (page 1). However, if the reader notices any errors or believes that the document should be reviewed **before** the scheduled date, they should contact the owner or the [Document Controller](#) without delay.

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