# **Entering Donation Data** (Referral Data)

All Medicare and Medicaid hospitals and all Medicare Critical Access Hospitals (CAHs) in an OPO's service area must be included in the list of donor hospitals maintained in UNet<sup>SM</sup>. Medicare and Medicaid hospitals and CAHs are required by Conditions of Participation (CoP) regulations to report all deaths. The UNet donor hospital list should include all hospitals, such as acute care hospitals, psychiatric hospitals, and rehabilitation hospitals located within the OPO service area. Skilled-nursing facilities and nursing facilities are not required to report all deaths and should not be included in the list.

**Note:** A Critical Access Hospital (CAH) is designated as such by the state in which it is located and must be part of that state's rural health network. Because Medicare reimbursement for CAHs differs from Medicare reimbursement for other Medicare hospitals, Medicare places limitations on CAHs in regard to number of acute care beds, patient length of stay, and location. Although CAHs are hospitals, they are a different provider type under Medicare law.

In order to assess the impact of the Medicare and Medicaid Hospital Conditions of Participation for Organ, Tissue and Eye Donation on hospital organ donation practices, OPOs are required to provide donor hospital-specific data on donor death notifications and organ recoveries. This reporting began in September 2001 for death notifications made to your organization during the month of August 2001 and this data has been gathered for every month thereafter.

Recording donation data for every hospital in your OPO service area, even if there were no donations for that month, allows the hospital to be accurately accounted for in the data that is used to evaluate Medicare and Medicaid Hospital Conditions of Participation.

On the first day of each month, a new report will be provided for the OPO to record donor death notifications for the preceding month. (See OPTN/UNOS Policy 7.7 (Death Notification Information) for clarification.) The data is due within 30 days or before the next month's report generates.

To enter the donation data:

- 1. Select **Donation (Referral) Data Report** from the Reports drop-down menu.
- 2. The Monthly Donation Data Report page displays for your center.



3. Click the applicable **Month** to display the Monthly Donation Data Report - Add Donor Hospital Information page for that month.

Monthly Donation Data Report ③ Add Donor Hospital Information on an Incomplete Report ALOB Alabama Organ Center for June 2006								Return to Donor Data Search Results > View incomplete donation data reports >			
Report Summary			Reported Totals for June						Reported Year-To-Date Totals		
Number of Donor Hospitals: 147					ALOB		All OPOs			ALOB	All OPOs
Due Date: 07/31/2006			Death Notice		0	0			Death Notice	37	285
Number of Completed Referrals: 0 Number of Incomplete Referrals: 58			Eligible Deaths		0		0		Eligible Deaths	29	65
Number of OPOs Reporting: 58			Consented Eligibles		0		0		Consented Eligibles	19	37
			Donor		9		13		Donor	70	122
Donation	Data By Hospital										
Provider ID •	Hospital Hame 🔻	Dea Hoti	ath Eligib			Consented Eligibles •		Donor	Recovered/Transplanted		
010001	Amber Time Hospital DOTHAH, AL 35819 Trauma Level II							0			

4. A monthly report displays at the top of the page, listing the number of death notifications, eligible donors and consented eligibles that have been reported to date by your OPO and by all OPOs. The number of OPOs that have reported their Donation Data for this month will also display. The list of donor hospitals that appear in this section should include ALL hospitals in your OPO's service area, regardless of the number of death notifications you receive from the hospital each month. The list is sorted by donor hospital provider number, but can be re-sorted by hospital name by clicking on the red triangle.

**Note:** Trauma Level I and II designations are entered in the Donor Hospitals section. These designations are given to hospitals by the American College of Surgeons (ACS) in order to set standards with trauma care, and to evaluate and monitor their care. For more information, visit the ACS website at <a href="http://www.facs.org/trauma/verificationhosp.html">http://www.facs.org/trauma/verificationhosp.html</a>. If the Trauma Level indicated is incorrect, you may edit it by following the steps in **Editing a Donor Hospital**.

5. You must enter the number of **Death Notices**, **Eligible Deaths** donors and **Consented Eligibles** obtained during the month. The number of organs Recovered/Transplanted will automatically display in this column. The **field descriptions** are listed at the end of this document.

If there were no donor death notices from a listed donor hospital during the month, enter a zero in the **Death Notification** field. The **Eligible Deaths** and **Consented Eligibles** fields for the donor hospital will then default to zero as you move to the next field.

**Note:** If a donor hospital is no longer in your service area, you may inactivate the donor hospital so it will not show up in future lists by following the instructions for **Inactivating a Donor Hospital**. Hospitals that are inactivated within a particular month will still display on that month's report. This allows any death notices to be reported for the time that the hospital was noted as **Active** in UNet.

Note: If you received a death notice from a donor hospital that is not on your list, you

may add the donor hospital to the monthly report, by clicking on the Add hospital to report link in the Related Links box. See Adding a Donor Hospital to the OPO List for details.

- 6. After entering the data in the fields, click on **Save**. A message displays indicating that the data was successfully updated.
- 7. When all the data has been entered, click on **Complete**. A message displays asking you to indicate if the report is complete.
- 8. To return the report to make changes, click on **Cancel**. To proceed, click on **OK**. A message displays indicating that the data was marked as complete.

# **Field Descriptions**

**Death Notice:** All deaths or imminent deaths (ventilated and non-ventilated) reported by a hospital to the OPO, tissue or eye bank located within the OPO service area.

**Eligible Deaths:** An eligible death for organ donation is defined as the death of a patient 70 years old or younger who ultimately is legally declared brain dead according to hospital policy independent of family decision regarding donation or availability of next-of-kin, independent of medical examiner or coroner involvement in the case, and independent of local acceptance criteria or transplant center practice, who exhibits none of the following:

## Active infections (specific diagnoses) [Exclusions to the Definition of Eligible]

#### Bacterial:

- Tuberculosis
- Gangrenous bowel or perforated bowel and/or intra-abdominal sepsis
- See "sepsis" below under "General"

#### Viral:

- HIV infection by serologic or molecular detection
- Rabies
- Reactive Hepatitis B Surface Antigen
- Retroviral infections including HTLV I/II
- Viral Encephalitis or Meningitis
- · Active Herpes simplex, varicella zoster, or cytomegalovirus viremia or
- pneumonia
- Acute Epstein Barr Virus (mononucleosis)
- West Nile Virus infection
- SARS

### Fungal:

- Active infection with Cryptococcus, Aspergillus, Histoplasma, Coccidioides
- Active candidemia or invasive yeast infection

#### Parasites:

 Active infection with Trypanosoma cruzi (Chagas'), Leishmania, Strongyloides, or Malaria (Plasmodium sp.)

### Prion:

· Creutzfeldt-Jacob Disease

## **General [Exclusions to the Definition of Eligible]:**

- · Aplastic Anemia
- Agranulocytosis
- Extreme Immaturity (<500 grams or gestational age of <32 weeks)
- Current malignant neoplasms except non-melanoma skin cancers such as basal cell and squamous cell cancer and primary CNS tumors without evident metastatic disease
- Previous malignant neoplasms with current evident metastatic disease
- · A history of melanoma
- Hematologic malignancies: Leukemia, Hodgkin's Disease, Lymphoma, Multiple Myeloma
- Multi-system organ failure (MSOF) due to overwhelming sepsis or MSOF without sepsis
  defined as 3 or more systems in simultaneous failure for a period of 24 hours or more
  without response to treatment or resuscitation
- Active Fungal, Parasitic, viral, or Bacterial Meningitis or encephalitis

**Consented Eligibles:** The number of consents that were obtained on death notifications meeting organ donor eligibility requirements.

**Donor:** The number of donors with organs that were reported as recovered or transplanted from the specified donor hospital. This information is obtained from completed Donor Organ Disposition (Feedback).

**Recovered/Transplanted:** The number of organs that were reported as recovered and transplanted from the specified donor hospital. This information is obtained from the donor record and Donor Organ Disposition (Feedback).