Policy: The District of Columbia Office of the Chief Medical Examiner (DC OCME) will actively participate in the implementation of the Uniform Anatomical Gift Act by authorizing the removal of organs and tissue in accordance with existing law and accepted medical practice. DC OCME will also take every reasonable step to ensure that organ and tissue activities do not in any way compromise the main mission of determining cause and manner of death, the interpretation of wounds or the collection of evidence.

Purpose: To increase the supply of suitable organs and tissues for transplantation.

Scope: This procedure applies to the Forensic Investigations Unit and Medical examiners.

The DC OCME is fully aware of the tremendous need for organs and tissues for transplantation; therefore, the general policy of DC OCME is to cooperate with Washington Regional Transplant Community (WRTC) to the fullest degree and to grant permission for requesting permission to procure organs in as many cases as possible. Any issues requiring immediate attention should be brought to the Chief Medical Examiner or Deputy Chief Medical Examiner.

1. WRTC Requests
   1.1. It is the responsibility of the Investigations Division to ascertain as many facts as possible regarding the decedent and circumstances of the death
   1.1.1. The Medicolegal Death Investigators/Forensic Investigators (MLI/FI) will note the organs/tissues that WRTC wants to recover.
   1.1. MLI/FI who receives organ and tissue donation requests shall discuss the requests along with the circumstances of the case with the on call medical examiner so that an informed decision can be made.
   1.2. All information is to be entered in the WRTC Request/Procurement Tracking (Organ Donors) module in Forensic Automated Case Tracking System (FACTS) Notification

2. Approval/Denial for Organ/Tissue Procurement
   2.1. The decision to grant permission for tissue or organ procurement is the sole decision of the medical examiner on call.
   2.1.1. The decision is based on the nature of the death and the information available at the time the request is made. Depending on the nature of the case the pathologist may release any and/or all organs or tissues based on the medico legal requirements of the death investigation.
   2.1.1.1. There will be times when it will be necessary to connect WRTC with the medical examiner on call so that medico legal issues concerning wound
interpretation, evidence collection or preservation, or other factors that impact the responsibility of the DC OCME may be addressed.

2.2. The on call medical examiner may give permission for recovery on the following type of cases:

   2.2.1. Accidental deaths, including traffic accidents where accurate hospital documentation of injuries exists;
   2.2.2. Drowning;
   2.2.3. Prescription drug overdose cases;
   2.2.4. Suicide (with or without suicide notes) involving gunshot wound of the head;
   2.2.5. Accidental and natural death in the workplace;
   2.2.6. Homicide cases; and,
   2.2.7. Sudden unexplained infant deaths.

2.3. Approval for tissue recovery

   2.3.1. Corneas shall not be removed on cases with petechial hemorrhages of the eyes or facial injuries unless authorized by the on call medical examiner.
   2.3.2. Heart valve removals require prior approval from the on call medical examiner.
   2.3.3. Bone procurement will not be allowed in areas of cutaneous trauma.

2.4. If the medical examiner is considering withholding organs of a potential donor for any reason, the medical examiner and/or MLI/FI shall be present during the procedure to remove the organs.

   2.4.1. All organs recovered must be documented with photographs.
   2.4.2. If the medical examiner is not present, the MLI/FI will communicate with the medical examiner so that a decision about organ procurement can be made.
   2.4.3. If the procurement of organs is denied, the medical examiner will document the reason(s) for the denial in the Supplemental Report in FACTS.

3. Post Recovery of Organs and Tissues

   3.1. Copies of photographs taken by WRTC must accompany decedent to DC OCME;
   3.2. Obtained specimens, including blood, must accompany decedent to DC OCME; and,
   3.3. WRTC will be requested to relate to OCME what organs/tissues were recovered. The investigator will document information in WRTC Request/Procurement Tracking (Organ Donors) FACTS Notification.

4. Post Examination Recovery

   4.1. If the donation is to take place after the examination is performed, the staff should collect requested specimens during the examination in order to assist with organ procurement. Staff will frequently be asked to avoid collecting specific specimens while possible tissue donations are being considered. This is acceptable within what is deemed an appropriate amount of time.
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