

Tissue tracking: A simplified technique

Bones, ligaments, corneas, skin, veins, and valves are examples of human tissues used in surgery. The Joint Commission on Accreditation of Healthcare Organizations requires facilities implanting tissue to maintain records that allow tracking of human tissues from the donor source to the recipient patient. Recordkeeping is also recommended by the Association of periOperative Registered Nurses (AORN).

New York State has strict regulations that require any institution that engages in transplantation of human tissue to be licensed, track acquisition and implantation of tissue, and submit annual reports to the state. To comply with these regulations, our organization developed a system for logging and tracking tissues that may be helpful to others who are setting up tissue-tracking protocols.

New York State defines a tissue transplantation facility as “a facility which temporarily stores and transplants tissues, except for tissue intended for autogenic transplantation, provided such tissue does not leave the operating room for processing and/or storage.”

For a facility to maintain a license as a tissue transplantation facility, the tracking required by the general operating room involves:

- the name of the tissue bank providing the tissue
- the description of tissue with identifying serial/ID number
- the condition of the tissue upon receipt
- a log for disposition of tissue, including the name of the patient receiving the tissue implant
- chart number of the patient receiving the tissue
- date of implantation
- destruction of tissue if appropriate.

Figure 1 shows a tissue tracking log used to collect the data when the tissue is received by the implanting institution, including the information outlined by the New York State Department of Health. The second half of the log sheet identifies the disposition of the tissue, including the patient name and chart number, date of implantation, the implanting surgeon, and the circulating nurse who retrieved the tissue from the storage location.

For accountability, a system of daily counting was instituted similar to the change-of-shift controlled substance counts. The count is recorded on a Daily Tissue Bank Count sheet (**Figure 2**). As each item is received from an external tissue bank, it is entered on the count sheet with the date and the balance. When tissue is removed for use, the date and the patient's name are entered, and the item subtracted from the balance.

The responsibility for reconciling the number of tissues stored by performing a complete count is assigned to the night shift charge nurse. Each night, the total number of stored tissues is counted and entered on the count sheet. Discrepancies in numbers of specific tissue are brought to the attention of the nurse manager at morning report. The discrepancy can be investigated and corrected by reviewing the operative logs from the previous day. By ensuring this protocol is performed daily, tracing a discrepancy involves investigating only a

24-hour period with a limited number of patients or operative logs. **Figure 3** demonstrates use of the Daily Tissue Bank Count sheet.

Individuals have generously given of themselves to become organ and tissue donors. It is imperative that we follow these regulations to ensure the safe use of their gift of life.

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