

Name:	Title:
Date of Test:	Hospital/Unit:

**Arkansas Regional Organ Recovery Agency
Designated Requestor Training
Self-Study Test
2006**

1. Which statement is true since the 1998 CMS Conditions of Participation Rule?
 - A. All families must be approached about donation options regardless of age or donation potential.
 - B. All deaths must be reported to ARORA and will be evaluated for donation potential.
 - C. The bedside nurse and attending physician must notify the family of their options to donate.
 - D. The attending physician can determine if the patient will be a suitable organ donor.

2. The ARORA telephone number to make a referral is: _____

3. The goals of the 1998 CMS conditions of Participation are the following:

increasing _____,
 maximize _____,
 learn _____,
 improve _____.

4. An early referral to ARORA is defined as anytime the patient meets criteria for imminent death, and prior to any measures taken to withdraw or decelerate care on neurologically injured patients.

True False

5. Imminent Death as defined by the Organ Procurement Organizations refers to those patients who are severely brain injured, ventilator dependent with either a GSC \leq 5 or a plan to discontinue mechanical/pharmacological support./

True False

6. The patient's family should be approached about donation before they are told their loved one has died.

True False

7. The importance of pre-screening a potential donor includes **(Circle all that apply)**:

- A. Reduces inappropriate requests for donation to family members.
- B. Sets the family up for disappointment
- C. Promotes collaboration between ARORA staff and hospital Designated Requestors
- D. Provides the Designated Requestor with accurate information to offer the appropriate options to the family.

8. All of the following information is correct **except**:
- A. There is no cost to the donor family.
 - B. Donation does not delay funeral arrangements.
 - C. Most religions support donation.
 - D. One organ and tissue donor can only help one person.
9. Offering families a choice about donation often empowers them and gives control back to the family.

True

False

10. The term used to describe the time between informing family members about the death of their loved one and talking to them about donation is called _____.

11. Tissues used for transplantation include:

(Circle all that apply)

- A. Arteries/Veins
- B. Teeth
- C. Skin
- D. Bone
- E. Eyes for corneas
- F. Heart for valves

12. Choose all of the following that make the discussion with families about donation more compassionate:

- A. Open-ended questions and open posture/gestures.
- B. Speaking quickly and saying what you want to say.
- C. Answering questions and clarifying family concerns.
- D. Providing accurate information.
- E. Prior to talking with families, ask what they have been told by the physicians up to this point.
- F. Let the family know this is their personal choice.
- G. Tell the family they have only a few minutes to make a decision.

13. It is helpful to the funeral directors and to the family for final viewing to elevate the patient's head soon after death.

True

False

14. The role of the Designated Requestor (DR) is to work collaboratively with the Family Services Counselor when there is a potential for organ donation so that the consent process can be facilitated jointly.

True False

15. The role of the DR is to offer the option of donation to families when there is a potential for tissue/eye donation.

True False

16. Informed consent limits liability and gives accurate information to the family.

True False

17. Tissue donation will not take place:

(Circle all that apply)

- A. If serologies are positive for HIV or Hepatitis
- B. If the patient has metastatic cancer
- C. If information discovered through the medical/social history indicates a high risk for infection or disease
- D. If pt was intoxicated upon admission
- E. If inclement weather delays the recovery team's arrival
- F. When the coroner will not release for donation.

18. In determining when to approach the family about donation which factors should be considered:

- A. Length of time the family has known about the death.
- B. Patient's donation potential
- C. Talking with the family in a quiet, private, place.
- D. A and B only
- E. All the above are true.

19. You will need to know all of the following when you make the call ARORA to report a death, **except**:

- A. Patient name.
- B. Patient age/sex/race
- C. Referral person name and title.
- D. If the patient had been on a ventilator
- E. Hospital name and unit phone number
- F. Patient's home address

20. List 2 locations most appropriate to inform a family of donation opportunities.

- 1.
- 2.

21. List 3 locations to be avoided when presenting donation opportunities to the family.

- 1.
- 2.
- 3.

22. The Designated Requestor's body language is important. List 3 body postures or cues to practice and why.

- 1.
- 2.
- 3.

23. If a family member is sitting with their arms crossed across their chest, it means they are not interested in donation.

True

False

24. Identify who should give the family the following information. Match the information with the type of information:

_____ Inform the family of the death.

_____ Approach the family about tissue/eye donation.

_____ Offer the family the option of Organ Donation

_____ Obtains recorded telephone consent.

- A. ARORA Family Services Counselor and Designated Requestor collaboratively
- B. Designated Requestor
- C. ARORA Procurement Coordinator
- D. Physician

25. Write the "Bridge" to begin the donation conversation with the patient's family.

26. If the potential donor is not in the registry, write the “Script” for offering donation options to the legal next of kin.

27. If the potential donor is in the registry, write the “script” for offering donation options to the legal next of kin.

28. Donation criteria are always changing, making it necessary to pre-screen all deaths.

True False

29. The goal of offering hospitality to the potential donor family is to increase consent rates.

True False

30. Donor families should feel supported, no matter what decision was made.

True False

31. If a telephone consent needs to be obtained, it must be recorded by ARORA.

True False

32. Number (1-6) the legal next-of-kin in order of priority

____ Guardian

____ Adult Brother or Sister

____ Either Parent

____ Spouse

____ Grandparent

_____ Adult Son or Daughter

33. When the legal next-of-kin is not at the hospital, the Designated Requestor must _____.

34. Place A. or B. after each statement indicating whether the DR should provide information to the potential donor family or ask the family members questions.

A. Provide Information

B. Ask questions

After you introduce donation _____

When the family expresses a concern _____

After you understand the concern _____

You are losing control of the conversation _____

When a family member is angry _____

You explain the continuation of the consent process by ARORA _____

You explain the cause of death _____

The family members start to repeat themselves _____