Automated Medical Examiner Referrals and the Positive Impact on Tissue Donation

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Background: Individuals who die outside of a hospital are reported to Medical Examiners (ME) in the county where the death occurred. These deaths aren't reported to the state Organ Procurement Agency (OPO). Logistics and workflow sometimes make it difficult for the ME office to report these deaths to the OPO so that the decedent can be evaluated for tissue donation. Therefore, these families aren't afforded the opportunity for their loved ones to honor their donor registry status or authorize tissue and eye donation. Wayne County Medical Examiner (WCME) in Detroit, fields nearly 16,000 death reports per year. Historically this resulted in fewer than 10 referrals in a month, if any at all.
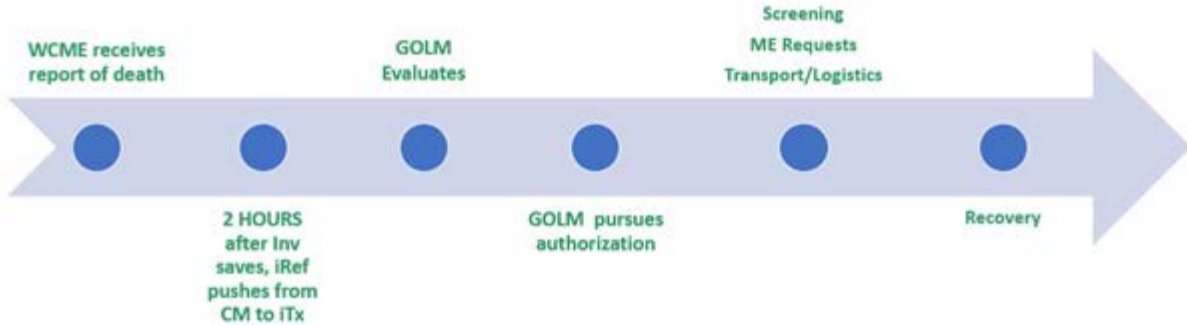
Hypothesis: iTransplant (iTx) provider Transplant Connect (TC), had previously collaborated with Medicolegal Death Investigation Log (MDI Log) to increase ME referrals and tissue donation opportunities with Gift of Life. With the automation of ME deaths (non-hospital deaths) reported to Gift of Life Michigan, tissue donation opportunities will continue to increase. Partnerships are strengthened between Medical Examiners and Gift of Life when barriers to death referrals are removed. Logistics and processes continue to be streamlined, which yields more opportunities for tissue donation from non-hospital deaths.

Methods: A team was formed including representatives from Gift of Life, TC, WCME, and WCME's software provider Qunicy Tech (QT) to map out and implement a comprehensive communication process. When a WCME team member begins an initial report of death in their Case Manager system, and the following criteria has been met case number, case status, patient first and last name, DOB, and pronouncement or last seen alive Time, a 120-minute timer begins in the back end of the system. Once the time has elapsed, the referral is pushed to Gift of Life's iTx system. The purpose of the 120-minute delay is to allow the ME employee the opportunity to add critical information such as demographics, NOK information, TOD and investigation narrative. Subsequent updates entered in Case Manager are pushed to iTx and appear in a case note and the appropriate staff members at Gift of Life are notified.

Results: The initial implementation took place in September 2020. In 2020, we received 1,602 referrals resulting in 33 donors. In 2021, we received 7,190 referrals resulting in 91 tissue donors. In 2022, we received 7,646 referrals, resulting in 103 donors. Through April of 2023 we have received 2,495 referrals resulting in 39 donors. Additionally, we have also received 1,179 referrals from MDI Log, and 57 referrals from hospital partners who have started to utilize the iReferral system.

Conclusions: The implementation of iReferrals has directly attributed to a significant increase in both death notifications from ME reported deaths, as well as tissue donors, who previously would have been unreported to Gift of Life. We are in the discussion and fact-finding phase with another historically low

referral Medical Examiner office. We are also working to refine and expand hospital iReferrals, hoping to reduce the nurses' time away from patient care.

WCME receives report of death

2 HOURS after Inv saves, iRef pushes from CM to iTx

GOLM Evaluates

GOLM pursues authorization

Screening
ME Requests
Transport/Logistics

Recovery

# of Tissue Donors from ME Referrals