

ER 89-1657



**UNITED STATES  
OFFICE OF PERSONNEL MANAGEMENT  
WASHINGTON, D.C. 20415**



OFFICE OF THE DIRECTOR

April 17, 1989

MEMORANDUM TO HEADS OF DEPARTMENTS AND INDEPENDENT AGENCIES

FROM: CONSTANCE HORNER  
DIRECTOR

SUBJECT: NATIONAL ORGAN AND TISSUE DONOR AWARENESS WEEK

President Bush has proclaimed April 23-29, 1989 as National Organ and Tissue Donor Awareness Week. Each year the last week of April is set aside to focus national attention on promoting public awareness about organ and tissue donation. Medical technology has made it possible for thousands of Americans to benefit from organ and tissue transplantation. Since 1981, more than 320,000 organ and tissue transplants have been performed in the United States. However, today an estimated 19,000 are awaiting an organ or tissue transplant.

I am asking for your help in making Federal employees more aware of how to become potential donors. In the past, agency efforts to inform employees about organ and tissue donation have produced gratifying results.

The decision to become a potential donor is a private matter between employees and their families. The organizations on the attached list can provide information and resources on how to secure donor cards and the procedures for becoming a potential donor.

To kick off National Organ and Tissue Donor Awareness Week, the American Council on Transplantation (ACT) is sponsoring the second national balloon event at the Washington Monument on April 24, 1989, at 2:00 p.m. In 1988 over 100 organizations across the United States participated in this event to call attention to the need for increased tissue donation to provide life saving and enhancing transplants for those who could benefit from the gift of life. Additional information on this event may be obtained from ACT on (202) 836-4301.

Your continuing support of this humanitarian effort to educate and promote Federal employee awareness of the organ and tissue donor program is appreciated.

Attachment

ODA/REGISTRY  
FILE: ODA/REGISTRY

Attachment

INFORMATION RESOURCES ON ORGAN AND TISSUE DONATION

- I. Division of Organ Transplantation  
Health Resources and Services Administration  
Public Health Service  
U.S. Department of Health and Human Services  
5600 Fishers Lane, Room 9A-22  
Rockville, Maryland 20857  
Phone: (FTS/301) 443-7577

The Division of Organ Transplantation serves as a source of information on the activities of state, private sector and voluntary organizations, as well as Federal programs, involved in the various aspects of organ donation and transplantation. The Division has recently revised a very informative brochure (copy attached) that answers commonly asked questions about donating and transplanting organs and tissues and includes a tear-out donor card. The Division can supply quantities or provide camera-ready copy so that agencies may print their own supplies.

Pamphlet: "Organ Transplant Questions and Answers," DHHS Publication No. HRS-M-SP 89-1, Revised October 1988.

- II. American Council on Transplantation  
700 North Fairfax Street, Suite #505  
Alexandria, Virginia 22314  
Phone for agency inquiries: (703) 836-4301  
Phone for individual inquiries: Toll-free 1-800-ACT-GIVE

The American Council on Transplantation (ACT) is a non-profit national federation of organizations and individuals. Its purpose is to increase public awareness of organ and tissue donation and transplantation. Formed in 1983, ACT is dedicated to increasing the availability of organ and tissue transplantation to save and improve the lives of others. ACT provides the only national public policy forum where any national organization, state, local, and regional groups and individuals can address social, psychological, ethical, and economic issues involved in organ and tissue recovery and transplantation. In addition to the attached pamphlet, ACT can provide speakers and video tapes free of charge.

Pamphlet: "Transplantation - The Miracle of Life - Questions and Answers about Organ/Tissue Donation" (includes a tear-out uniform donor card)

- III. United Network for Organ Sharing  
3001 Hungary Spring Road  
P. O. Box 28010  
Richmond, Virginia 23228  
Phone: Toll-free 1-800-243-6667

The United Network for Organ Sharing (UNOS) maintains a 24 hour nationwide telephone service and computer network to aid in matching donor organs with patients in need who are registered with regional transplant centers and coordinates placement efforts with transplant centers located across the country. It also provides general information on organ and tissue donation.



American Council on Transplantation  
 P.O. Box 1709  
 Department Q/A  
 Alexandria, VA 22313

# Transplantation - the Miracle of Life

Questions and Answers  
 about Organ/Tissue Donation

**U.S. Transplant Statistics**

Since 1981, more than 320,000 organ and tissue transplants have been performed in the United States. Public opinion surveys show that a large majority of Americans approve of organ/tissue donation (73%) . . . transplants save the lives of some, improve the quality of life for many and there are not enough organ and tissue donors.

All hospitals are now required by law to inform the family of a potential donor of its option to donate should the death of their loved one occur. Studies show that 8 out of 10 do say yes, when asked.

Discuss organ and tissue donation with your family. Let them know your wish to be a donor if they are ever faced with having to make that decision and encourage them to think about their own feelings on the subject. Then, sign and carry a uniform donor card or indicate on your driver's license.

ORGAN/TISSUE	TRANSPLANTS PERFORMED '87	TOTAL # OF TRANSPLANTS	#AWAITING TRANSPLANTS
Kidney	8,967	77,872 since 1973	13,100
Heart	1,512	4,635 since 1967	900
Heart/Lung	43	172 since 1981	172
Liver	1,182	3,364 since 1967	450
Pancreas	129	676* since 1982	150
Cornea	35,000	235,000	5,000

\*Includes Canadian & Mexican data

Become a part of the miracle of transplantation.

AMERICAN COUNCIL ON TRANSPLANTATION  
 UNIFORM DONOR CARD

Name \_\_\_\_\_  
Print or type name of donor

In the hope that I may help others, I pledge this gift to take effect upon my death. My wishes are indicated below:

I give  any needed organs/tissues or  only the following organs/tissues \_\_\_\_\_

Specify the organs and tissues \_\_\_\_\_  
 Limitations or special wishes, if any \_\_\_\_\_

PLEASE ENCOURAGE OTHERS TO BECOME DONORS

PLEASE DETACH AND GIVE THIS PORTION OF THE CARD TO YOUR FAMILY

Please sign the statement on the other side of this portion of the card. Detach the card at the perforations and give it to the person (generally your next of kin) most likely to be notified if you become involved in a medical emergency.

AMERICAN COUNCIL ON TRANSPLANTATION  
 P.O. BOX 1709 Dept. Q/A  
 Alexandria, VA 22313

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AMERICAN COUNCIL ON TRANSPLANTATION  
 P.O. BOX 1709 Dept. Q/A

**ALWAYS CARRY THIS CARD WITH YOU**

ACT, P.O. Box 1709, Dept. Q/A, Alexandria, VA 22313

This is a legal document under the Uniform Anatomical Gift Act. For further information write:

City \_\_\_\_\_ State \_\_\_\_\_

Date Signed \_\_\_\_\_ Date of Birth of Donor \_\_\_\_\_

Signature of Witness #2 \_\_\_\_\_

Signature of Witness #1 \_\_\_\_\_

Signature of Donor \_\_\_\_\_

Signed by the donor and the following witnesses in the presence of each other.

---

**ALWAYS CARRY THIS CARD WITH YOU**

ACT, P.O. Box 1709, Dept. Q/A, Alexandria, VA 22313

This is a legal document under the Uniform Anatomical Gift Act. For further information write:

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Signature of Witness #1 \_\_\_\_\_

Signature of Donor \_\_\_\_\_

Signed by the donor and the following witnesses in the presence of each other.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE DETACH AND GIVE THIS PORTION OF THE CARD TO YOUR FAMILY**

Thank you,  
a donor.  
Informing attending medical personnel that I am  
Please see that my wishes are carried out by  
and tissue donor if the occasion ever arises.  
This is to inform you that I want to be an organ

---

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE DETACH AND GIVE THIS PORTION OF THE CARD TO YOUR FAMILY**

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This is to inform you that I want to be an organ

## Questions and Answers about Organ/Tissue Donation

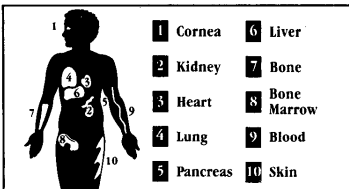
**Q** *Who can become a donor and what can be donated?*

**A** Anyone can sign a donor card or express the wish to be a donor to a family member. Those younger than 18 must have the consent of a parent or guardian.

Organs include KIDNEYS, HEART, HEART/LUNG, LIVER, LUNG and PANCREAS. Tissues include CORNEAS, SKIN, BONE, MIDDLE EAR, and BLOOD VESSELS.

The donation of heart, kidneys, liver, pancreas and lungs generally is restricted to deaths based on brain death criteria and to people younger than 65. For those 65 and older, corneas, bone, and skin are options determined at the time of death on a case-by-case basis.

There are circumstances where kidney donations may be received from living family members. Living unrelated organ donation is not encouraged.



**Q** *What must I do to become a donor?*

**A** Simply complete, sign and carry the Uniform Donor Card at all times. It is equally important to tell your relatives of your wishes, and have at least one family member serve as a witness. Your next-of-kin will be asked to sign consent forms permitting donation in case of your death even if you have a signed donor card.

**Q** *What if I change my mind about donating?*

**A** Just tear up the donor card, and inform your family of your wishes. If you signed the back of your driver's license, "X" out the entire donor card portion and tell your family.

**Q** *Are there religious objections to organ/tissue donation?*

**A** The principles and practices of organ/tissue donation are approved and supported by all major religious denominations in America. Transplantation is consistent with the life-preserving traditions of these faiths. However, you should discuss any concerns with your minister, priest or rabbi.



**Q** *Why is a family discussion about organ/tissue donation so important?*

**A** During the family discussion, you should learn how each person would feel about becoming a donor. With this knowledge, you will be able to ensure that your relatives' wishes are carried out by informing the attending medical personnel.

Keep in mind, **EVEN WITH A SIGNED DONOR CARD, CONSENT FROM NEXT-OF-KIN USUALLY IS REQUIRED.** Your family discussion is the single-most important element influencing donation.

**Q** *How do donor families feel about their decision afterwards?*

**A** Donor families often tell of the solace found through knowing a life was saved or its quality improved by their decision to donate.

**Q** *What if my family is opposed to donation?*

**A** You may contact your attorney to draw up a document expressing your wishes upon your death. This document, in addition to your donor card, can give assurance that your wishes will be honored. Let your family know of your plans.

**Q** *What charges does the donor family incur after donation?*

**A** There is **NO COST** to the donor family for organ and tissue recovery-related charges.

**Q** *If I sign a donor card, will it affect the level of medical care I receive at a hospital?*

**A** No. The level of medical care always is based on the determination of what is best for you to preserve your life. You can be considered a candidate for donation only if you are declared legally dead.

**Q** *Is the body's appearance changed by organ and tissue donation?*

**A** There is no change in appearance of the body resulting from donation. Organ and tissue recoveries are conducted in the operating room under the direction of qualified surgical personnel. You still may have an open casket funeral.

**Q** *Are there racial barriers to organ/tissue donation and matching organs?*

**A** Race is not a barrier. There are some differences in tissue antigens, but they are easily recognized and do not preclude organ/tissue donation or a successful outcome.

Kidney failure is more prevalent among blacks than any other racial group. Blacks with hypertension suffer from kidney failure 17 times as often as Caucasians with the same disease. Many blacks could be helped by transplants; therefore, it is all the more important for blacks to sign donor cards and inform their families of their wishes.

**Q** *How does the organ procurement system work?*

**A** After determination of death and consent from next-of-kin, hospital personnel contact a regional procurement organization to begin arrangements. Potential recipients are identified using the Organ Procurement and Transplantation Network's computer system for organ sharing. Organs and tissues are procured and matched on a formula based on medical compatibility, location and degree of urgency.



The American Council on Transplantation (ACT) is a nonprofit, national federation of organizations and individuals. Its purpose is to increase the awareness and frequency of organ and tissue donation. Formed in 1983, the Council provides the only national public policy forum where any national organization, local, state and regional group and many individuals address social, psychological, ethical and economic issues involved in organ and tissue recovery and transplantation.

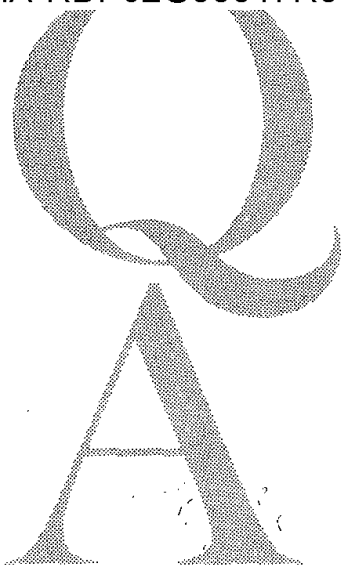
For more information, send a self-addressed, stamped envelope to:

American Council on Transplantation  
P.O. Box 1709  
Department Q/A  
Alexandria, VA 22313  
OR Call 1-800-ACT-GIVE

ACT appreciates the contributions of The Dow Chemical Company towards the production of this brochure.

# ORGAN TRANSPLANTATION

- *How many organ transplants have been performed and what is the cost?*
- *What are organ procurement organizations?*
- *What network matches donor organs with recipients?*
- *How are donor organs matched with recipients?*
- *How many centers perform organ transplants?*
- *What is "required request"?*
- *What is the National Organ Transplant Act and how has it been implemented?*
- *What issues were studied by the Task Force on Organ Transplantation?*
- *What is the purpose of the grants program for organ procurement organizations?*
- *Are organ transplants covered by Medicare and Medicaid?*
- *What immunosuppressive drugs are used to prevent rejection of organs after transplants?*
- *What about organ donation?*
- *Can human organs be sold?*
- *Who can donate an organ?*
- *Will the quality of hospital care change for a donor?*
- *Who pays for organ donation?*
- *Is the body disfigured when organs are donated?*
- *What about special appeals for people waiting for a transplant?*
- *How can I help?*



## **INTRODUCTION**

*Medical advances have made it possible to transplant numerous tissues and organs from one human being to another to improve and save lives. The first corneal transplant was performed in 1905, the first blood transfusion in 1918, the first kidney transplant in 1954, and the first heart transplant in 1967. Now, current medical technology also enables the transplantation of skin, heart-lung, lung, pancreas, liver, bone, and bone marrow.*

*In 1987 there were 8,967 kidney, 35,000 cornea, 1,182 liver, 1,512 heart, 180 pancreas, and 41 heart-lung transplants performed in the United States. Despite advances in transplantation surgery, the need for organs for transplants surpasses the number donated each year. Today, nearly 15,000 Americans wait for an organ transplant.*

*Following are answers to some of the most frequently asked questions about organ transplantation.*

*U.S. Department of Health and Human Services  
Public Health Service  
Health Resources and Services Administration  
Bureau of Maternal and Child Health and Resources Development  
Office of Special Projects  
Division of Organ Transplantation  
5600 Fishers Lane  
Rockville, Maryland 20857*

*gan transplants have been performed and what is the average cost for each procedure? What is the survival rate for each? How many people are waiting for organ transplants?*

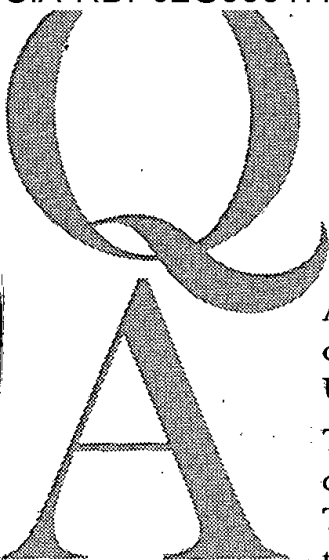


	Transplants Performed in U.S.				Avg. - Cost	1-Year Survival Rate	People Waiting (approx.)
	1984	1985	1986	1987			
Heart	346	719	1,368	1,512	\$ 57,000- 110,000	80%	850
Kidney	6,968	7,695	8,975	8,967	\$ 25,000- 30,000	91% <sup>3</sup> 96% <sup>4</sup>	13,000
Liver	308	602	924	1,182	\$135,000- 238,000	65%	450
Pancreas / Islet Cell	87	130	140	180	\$ 30,000- 40,000	45%	150
Heart- Lung	22	30	45	41	\$130,000- 200,000	55%	175
Cornea	24,000	26,300	28,000	35,000	\$ 4,000 <sup>2</sup> 7,000	(90% success rate)	5,000

1. Many variables account for range of cost in transplantation procedures, i.e., lack of uniformity in reporting component costs, complications, medication regimen, method of reporting or nonreporting payment of surgeons (salary, fee, no charge), graft rejection, readmissions, infections, geography.
2. Outpatient procedure average cost is \$4,000-\$5,500. Inpatient procedure average cost is \$5,000-\$7,000; 2-3 day inpatient stay maximum.
3. Transplant with kidney from a deceased donor.
4. Transplant with kidney from a living related donor.

Sources: American Council on Transplantation  
 Eye Bank Association of America  
 Health Care Financing Administration  
 National Center for Health Services Research  
 United Network for Organ Sharing

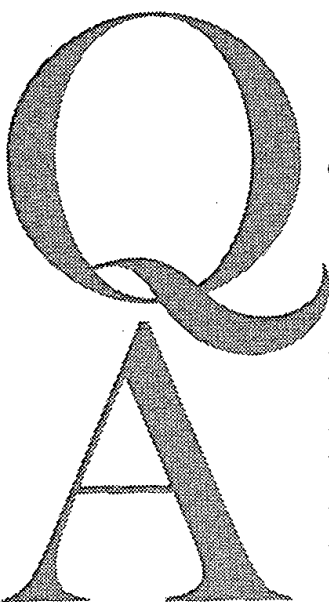


A large, stylized graphic consisting of a 'Q' and an 'A' in a serif font. The 'Q' is positioned above the 'A', and they are both rendered in a dark, textured grey color.

As of June, 1988, there were 72 organ procurement organizations certified by the Health Care Financing Administration in the United States.

These organizations coordinate activities relating to organ procurement with donor hospitals in their designated service area. This would include evaluating potential donors, discussing donation with family members, and arranging for the surgical removal of donated organs. Procurement organizations will preserve the organs and make arrangements for distribution to recipients at transplant centers according to national organ sharing policies.

Organ procurement organizations also provide information and education to medical professionals and the general public to encourage donations and increase the availability of organs for transplantation.

A large, stylized graphic consisting of a 'Q' and an 'A' in a serif font. The 'Q' is positioned above the 'A', and they are both rendered in a dark, textured grey color.

*What network currently exists to match donor organs with recipients?*

Persons waiting for transplants are listed at the transplant centers where they expect to be transplanted. These lists comprise the national waiting list of potential transplant patients maintained by the United Network for Organ Sharing (UNOS) located in Richmond, Virginia. UNOS serves as the nation's Organ Procurement and Transplantation Network and maintains a 24-hour telephone service to aid in matching donor organs with patients on the list and to coordinate placement efforts with transplant centers.

Q  
A

Once a potential organ donor is identified by hospital staff and brain death is imminent or present, an organ procurement organization is contacted. The procurement organization is consulted about donor acceptability and often asked to counsel with families to seek consent for donation. If consent is given, certain characteristics (i.e. age, blood type, weight) of the donor are compared with similar information of the recipients listed on the national computer waiting list. The most closely matched recipient is identified. Consideration is also given to the recipient's medical status (urgency of need) and time on the list.

When a match is found, the procurement organization will arrange for the donated organ(s) to be surgically removed, preserved, and transported to the transplant center. The potential recipient is also alerted to the availability of an organ and is asked to travel to the transplant center. The recipient's organ is removed and the donor organ is implanted.

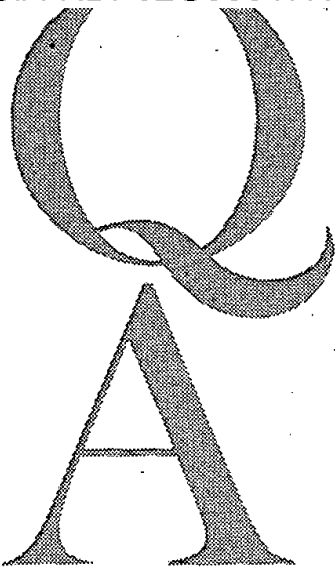
Organs go to those recipients in most critical need and who most closely match the characteristics of the organ donor. Preference is given to recipients from the same area as the donor. Timing is a critical element in the organ procurement process. Hearts can be preserved for up to 6 hours, livers up to 12 hours, kidneys for 72 hours. Lungs cannot be preserved outside the body for any extended period of time.

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A

***How many transplant centers are there in the United States?***

In June 1988, there were 59 liver, 199 kidney, 124 heart, 45 pancreas, and 43 heart-lung transplant centers in the United States.

*Required request?"*

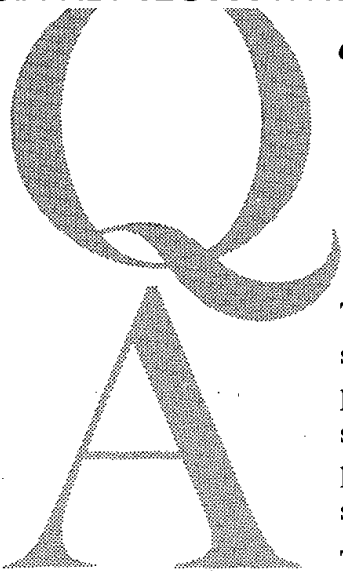


“Required request”, sometimes referred to as routine inquiry, is a policy by which hospitals provide the opportunity for donation to next-of-kin when a family member has died. These policies enable hospitals and health care professionals to play a key role in increasing donation because families might otherwise not be aware of their right to donate. Forty-two states and the District of Columbia have enacted “required request” laws that require hospitals to institute policies and procedures for informing families about donation.

The Omnibus Budget Reconciliation Act of 1986 (Public Law 99-509) established additional requirements for hospitals that participate in the Medicare and Medicaid programs. It required each participating hospital to establish written protocols for identification of organ donors and to notify an organ procurement organization designated by the Secretary of Health and Human Services of any potential donors it identifies.

Since January 1988, the Joint Commission for the Accreditation of Healthcare Organizations has required its member hospitals to develop policies and procedures on the identification and referral of potential donors for hospital accreditation.

*ational Organ Transplant Act  
and what steps have been taken to implement it?*



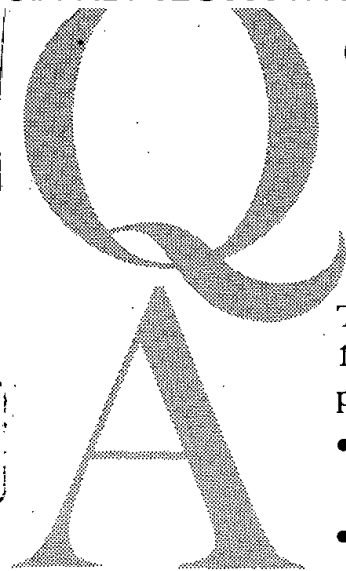
The National Organ Transplant Act (Public Law 98-507) was signed by the President in October, 1984, to provide for a comprehensive review of the medical, legal, ethical, economic, and social issues presented by human organ procurement and transplantation and to strengthen the ability of the nation's health care system to provide organ transplants.

The Division of Organ Transplantation has been established in the Health Resources and Services Administration of the Public Health Service. The National Task Force on Organ Transplantation authorized by the law completed a year-long examination of issues and two reports to the Congress and the Secretary of Health and Human Services.

The Task Force conducted a study of immunosuppressive therapies that prevent organ rejection, as well as assessed the safety, cost, long-term effectiveness of these therapies and their accessibility. The Task Force also conducted a comprehensive review of medical, ethical, economic, legal, and social issues in organ procurement and transplantation.

The Division of Organ Transplantation serves as a source of information on the activities of states, private sector and voluntary organizations, and federal programs involved in various aspects of organ transplantation, such as public education on organ donation, medical research, and health care financing. The Division supports a national computerized network for organ matching and a grant program to help improve the overall organ procurement system.

*What issues were studied by the Task Force on Organ Transplantation?*



The Task Force reported to the HHS Secretary and Congress in 1986 on vital aspects of the organ donation/procurement/ transplantation process including:

- Factors that diminish the number of organs available for transplantation;
- Problems in coordinating procurement of viable organs including skin and bone;
- Recommendations for education of the public and health professionals in organ donation and procurement;
- Recommendations for assuring equitable access by patients to organ transplantation and for assuring equitable allocation of donated organs among transplant centers and among patients;
- Identification of barriers to donation of organs to patients;
- Recommendations for the conduct and coordination of continuing research concerning all aspects of transplantation of organs;
- Analysis of factors in reimbursement for transplant procedures by private insurers and the public sector;
- Analysis of the manner in which organ transplantation technology is diffused among and adopted by qualified medical centers; and
- An assessment of the feasibility and likely effectiveness of a national registry of human organ donors.

The Task Force also assessed immunosuppressive medications and other modalities used to prevent organ rejection in transplant patients, including analysis of:

- Safety, effectiveness, and costs;
- Patient problems in obtaining medications;
- Various approaches to assure individuals needing such medications can obtain them; and
- Private insurance for long-term immunosuppressive drug therapy.

CIA-RDP92G00017R000900170010-0 *urpose of the grant program for organ procurement organizations?*

Q  
A

The National Organ Transplant Act authorized a grant program to increase the availability of donor organs by improving the overall organ procurement system in the United States. Grants are for planing, establishment, initial operation, and expansion of organ procurement organizations.

In grant awards, priority is placed upon consolidation and coordination of organ procurement efforts where multiple programs exist; new approaches, such as health professional education, to improve the efficiency and effectiveness of an existing program in increasing donor organs; and expansion of efforts such as services in rural areas or computerization of data.

In 1988, 18 grants were awarded to organ procurement organizations in 17 cities.

*transplants covered by Medicare and Medicaid?*

Q  
A

Under Medicaid, states are permitted to determine coverage policy for particular organ transplants, and if they provide coverage, the Federal Government will match expenditures. A recent survey showed that most states offer Medicaid coverage for some transplant costs, either as part of a formal policy or on a case-by-case (exception) basis. Forty-six states have reimbursed for costs associated with bone marrow transplants, while forty-one states offered coverage for liver transplants. Thirty-three states covered costs associated with heart transplants and fifteen states covered heart-lung transplant costs. Eight states have provided reimbursement for pancreas transplants.

Medicare covers kidney, heart, and corneal transplants for those who are eligible. Medicare also covers liver transplants for eligible children with congenital liver disease (biliary atresia) and bone marrow transplants for eligible persons with aplastic anemia or leukemia. For the adult population, liver, pancreas, and heart-lung transplantation is regarded as experimental and, therefore, not covered by Medicare.

In addition, many private insurers cover selected transplant procedures and services. Some experimental transplantation is also covered by medical centers conducting specific research protocols.

Q  
A

*What are the most common immunosuppressive drugs used to prevent rejection of transplanted organs? Does Medicare or Medicaid pay for these drugs?*

The drugs most frequently used for immunosuppressive therapy are cyclosporine, Imuran, and prednisone.

Medicare covers drugs administered in an inpatient setting, or as outpatient care incident to physician services. The Sixth Omnibus Reconciliation Act provides payment for immunosuppressive drugs for one year from the date of transplant for individuals whose transplant is paid by Medicare. Forty-seven states offer Medicaid coverage for outpatient immunosuppressive drugs.

Q  
A

A serious shortage of donated organs and tissues prevents many transplants from being performed.

Potential organ donors are persons who have suffered an irreversible catastrophic brain injury which results in "brain death," i.e., all brain activity has permanently ceased, but heart and lungs can continue to function with the use of artificial life-support. Only one out of 25 hospital deaths can result in an organ donation. Conversely, 24 out of 25 deaths can result in a tissue donation because potential tissue donors can be persons who have died from any cause except cancer, infection, or from a rare disease. Potential tissue donors can be persons who have died from any cause except cancer, infection, or from a rare disease.

A 1987 Gallup survey indicates that while 98% of Americans are aware of organ transplants, only 20% of them carry an organ donor card. Many states provide donor cards on the back of their driver's licenses. Wallet-sized donor cards, such as the one located in the back of this brochure, are available from a number of non-profit organizations interested in organ donation.

Even if a person has a signed donor card, it is customary to obtain permission from the family. This highlights the importance of family discussion and understanding of each member's views about organ donation.

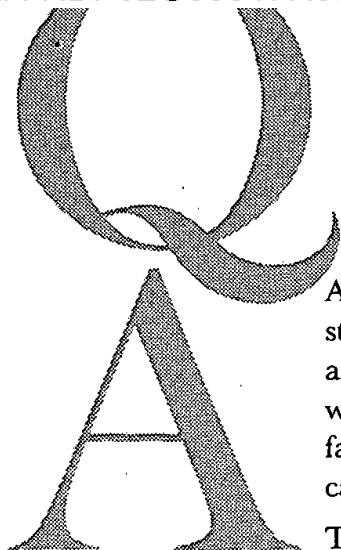
*Is it permissible to sell human organs?*

Q  
A

The National Organ Transplant Act (Public Law 98-507) prohibits the sale of human organs.

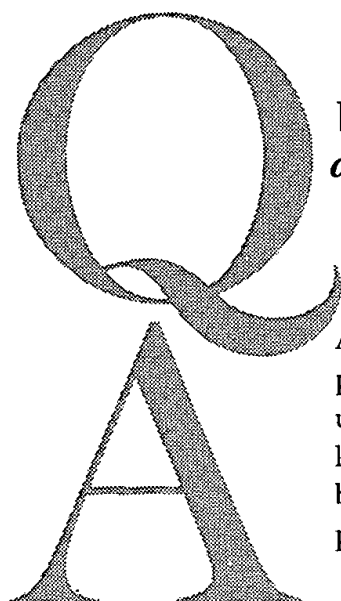
Violators of this provision of the law will be fined a maximum of \$50,000 and/or imprisoned for a maximum of five years.





According to the Uniform Anatomical Gift Act, effective in all 50 states, anyone over the age of 18 can indicate their desire to be an organ donor by signing a donor card or expressing their wishes to family members. Relatives can also donate a deceased family member's organs and tissues. Any or all organs or tissues can be specified for donation.

The donation of tissues such as bone, skin, or corneas can occur regardless of age and in almost any cause of death. Vital organ donation, such as heart, kidney, or liver, occurs *only* in the case of brain death and generally in individuals less than 65 years. The medical determination of whether organs or tissues can help others is made at the time of the donor's death.



*Will the quality of hospital treatment change if a person is a declared donor?*

Absolutely not. A transplant team won't be involved until all possible efforts to save a patient's life have failed. The criteria used to determine brain death are based on strict medical and legal standards. The determination of brain death must be made by physicians who are not involved in the organ donation process.

*Who pays for the organ donation?*

Q  
A

There is no cost to the donor family nor is there any payment for donation. All costs are borne by the recipient of the organ transplant or by the recipient's insurance coverage. Hospital expenses incurred prior to the donation of organs and funeral expenses remain the responsibility of the donor's family.

*Is the body disfigured?*

Q  
A

No. The removal of organs and tissues is a sterile, surgical procedure. The body remains intact for burial arrangement.

**Q** *What can be done to speed up the process for those in critical need of an organ transplant? What about special public appeals?*

**A** Families and attending physicians need to maintain close contact with the transplant team to keep them fully up-to-date on the patient's condition. Families can also work with community groups to increase public awareness of organ transplantation and the need for organ donation.

While family appeals through the media have had a positive effect on increasing organ donation overall, they do not always result in an organ becoming available for the individual for whom the appeal has been made. This is because the decision as to which patient on a transplant waiting list will receive an organ is a clinical decision made by attending health professionals.

**Q** *How can I help?*

**A** Consider signing an organ donor card. You may use the card provided on the flap of the back cover. Discuss organ donation with your family so they can know your wishes and consider signing a donor card, too.

Nearly every community has one or more voluntary or non-profit organizations involved in educating the public about organ donation or in providing counseling or support to families who have donated or have a member in need of an organ transplant. To volunteer your help, check your local telephone directory for the location of organ procurement organizations, eye banks, blood centers, or a local chapter of the National Kidney Foundation.

In addition, the American Council on Transplantation (ACT) is an independent, private federation of organizations, health professionals, and others interested in organ donation. Write ACT, 700 North Fairfax, Suite 505, Alexandria, Virginia 22314, for information, donor cards, and referral to local agencies, or call 1-800-ACT-GIVE.

- Discuss organ donation with family and friends.
- Decide whether you wish to be an organ donor. The Uniform Anatomical Gift Act of 1969 gives you the legal right to sign a donor card specifying your wish to donate organs or tissues upon your death.
- If you decide to be a donor, complete and sign the Uniform Donor Card on this page in the presence of two witnesses, preferably including next of kin. Persons under 18 years of age must have parent's or guardian's consent.
- Tell others about your decision, especially immediate family and physician.
- Carry your donor card at all times.

NOTE: This information is on back panel next to donor card in brochure.

signed by the donor and the following two witnesses in the presence of each other:

Signature of Donor	Date of Birth of Donor	Witness
Date Signed	City & State	Witness

This is a legal document under the Uniform Anatomical Gift Act or similar laws.

**U.S. DEPARTMENT OF  
HEALTH & HUMAN SERVICES**

Public Health Service  
Health Resources and Services Administration  
Division of Organ Transplantation  
Rockville MD 20857



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HHS 396

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**UNIFORM DONOR CARD**

Of \_\_\_\_\_

Print or type name of donor

In the hope that I may help others, I hereby make the anatomical gift, if medically acceptable, to take effect upon my death. The words and marks below indicate my desires.

I give: (a) \_\_\_\_\_ any needed organs / tissues  
(b) only the following organs / tissues \_\_\_\_\_

Specify the organ(s) / tissue(s)

OR

for the purposes of transplantation, therapy, medical research or education:  
(c) \_\_\_\_\_ my body for anatomical study if needed.

Limitations or special wishes, if any: \_\_\_\_\_



**HRSA**

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Public Health Service  
Health Resources and Services Administration

DHHS Publication No. (HRS-M-SP) 89-1 Rev. October 1988

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