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By: Representative Warren

**REGULAR SESSION 2007** 

To: Public Health and Human Services

## HOUSE BILL NO. 556

AN ACT TO AMEND SECTION 41-39-15, MISSISSIPPI CODE OF 1972,

2 WHICH REGULATES THE PROTOCOL FOR ORGAN AND TISSUE DONORS; TO 3 EXTEND THE DATE OF REPEAL ON THE SECTION THAT PROVIDES FOR 4 SUITABLE DONORS AND REMOVING ORGANS; AND FOR RELATED PURPOSES. 5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI: 6 SECTION 1. Section 41-39-15, Mississippi Code of 1972, is 7 amended as follows: 8 41-39-15. (1) For the purposes of this section: 9 "Potential organ donor" means a patient with a (a) severe neurological insult who exhibits loss of cranial nerve 10 11 response or who has a Glasgow Coma Scale score of five (5) or less. 12 13 (b) "Potential tissue donor" means any patient who dies 14 due to cardiac arrest. 15 "Organ procurement organization" means the (C) 16 federally designated agency charged with coordinating the 17 procurement of human organs in the State of Mississippi for the 18 purpose of transplantation and research. "Tissue bank" or "tissue procurement organization" 19 (d) 20 means a not-for-profit agency certified by the Mississippi State 21 Department of Health to procure tissues, other than solid organs, 22 in the State of Mississippi. (2) Before November 1, 1998, each licensed acute care 23 24 hospital in the state shall develop, with the concurrence of the 25 hospital medical staff and the organ procurement organization, a protocol for identifying all potential organ and tissue donors. 26 The protocol shall include a procedure for family consultation. 27 28 This protocol shall not be applicable in cases where a declaration \* HR40/ R565\* H. B. No. 556 G1/2 07/HR40/R565 PAGE 1 (GT\BD)

by the organ donor (a) by will, (b) under a Durable Power of Attorney for Health Care declaration under Section 41-41-209, (c) under a Withdrawal of Life-Saving Mechanism (Living Will) declaration under former Section 41-41-107 (now repealed), or (d) under the Anatomical Gift Law under Section 41-39-39, has been provided to the attending physician.

35 (3) The protocol shall require each hospital to contact the organ procurement organization by telephone when a patient in the 36 37 hospital becomes either a potential organ donor or potential 38 tissue donor as defined in this section. The organ procurement organization shall determine the suitability of the patient for 39 40 organ or tissue donation after a review of the patient's medical 41 history and present condition. The organ procurement organization 42 representative shall notify the attending physician or designee of its assessment. The hospital shall note in the patient's chart 43 44 the organ procurement organization's assessment of suitability for 45 donation. The organ procurement organization representative shall 46 provide information about donation options to the family or 47 persons specified in Section 41-39-35 when consent for donation is 48 requested.

(4) If the patient becomes brain dead and is still suitable 49 50 as a potential donor, the organ procurement organization 51 representative shall approach the deceased patient's legal next of kin or persons specified in Section 41-39-35 for consent to donate 52 53 the patient's organs. The organ procurement organization 54 representative shall initiate the consent process with reasonable 55 discretion and sensitivity to the family's circumstances, values and beliefs. 56

57 To discourage multiple requests for donation consent, the 58 organ procurement organization representative shall make a request 59 for tissue donation during the organ donation consent process. 60 When the possibility of tissue donation alone exists, a tissue 61 bank representative or their designee may request the donation. H. B. No. 556 \* HR40/ R565\*

H. B. No. 556 \* 07/HR40/R565 PAGE 2 (GT\BD) (5) The option of organ and/or tissue donation shall be made
to the deceased patient's family upon the occurrence of brain
death and while mechanical ventilation of the patient is in
progress.

The protocol shall require that the decision to donate be noted in the patient's medical record. The organ procurement organization shall provide a form to the hospital for the documentation. The form shall be signed by the patient's family pursuant to Sections 41-39-31 through 41-39-51. The form shall be placed in each deceased patient's chart documenting the family's decision regarding donation of organs or tissues from the patient.

(6) (a) If the deceased patient is medically suitable to be an organ and/or tissue donor, as determined by the protocol in this section, and the donor and/or family has authorized the donation and transplantation, the donor's organs and/or tissues shall be removed for the purpose of donation and transplantation by the organ procurement organization, in accordance with paragraph (b) of this subsection.

80 If the deceased patient is the subject of a (b) 81 medical-legal death investigation, the organ procurement 82 organization shall immediately notify the appropriate medical 83 examiner that the deceased patient is medically suitable to be an 84 organ and/or tissue donor. If the medical examiner determines that examination, analysis or autopsy of the organs and/or tissue 85 86 is necessary for the medical examiner's investigation, the medical 87 examiner may be present while the organs and/or tissues are 88 removed for the purpose of transplantation. The physician, surgeon or technician removing the organs and/or tissues shall 89 file with the medical examiner a report detailing the donation, 90 91 which shall become part of the medical examiner's report. When requested by the medical examiner, the report shall include a 92 93 biopsy or medically approved sample, as specified by the medical 94 examiner, from the donated organs and/or tissues.

H. B. No. 556 \* HR40/ R565\* 07/HR40/R565 PAGE 3 (GT\BD)

In a medical-legal death investigation, decisions 95 (C) 96 about organ and/or tissue donation and transplantation shall be 97 made in accordance with a protocol established and agreed upon by majority vote no later than July 1, 2005, by the organ procurement 98 99 organization, a certified state pathologist who shall be appointed 100 by the Mississippi Commissioner of Public Safety, a representative 101 from the University of Mississippi Medical Center, a 102 representative from the Mississippi Coroners Association, an organ recipient who shall be appointed by the Governor, the Director of 103 104 the Mississippi Bureau of Investigation of the Mississippi 105 Department of Public Safety, and a representative of the 106 Mississippi Prosecutor's Association appointed by the Attorney 107 The protocol shall be established so as to maximize the General. total number of organs and/or tissues available for donation and 108 transplantation. Organs and/or tissues designated by virtue of 109 110 this protocol shall be recovered. The protocol shall be reviewed 111 and evaluated on an annual basis.

112 (d) This subsection (6) shall stand repealed on June113 30, 2009.

114 Performance improvement record reviews of deceased (7) 115 patients' medical records shall be conducted by the organ 116 procurement organization for each hospital having more than 117 ninety-five (95) licensed acute care beds and general surgical 118 capability. These reviews must be performed in the first four (4) 119 months of a calendar year for the previous calendar year. If the 120 organ procurement organization and hospital mutually agree, the 121 performance improvement record reviews may be performed more 122 frequently. Aggregate data concerning these reviews shall be 123 submitted by the organ procurement organization to the State 124 Department of Health by July 1 of each year for the preceding 125 year.

126 (8) No organ or tissue recovered in the State of Mississippi 127 may be shipped out of the state except through an approved organ H. B. No. 556 \* HR40/ R565\* 07/HR40/R565

PAGE 4 (GT\BD)

128 sharing network or, at the family's request, to an approved organ 129 transplant program.

(9) Any hospital, administrator, physician, surgeon, nurse, technician, organ procurement organization, tissue procurement organization or donee who acts in good faith to comply with this section shall not be liable in any civil action to a claimant who alleges that his consent for the donation was required.

(10) Nothing in this section shall be construed to supersede or revoke, by implication or otherwise, any valid gift of the entire body to a medical school.

138 (11) A gift of all or part of the body made (a) by will, (b) under a Durable Power of Attorney for Health Care declaration 139 140 under Section 41-41-209, (c) under a Withdrawal of Life-Saving Mechanism (Living Will) declaration under former Section 41-41-107 141 (now repealed), or (d) under an Anatomical Gift Act declaration 142 143 under Section 41-39-39, shall supersede and have precedence over 144 any decision by the family of the individual making the organ 145 donation.

146 SECTION 2. This act shall take effect and be in force from 147 and after July 1, 2007.