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**Budowa szpitalnego systemu jakości pozyskiwania narządów
od dawców po zatrzymaniu krążenia
w Szpitalu Klinicznym Dzieciątka Jezus w Warszawie**

Hospital quality system of organ donation after circulatory death
in the Infant Jesus Clinical Hospital in Warsaw

Rozprawa doktorska na stopień doktora
w dziedzinie nauk medycznych i nauk o zdrowiu
w dyscyplinie nauki o zdrowiu
przedkładana Radzie Dyscypliny Nauk o Zdrowiu
Warszawskiego Uniwersytetu Medycznego

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Streszczenie w języku angielskim

English summary

Organ donation from deceased individuals following irreversible cardiac arrest is not currently practised in Poland. However, procuring organs, particularly kidneys, from this group of donors could significantly increase the number of organs available for transplantation. The author of this paper argues that the issue is not due to a lack of legal regulations – since the Act on the Procurement, Storage, and Transplantation of Cells, Tissues, and Organs has favourable provisions – or to a shortage of donation potential. Research discussed in part II of this work reveals that 8% of hospital deaths over four years could have led to organ donations if appropriate procedures were in place. Instead, the issue is attributed to the absence of quality systems in hospitals. Part III of the thesis presents a proposed quality hospital system on organ donation from deceased after circulatory death designed for the Infant Jesus Clinical Hospital in Warsaw, which has an active transplant programme. This system is also adaptable for use in other hospitals.

Part I of this work, the theoretical section, outlines the issue by examining global practices in organ donation from deceased individuals after irreversible cardiac arrest. It discusses the various solutions employed in the donor recruitment process, from identifying potential donors to qualifying them for organ procurement.

Part III of this work thoroughly presents the concept of a quality system within the theory and practice of medical services. It details a thematic quality system was developed with established principles, covering key areas, criteria, and quality indicators, as well as standard operating procedures (SOPs):

SOP 1. Identifying and Reporting a Potential Deceased Donor after Irreversible Cardiac Arrest;

SOP 2. Determining Death Due to Irreversible Cardiac Arrest;

SOP 3 Authorisation for Procurement;

SOP 4. Assessing the Suitability of the Deceased Donor's Organs after Irreversible Cardiac Arrest;

SOP 5 Donor Care and Organ Perfusion;

SOP 6 Organ Procurement.

The individual documents offer tools to support each successive stage of the donation process, including protocol templates, lists, diagrams, and checklists. They also outline the purpose, subject, and scope of the procedures, specify responsibilities for implementation, and describe the practical steps in the process.