

Identification and referral of eye donors

This document is designed to aid identification of potential eye/corneal donors and ensure a smooth referral process. We are contactable on **0483 988 463 from 7am to 6pm weekdays,** and **7am-3pm weekends and public holidays.** Additional reference documents are available on our website: <u>www.eyedonation.org.au</u>

1. Identification of Potential Donor

- ✓ Aged 5 ~85 years (upper age limit can vary depending on donor health and suitable recipients)
- X NO haematological malignancies
- X NO metastatic melanoma
- X NO infectious disease (eg. HIV, Hep B, Hep C)
- X NO progressive neurological disorder (eg AD, PD, MND, MS, CJD)
- 🗶 NO viraemia, fungaemia (bacteraemia ok)

NO lifestyle risks (eg recent tattoos, male-male sex, IV drug use)

? Any eye history



Discuss:

- Identify Senior Next of Kin
- Consent for corneas only or whole eyes
- ✓ Consent for research/no research in the event tissue can't be transplanted
- ✓ Inform family that LEDS will be in contact to follow up further medical and lifestyle history

4. Document consent and complete referral

All relevant forms are available on the LEDS website: www.eyedonation.org.au

- ✔ LEDS consent form "Senior Next-of-Kin Authorisation for removal of Eye Tissue"
- ✔ Eye donor referral form "Eye Donor Referral Form"
- ? Coroner's case?
- Contact LEDS to notify of outcome and send referral documents:
 email e<u>vebank@cera.org.au</u> or fax 8677 9093 (please note: new fax number)



Keep medical records available for LEDS to review (unless chart accompanies donor to mortuary)