**Purpose**

Provide documentation and discard instructions for discarding autologous bone.

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| **Step** | **Action** | **Related Documents** |
| **Discard Policy** | No bone package will be discarded until appropriate forms have been reviewed and signed by the patient’s physician and/or TSL Medical Director. |
| **Responsibility**  | * Designated staff will be trained to maintain the tissue database.
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| **Daily/Weekly** |
| **Check for returned forms** | * Check mailbox located in SPS on the ground floor (GWH-47)
* Look in the Bone Flap folder, located in TSL mail inbox.
* Envelopes are typically addressed to designated staff responsible for Autologous Bone Maintenance
 | Autologous Bone Maintenance |
| **Weekly/Monthly** |
| **Discard** | **Forms authorizing discard include either**:* Notification for Discard of Autologous Tissue form **OR**
* Release of Non-Conforming Autologous Tissue form marked “Decline using this product, please discard”

**Once a completed form is received**, perform the following:1. Create a Discard form if using a Release of Non-Conforming Autologous Tissue form with signatures
2. Perform read back with a second tech, using the product package against the form:
3. Patient’s Name
4. MRN
5. Tissue ID Number
6. Type of Product
7. Collection Date
8. Second Tech signs Discard form as Verifier.
9. Once this is completed, dispose of the package in the grey tissue disposal bin located in the OR dirty utility room.
10. Record “Discard Date/Tech ID” on the form.
11. In the Tissue Database, highlight the row in pink and notate: “Discarded (date/time)” in the Final Disposition column.
12. Staple the Discard of Autologous Tissue form to the Tissue Tracking Record
13. File alphabetically in the Tissue Discard binder.
 | Release of Non-Conforming Autologous Tissue FormNotification for Discard of Autologous Tissue Tissue DatabaseAutologous Tissue Tracking Log |

**References:**

Standards for Blood Tissue Banking, Current Edition, American Association of Tissue Banks. AATB, Bethesda, MD.