

Transport Organization

Recommendations for the topic of
organizing and carrying out transport in the organ
donation process of deceased donors

Module — 8

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The term "organ donation" also includes tissue donation wherever appropriate.

1.0

Summary

Within the organ donation process, Swisstransplant is the coordinating site between the hospital that detects/cares for the organ donor, and the transplant centre, that looks after the organ recipient. Together with the partners at the transplant centres, binding processes were defined and formalities for recording and ordering transport (ground and air transport) simplified.

Based on the "Case processing and reimbursement of services not regulated by SwissDRG¹ in connection with solid organ transplantation" agreement between H+², the SVK³ and the FOPH⁴, in effect as of 1 January 2012, the National Allocation Office of Swisstransplant is responsible for organizing transport.

All transport (transferral of a potential donor to a procurement hospital, relocation of coordinators, transport of procurement teams and organs) is organized following consultation with Swisstransplant. The mode of transport depends on the urgency situation, the maximum ischaemia time of the organ and the distance, but also e.g. on road conditions (traffic volume, weather). All transport is organized via an operations control centre. This leads to high efficiency and short response times in the event of problems or change in timing.

In the following, the "Transport Organization" Module deals with the detailed processes, the responsibilities and the roles when organizing and carrying out transport of:

- Potential organ donors
- Return transport of the dead body
- Transfer of organ donor's relatives
- Organ procurement coordinators
- Blood, cell and tissue samples, specific material
- Procurement teams
- Organs
- Organ transport boxes

Without exception, persons involved in the above-mentioned transport are obliged to maintain confidentiality. Due to data protection reasons, only information required for trouble-free transport is to be passed on.

¹ SwissDRG: Swiss Diagnosis Related Groups

² H+: The Hospitals of Switzerland

³ SVK: Swiss Association for Joint Tasks of Health Insurers

⁴ FOPH: Federal Office of Public Health

2.0

Transport of potential donors to a procurement hospital

If the conditions at a detection hospital do not permit organ procurement, the potential donor can be transferred to a procurement hospital with the consent of the potential donor's relatives.

When transporting a potential donor, it is to be ensured that an appropriate transfer of the donor from a detection hospital to a procurement hospital is guaranteed.

2.1 Time of transfer

As per the legislation of certain cantons, transferring a potential donor is only possible prior to the determination of death. As a result of this, death has to be formally determined at the procurement hospital.

2.2 Roles and responsibilities

The formalities of a donor transfer are defined following consultation with the responsible physician treating the donor. In this process, the responsible physician may consult with the responsible physician at the procurement hospital and the Swisstransplant Medical Advisor.

The referring physician at the detection hospital is therefore responsible for the following:

- Selection of transport mode: ambulance or rescue helicopter
- Transferring all information about the donor to the rescue services and to the responsible physician at the destination hospital
- In cooperation with the team on site and the organ procurement coordinator, the referring physician is responsible for the care of the donor's relatives.

The rescue or emergency physician must:

- Be able to manage complex, unstable situations
- Ensure the required medical equipment for the transport

2.3 Organization

The transport is organized by the physician or the treatment team at the intensive care unit of the transferring hospital (detaching hospital) in cooperation with the organ procurement coordinator and the national coordinator of Swisstransplant.

Depending on the transport mode selected, transport is organized following consultation with the responsible rescue service:

- For ground transport
- For air transport

2.4 Handover formalities

When registering the transport and at handover of the donor to the rescue service team, the following details listed are provided to enable safe and trouble-free transport:

- Current donor status
- Installations
- Current medication
- Ventilation settings
- Any other important information

Handover of the following documents:

- Medical transfer report
- Copy of important examination findings (Rx, CT, echocardiogram, abdominal sonography, coronary angiography etc.)

2.5 Documentation

The transport is documented by the national coordinator in the online documentation tool SLIDS⁵. The departure and arrival times are documented by the operations control centre in SLIDS. The times of transport processes not organized by AAA⁶ are documented by the National Transplant Coordination.

2.6 Cost coverage

The transport costs for the potential donor are covered by the Swisstransplant transport fund if they are not covered by any other means.

The objective is to prevent the detecting hospitals and donor's relatives from incurring any additional costs.

⁵ SLIDS: Swiss Logistics and Invoice Documentation System

⁶ AAA: Alpine Air Ambulance

3.0

Transfer of the donor's body after organ procurement

If the donor was transferred from the detection hospital to a procurement hospital for organ procurement, transfer of the donor's body after organ procurement is organized in agreement with the relatives.

After consultation with the relatives and the organ procurement coordinator, the donor's body can be transferred to the hospital originally provided treatment or to an undertaker at the location of the detection hospital (in Switzerland / near the border).

3.1 Time of transfer

After completion of organ / tissue procurement, insofar as no forensic examination is required.

3.2 Roles and responsibilities

The formalities for transferring the donor's body are defined by the organ procurement coordinator subject to consultation with the relatives.

In cooperation with the local coordinator or the treatment team at the intensive care unit of the detection hospital, the organ procurement coordinator is therefore responsible for the following:

- Clarifying the transfer destination
- Organizing the transport (hearse)
- Informing the National Allocation Office regarding the transport

The national coordinator is responsible for the following:

- Documenting the transport in SLIDS

3.3 Documentation

The transport is documented in full by the national coordinator in the online documentation tool SLIDS.

3.4 Cost coverage

The costs of transporting the donor's body back to the detection hospital or to the undertaker are covered by the Swisstransplant transport fund if they are not covered by any other means.

3.5 Instructions regarding the transportation abroad

Valid from 1 December 2022

1. Scope of this document

These instructions set out the rules governing payment of the cost of transporting the donor's body to a neighbouring country. They form a supplement to Module VIII of the Swiss Donation Pathway, which sets out the rules for organising transportation.

In general, the provisions of Module VIII of the Swiss Donation Pathway are applicable where the organ donor is transferred from a hospital to an organ procurement hospital for organ retrieval. The following supplementary provisions to the Swiss Donation Pathway are applicable to patients transferred to a hospital for treatment but for whom a decision must be made to withdraw treatment and to whom the organ donation process is then applied. This therefore applies to potential DCD donors.

2. Return transportation abroad

2.1 Donor's body

If a patient from abroad is a potential organ donor in Switzerland after the decision to withdraw treatment has been taken, the repatriation of the body will be organised in agreement with the relatives after the patient's death.

2.2 Patient

Patients who are admitted to a Swiss hospital for treatment and for whom the decision is made to withdraw treatment can, at the request of the next of kin, be transferred to their country of residence for therapy withdrawal. The resulting transport costs are covered by the patient's health insurance policy.

3. Cost coverage

The cost for the return transport of the donor's body, which is included in the donation process in Switzerland after the decision has been made to withdraw therapy, is covered by Swisstrans-plant. The transport costs will be covered as far as countries close to the border.

A neighbouring country is defined as an area of up to 50 kilometres by road from the Swiss border. The costs of longer journeys may be covered by Swisstransplant after prior agreement.

4. Documentation

Transportation to a neighbouring country must be documented in full by the Swisstransplant National Transplant Coordinator through SLIDS.

5. Preparation

A special coffin is required for cross-border repatriation of the donor's body. This can be sealed if required.

4.0

Transport of relatives

If the donor is transferred from the detection hospital to a procurement hospital, transport can also be organized for the relatives to accompany the donor.

4.1 Roles and responsibilities

The transport of relatives of potential organ donors is organized after consultation with the relatives, the organ procurement coordinator and the national coordinator.

The donation coordinator is therefore responsible for the following:

- Organizing the transport after consultation with the National Allocation Office
- Informing the organ procurement coordinator at the procurement hospital about the relatives' arrival

The national coordinator is responsible for the following:

- Documenting the transport in SLIDS

4.2 Documentation

The transport is documented by the national coordinator in the online documentation tool SLIDS. The departure and arrival times are documented by the operations control centre in SLIDS. The times of transport processes not organized by AAA are documented by the National Transplant Coordination.

4.3 Cost coverage

The costs of the transport of relatives from the detection hospital to the procurement hospital and back are covered by the Swisstransplant transport fund if they are not covered by any other means.

5.0

Transport of organ procurement coordinators

The role of the organ procurement coordinator can be fulfilled by a treating physician, by a qualified medical care professional or by an organ procurement coordinator until entering the operating theatre. From this point in time on, it is imperative for a qualified organ procurement coordinator to undertake the specific tasks during procurement. In all networks, the organ procurement coordinators of the responsible network hospitals can travel to peripheral donor detection hospitals to coordinate the organ donation process on site.

5.1 Roles and responsibilities

The transport of organ procurement coordinators is organized after consultation with the national coordinator. Due to legal reasons, the transport must be undertaken exclusively by officially approved passenger transport operators or with a private vehicle (taxi company, AAA, SBB).

The organ procurement coordinator is therefore responsible for the following:

- Organizing his or her transport after consultation with the National Allocation Office
- Informing the teams at the procurement hospital about his or her arrival time

The national coordinator is responsible for the following:

- Documenting the transport in SLIDS

5.2 Documentation

The transport is documented by the national coordinator in the online documentation tool SLIDS. The departure and arrival times are documented by the operations control centre in SLIDS. The times of transport processes not organized by AAA are documented by the National Transplant Coordination.

5.3 Cost coverage

The costs of transporting the organ procurement coordinator from the **network hospital to the donor detection hospital and back** are covered by the Swisstransplant transport fund in the following amount:

- Taxi: Effective costs as per agreement with AAA
- Train: Based on half price, 1st class ticket
- Ambulance: Only in exceptional cases for the outward journey and subject to consultation with the National Allocation Office: for operations with blue lights
- Private vehicle: CHF 0.70 / km

The costs of transporting organ procurement coordinators are invoiced to Swisstransplant if the donor is registered in the SOAS⁷.

6.0

Transport of blood, cell and tissue samples

Specific examinations (e.g. HLA, serologies, certain biopsies etc.) are carried out at a transplant centre. Further on in the process, it may also be necessary to transport material for organ procurement, conditioning, packaging and shipping from a transplant centre to the procurement hospital.

⁷ SOAS: Swiss Organ Allocation System

6.1 Roles and responsibilities

The transport of blood, cell and tissue samples as well as specific material is organized after consultation between the organ procurement/transplant coordinator and the national coordinator.

The organ procurement/transplant coordinator is therefore responsible for the following:

- Informing the national coordinator about the planned transport
- Informing the responsible laboratories at the transplant centre (depending on local circumstances)
- Transport of material from or to the accident and emergency department

The national coordinator is responsible for the following:

- Organizing the transport with the operations control centre
- Informing the responsible laboratories at the transplant centre (depending on local circumstances)
- Documenting the transport in SLIDS

6.2 Selection of the transport mode

Urgency, road conditions and the estimated transport time are critical for selection of transport mode:

- Taxi
- Ambulance only subject to consultation with the National Allocation Office: for operations with blue lights (see chapter 10.0)
- Blood for cross-match kidneys: transport by taxi as per STAN⁸ decision dated 25 January 2013

6.3 Organization

The transport is organized via the operations control centre subject to consultation between the organ procurement coordinator and the national coordinator.

If the blood is sent to a transplant hospital for HLA typing by the procurement hospital, the taxi can take the organ procurement coordinator along on the outward or return journey.

6.4 Handover formalities

The transport between the hospitals is always carried out from the accident and emergency department to the accident and emergency department.

⁸ STAN: Swisstransplant Kidney Working Group

6.5 Documentation

The transport is documented by the national coordinator in the online documentation tool SLIDS.

The departure and arrival times are documented by the operations control centre in SLIDS.

6.6 Cost coverage

The costs of transporting blood, cell and tissue samples and specific material are covered by the Swisstransplant transport fund.

7.0

Transport of procurement teams to the procurement hospital

Procurement teams are always transported from hospital to hospital. As the journey to the procurement hospital can be planned hours prior to procurement in the majority of cases, ground transport usually takes place. The national coordinator coordinates the organization with the transplant coordinators of the procurement teams and the procurement hospital in order to enable air transport in urgent situations, in the event of unfavourable road conditions (ice, snow, rush hour) or in the case of long distances (>2.5 hrs by ground transport).

7.1 Roles and responsibilities

The transport of procurement teams to the procurement hospital is organized after consultation between the on-call transplant coordinator at the transplant centre and the national coordinator.

The national coordinator is responsible for the following:

- Organizing the transport with the operations control centre
- Informing the procurement team about the transport mode and the scheduled departure and arrival times
- Informing the procurement hospital about the scheduled arrival time of the procurement team, the transport mode and the number of team members
- Documenting the transport in SLIDS

The organ procurement coordinator is responsible for the following:

- Receiving the procurement team at the procurement hospital

The transplant coordinator of the procurement team is responsible for the following:

- Informing the national coordinator about the number of procurement team members
- Coordination and consultation within the procurement team

7.2 Selection of transport mode

Urgency, road conditions and the estimated transport time are critical for selection of transport mode:

- Taxi/ambulance subject to consultation with the National Allocation Office: for operations with blue lights (see chapter 10.0)
- Helicopter or jet subject to consultation with the National Allocation Office (in medically urgent situations, in the event of unfavourable road conditions (ice, snow, rush hour) or in the case of long distances >2.5 hrs)

7.3 Organization

The transport is organized via the operations control centre subject to consultation between the national coordinator and the transplant coordinator of the procurement team.

7.4 Documentation

The transport is documented by the national coordinator in the online documentation tool SLIDS. The departure and arrival times are documented by the operations control centre in SLIDS. The times of transport processes that are not organized by AAA are documented by the National Transplant Coordination.

7.5 Cost coverage

The costs of procurement team transport are covered by the Swisstransplant transport fund.

8.0

Transport of procurement teams and organs to the transplant centre

The procured organs are transported from the procurement hospital to the responsible transplant centre accompanied by the procurement teams or unaccompanied. Focus is the best possible outcome for the recipients under consideration of balancing medical benefit and costs.

In the case of unaccompanied organs, transport is always organized from the accident and emergency department to the accident and emergency department.

In view of the maximum tolerated ischaemia times of organs, the duration of transport per organ is defined as follows:

Organ	Max. ischaemia time	Max. transport time
Heart	4 hrs	2.5 hrs
Lungs	6-8 hrs	3 hrs
Liver	12 hrs DBD, <8 hrs DCD	4 hrs DBD, 3 hrs DCD
Kidneys	24 hrs	20 hrs
Pancreas/pancreatic islets	8 hrs	3 hrs

8.1 Roles and responsibilities

The transport of organs is organized after consultation between the transplant coordinator at the recipient hospital and the national coordinator.

The national coordinator is responsible for the following:

- Organizing the transport with the operations control centre
- Informing the transplant centre about the scheduled departure time of the organ/ the team and the transport mode
- Documenting the transport in SLIDS

The transplant coordinator at the recipient hospital is responsible for the following:

- Informing and coordinating the transplant team
- Receiving the organ/ procurement team at the transplant centre or, if not present, for informing the corresponding responsible stakeholder
- Transport of the recipients to the transplant centre

The organ procurement coordinator is responsible for the following:

- Providing information about/ confirming the departure time of the organs/ the team to the National Allocation Office/ the transplant centre

8.2 Selection of transport mode

Selection of transport mode of organs is dependent on the anticipated transport time and the urgency:

- Taxi
- Ambulance subject to consultation with the National Allocation Office: for operations with blue lights (see chapter 10.0)
- For heart and lungs: use of a helicopter with a ground transport time exceeding 90 min. (after consultation with the National Allocation Office; air transport after consultation with Swisstransplant employees only), or during rush hour as per STAH⁹ decision dated 4 June 2013, and STALU¹⁰ decision dated 13 February 2014
- For a heart in the OCS domestic transport is always ground-based
- For liver and pancreas:
 - With procurement team: ground transport of max. 2.5 hrs
 - DCD livers for an urgent receiver with a ground transport time exceeding 90 min.: by helicopter or jet subject to consultation
 - DBD transport subject to adherence to the maximum transport time
 - Pancreas exclusively ground transportation
- For kidneys: taxi as per STAN decision dated 25 January 2013

⁹ STAH: Swisstransplant Heart Working Group

¹⁰ STALU: Swisstransplant Lung Working Group

8.3 Organization

The transport is organized via the operations control centre subject to consultation between the national coordinator and the transplant coordinator of the transplant centre

8.4 Documentation

The transport is documented by the national coordinator in the online documentation tool SLIDS. The departure and arrival times are documented by the operations control centre in SLIDS. The times of transport processes not organized by AAA are documented by the National Transplant Coordination.

8.5 Cost coverage

The costs of organ transport and return transport of the procurement teams are covered by the Swisstransplant transport fund.

Recipient transport: cost coverage by the transplant centres / health insurance providers

9.0

Transport of organ transport boxes

The Vitalpack Evo organ transport boxes remain in the transplant centres and are processed according to the user manual.

The Vitalpack boxes remain in the transplant centre/organ procurement hospital and are not reprocessed after each use, but are cleaned on site according to instructions. After twenty uses, they are returned to Dipius for inspection. If necessary, a redistribution can be organised by Swisstransplant.

9.1 Roles and responsibilities

The return transport of organ boxes is organized subject to consultation between the transplant coordinator of the recipient hospital and /or the organ procurement coordinator and the national coordinator.

The national coordinator is responsible for the following:

- Organizing the transport with the operations control centre
- Informing the procurement hospital about the scheduled arrival time
- Documenting the transport in SLIDS

The transplant coordinator at the recipient hospital is responsible for the following:

- Informing the national coordinator and coordination in the transplant centre
- Organizing the transport of the used graft boxes to the manufacturing company Dipius Ltd for reprocessing

The procurement coordinator is responsible for the following:

- Informing the National Allocation Office when the LifePort arrive
- Ordering Vitalpack Evo from Dipius Ltd

9.2 Selection of transport mode

- **Vitalpack Evo:**

If required, collection and delivery with DHL (redistribution).

- **LifePort Kidney Transporter**

LifePorts are transported back to the procurement hospital via Swissconnect.

Swisstransplant organises these transports. Exceptions must be approved by the National Transplant Coordination.

- **Liver boxes:**

Liver boxes are the property of the transplant centres. Their return is not carried out via Swisstransplant. Accordingly, the transport mode of is determined by the recipient's transplant centre itself.

9.3 Organization

- **Vitalpack Evo:**
The boxes remain in the transplant centres and are redistributed as needed (via DHL). After ten times of use, reprocessing by Dipius is foreseen.
- **LifePort Kidney Transporter**
The return transport of the used LifePort is organized by Swisstransplant and is carried out via the operations control centre subject to consultation with the transplant coordinators of the transplant centre and the organ procurement coordinators via Swisstransplant.
- **Liver boxes**
Internal transplant centre procedure

9.4 Documentation

The LifePort transport is documented by the national coordinator in the online documentation tool SLIDS. The departure and arrival times are documented by the operations control centre in SLIDS.

9.5 Cost coverage

The costs of transporting organ transport boxes (excluding liver boxes) are covered by the Swisstransplant transport fund.

10.0

Use of blue lights

The DETEC¹¹ regulates the use of blue lights and sirens. A FEDRO¹² bulletin dated 21 October 2019 describes the conditions under which these may be used, providing information on the rights and duties of the drivers and vehicle owners.

Vehicles announcing their presence using blue lights and sirens have the right of way over other vehicles. This arises from Article 27(2) Road Traffic Act (Strassenverkehrsgesetz – SVG) and Article 16(1) Traffic Regulations Ordinance (Verkehrsregelverordnung – VRV).

Organ procurement at foreign hospitals are complex to organize and a risk factor in the organ donation process in terms of time. Procurement teams must be at the destination hospital at a specific point in time in order to not delay the procurement. The promptest possible arrival of the teams is therefore crucial to ensure coordination of the procurement logistics.

As per FEDRO, blue lights and sirens may only be used for as long as their use is urgent and the road traffic regulations cannot be adhered to (Article 16(3) VRV). Moreover, the emergency journey must have been ordered.

In the light of this, blue lights can be used in exceptional cases:

- If there is a risk of losing donor organs
- If specific road traffic situations (traffic jam, diversions etc.) prevent on-time arrival
- If the condition of the receiver is critical

Exceptions can only be approved by Swisstransplant subject to consultation (see reasons above). Feedback regarding the use of blue lights and reasons for their use to the operations control centre is mandatory.

¹¹ DETEC: Federal Department of the Environment, Transport, Energy and Communications

¹² FEDRO: Federal Roads Office

11.0

Contact Addresses

The partner for organizing all transport is AAA. Swisstransplant organizes all transport with the operations control centre of AAA. It plans and coordinates all transport in Switzerland and abroad with the National Allocation Office.

Ground transport:

As per the agreement between Swisstransplant and AAA, AAA organizes ground transport.

Air transport:

AAA undertakes air transport.

11.1 Swisstransplant – National Allocation Office

The National Allocation Office's 24-hrs service can be contacted by calling +41 58 123 80 40.

11.2 AAA

AAA Alpine Air Ambulance AG is a Swiss air ambulance company. It is specialized in transporting patients by air and on the ground.

The operations control centre's 24-hrs service can be contacted by calling +41 44 813 10 10.

11.3 REGA

REGA, Swiss Air Rescue, may also be used when transferring unstable, complex, potential donors, subject to consultation with the Swisstransplant medical service.

The operations control centre's 24-hrs service can be contacted by calling 14 14.

11.4 Dipius Ltd

Used graft boxes are returned to and cleaned and reprocessed organ boxes are ordered from Dipius Ltd.

Dipius Ltd can be contacted during office hours by calling +41 26 470 47 47. info@dipius.ch

12.0

Invoicing formalities

Transport that has been organized by AAA

The invoices for all transport that has been organized by AAA are forwarded directly to AAA:

AAA Alpine Air Ambulance AG
Postfach 233
CH-8058 Zürich Flughafen

Transport that has not been organized by AAA

Invoices for transport that has been organized in special situations and subject to prior consultation with the National Allocation Office are forwarded directly to Swisstransplant:

Swisstransplant
Buchhaltung
Effingerstrasse 1
CH-3003 Bern

In the event of questions concerning invoicing, the Swisstransplant Accounting department can be contacted on +41 58 123 80 23 during office hours.

Please do not send invoices to the next of kin of donors.

Please consult Swisstransplant in all matters concerning the coverage of transport costs:

- The National Allocation Office during the ongoing donation process: +41 58 123 80 40
 - The Swisstransplant Accounting department during the invoicing process: +41 58 123 80 23
-

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Changes

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March 2018	1.2	New logo
March 2015	1.1	Swisstransplant address and telephone numbers
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CNDO

Nationaler Ausschuss für Organspende
Comité National du don d'organes

