

## Komen Tissue Bank -- Tissue Collection Event

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### Important notes:

- Please place **ALL** trash into the red sharps/biohazard container(s) and any used linen into the linen container. Do not use the regular trash can for any trash.
- Please help the Physician remember to fill out the side and location of where the tissue was taken on the yellow Eligibility Checklist page.
- Please fill out an Adverse Event Reporting Form on the clipboard **if** someone has excessive bleeding or any other Adverse Event. This should be given to the area lead or KTB staff and not put into the room bin.

### Surgeon/Radiologist Assistant Job Description

#### In between donors:

1. Change pillowcase linen
2. Change bed linen, we don't use paper on bed
3. Collect any unused pickups, scissors and white trays – we recycle these
4. Find out what size gloves your surgeon wears and have ready
5. Throw all used equipment and materials in the sharps bin
6. Put all unused I&D kit items into Ziploc bag
7. Wipe down the Mayo stand and general clean up from the previous donor
8. Use Cavicide on exam table and counter
9. Get out a new I&D kit and place on mayo stand (unopened)
10. Place dirty linens in linen container.
11. Please take the hard plastic tray from the biopsy needles and place it off to the side for collection at the end so that they don't clog up the sharps container.
12. Setting up your ATEC console
  - Gather 4 items: ATEC needle, canister, bag of saline, lidocaine syringe
  - Please canister on the console. Be sure the lid is secured tightly and no covers are slid under the lid
  - Hang saline on the side of the console
  - Open up the needle using a clean technique. Remove the white tray and set aside. Start a stack of these for the day. Place the outer packaging underneath the blue wrapping.
  - Find the white spike and spike your saline bag, hold up and squeeze until you see saline. Hang on the side of the console
  - Insert the black connector to the black on the console. Same for the red connector.
  - Place the last connector on the canister.
  - Turn the machine on, wait for the beep

- Once the biopsy light is on, click set up. During set up, you want to be sure you see a solid green vacuum light and also see saline flow inside the needle aperture
- Click test, listen for the cutting sound, look for saline in the aperture
- Console automatically goes to biopsy mode.
- Turn the console off
- Attach your lido syringe to the needle “Y” valve
- Cover the needle with the blue paper
- Be sure foot pedal is on the correct side where surgeon will stand

When a new donor arrives:

1. Welcome donor and introduce yourself.
2. Give them a gown and instruct them as far as changing including that the gown should open in the front.
3. Take their Eligibility Checklist and Informed Consent and place it where the physician can review it when he/she arrives.
4. There will be a barcode stapled to the yellow eligibility checklist. Place it on the specimen cup so the tissue sample is ready to be sent to the lab.
5. Step out while donor is changing into gown
6. Get paperwork ready and when doc walks in be sure they do consent and sign
7. Place paperwork sleeve outside door in the shelf. Someone will come along and pick it up

When donor is ready for procedure:

1. Please place donor supine on the exam table. Hand Surgeon paperwork to do consent and sign
2. Once the physician has arrived and is ready, hand the lidocaine (already drawn up) to the physician and be ready to assist in any way.
3. Put on a fresh pair of gloves. Turn biopsy console on. Spray telfa pad with a small amount of saline and have labeled specimen cup near the console.
4. The physician will open the I&D kit and arrange the contents as they prefer.
5. Pick up needle by the handpiece, remove sheath as you hand to doc. Drape tubing over. NOTE try to avoid donor seeing the needle as you hand it to doc
6. Console will be ready. Doc will insert needle into breast and hold foot pedal down. It will take a few seconds to get vacuum going and then will start taking samples every 4.5 seconds. On every beep Surgeon will rotate the handpiece to a new clock position. After 6 cores, surgeon will take foot off foot pedal. Needle will remain in breast.
7. SA will hit the lavage button on the console. Surgeon will rotate the handpiece around for a minute or so lavaging the biopsy cavity.
8. SA will hit the biopsy button and after 2 beeps the needle is closed and it can be removed from the breast.

9. Doc will hand SA the needle and SA needs to remove tissue ASAP
10. If any fluid left in the filter, SA can hit lavage and hold needle up to aspirate fluid out before removing the sample
11. SA will open tissue filter and slide metal out to remove tissue. Spread tissue out on telfa and place in specimen cup. Immediately take specimen cup out to hallway and ask for a runner. A runner will be nearby and come by to pick it up.
12. Take over holding pressure from the Surgeon. You will hold pressure for 10 minutes.

After the procedure:

1. Hold pressure on the incision for 10 minutes (or until the donor has stopped bleeding) before bandaging donor.
2. When the bleeding has stopped, ½ length steri-strips can be applied by laying one gently across the incision and two more ½ length strips in an asterisk pattern (\*). Please do not pull the skin tight.
3. Apply a pressure bandage using a 4x4 folded in quarters and secured with the perforated medi-pore tape.
4. After donor is bandaged, please have them sit up for a few minutes to see if they are bleeding through their bandage.
5. Give them a cold ice pack and instruct them to put it inside their bra to reduce the swelling.
6. Please also observe them as they are standing for a few minutes to again be sure that they are not bleeding through their bandage.
7. Go over the Post-procedural instructions with the donor. They can take off the pressure bandage after 24 hours but they should leave the steri-strips on until they fall off on their own (in about a week).
8. Verify that the side of collection has been marked on the Eligibility Checklist. If the physician didn't indicate other locations, please leave those blank.
9. Please place the consent/ folders in the "mailbox" or other container that is outside the exam room door.
10. Direct the donor in the right direction toward the donor escorts, reminding them to stop at check out to receive their post-op instructions and other paperwork.

If there does happen to be an adverse event such as excess bleeding, please fill out an Adverse Event Reporting Form with as much information as possible. Please contact Dr. Storniolo and let her know about the situation while the donor is still in the room. **Please return Adverse Event Report Forms on the clipboard to Julia McCarty, the Surgical Assistant Area Lead or Jill Henry at the end of the day.** Please do not pack in the supply bin.

At the end of the day

1. The lead will let you know when we get close to being done for the day. DO not pack up until you are instructed to.
2. When you are finished for the day
  - i. Clean everything including wiping down the console
  - ii. Unplug console and wrap foot pedal and power cord up and secure

- iii. Find the large tote in the room. Pull all supplies from that tote and set out on the facility counter (these items belong to the facility we are using)
- iv. Place all other unused supplies in this tote, including pens, clip boards, supplies, saline, biopsy needles (if they fit) and also board on the room door.
- v. Place bin on top of console and roll it up front to the area where they are packing up
- vi. Replace pillow linen, and blue trash bag in linen container
- vii. Take all extra linen back to the area where collecting

Additionally, at the end of the day, you will be given a checklist by your area lead or KTB staff with instructions on when and how to tear down the exam room. **Please do not begin packing until you are instructed to do so** in case there are last minute additional donors.