



The Organ Donation and Transplantation Alliance connects organ procurement organizations, transplant centers and hospitals to education and best practice resources nationwide.

## HOSPITAL C-SUITE SNAPSHOT SERIES

# UNIFORM ANATOMICAL GIFT ACT (UAGA)

# WHAT YOU NEED TO KNOW

### Diligent Search and Hospital Administration Authorization

When family members of a critically ill patient cannot be located, or if patient’s identity is unknown and the patient dies, the responsibility of the disposition of the body falls upon the coroner, medical examiner and/or hospital administrator. Some of these fatally ill patients could potentially be an organ donor post-mortem, and donation status is undetermined, hence the provision in the UAGA for conducting a diligent search and a priority of legal decision makers having the ability to authorize donation.

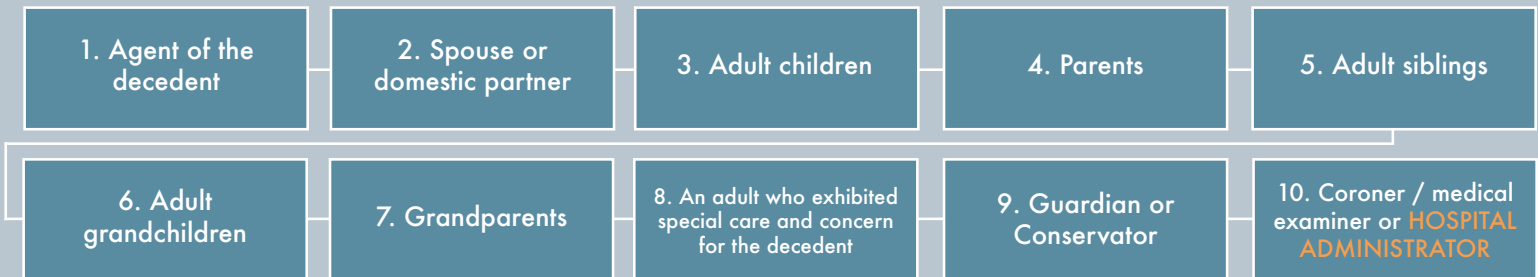
### The UAGA is the legal foundation for Organ and Tissue Donation

If the patient is unidentified, or next of kin is “reasonably unavailable”, The Uniform Anatomical Gift Act (UAGA) stipulates that a well-documented reasonable effort, or diligent search is conducted to ascertain patient’s identity or authorizing party for at least 12 hours that includes checking personal belongings, local police missing persons reports, finger printing of decedent, if appropriate foreign consulates, questioning of persons visiting the decedent before or after death, and social media, etc. More information may be found in your state’s UAGA, visit the Alliance [Organ Donation Toolbox – Legal & Regulatory section](#).

### Hospital Administrators are included in the hierarchy of who can authorize an anatomical gift

Persons authorized to make an anatomical gift on behalf of a decedent are in the following order of priority for those persons reasonably available:

### Order of Decision-Makers



### Administrative authorization supports hospital administration as a donation decision-maker

Hospital administrators are legally protected and granted immunity from liability in the event that no one is reasonably available to decide on behalf of the potential donor. Hospital policies should incorporate a comprehensive diligent search and an administrative authorization process where the hospital may be in a position to step in and potentially permit the gift of life. A person or entity shall be immune from liability for actions taken in accordance with, or in a good faith attempt to act in accordance with, the provisions under this act or the applicable anatomical gift law of another state. (UAGA C.26:6-91)

### Known objections by persons not reasonably available do not bar persons who are reasonably available from making an anatomical gift

If family is not “reasonably available”, that is to say, able to be contacted by an organ procurement organization (OPO) without undue effort and willing and capable to act in a timely manner consistent with existing medical criteria necessary for making an anatomical gift, and there is no documented evidence of the decedent’s choice not to donate; the administrator of the hospital “shall make an anatomical gift of the decedent’s body or part” (UAGA C.26:6-85).



For additional info on this topic, visit:  
[ORGANDONATIONALLIANCE.ORG/CSUITE](http://ORGANDONATIONALLIANCE.ORG/CSUITE)

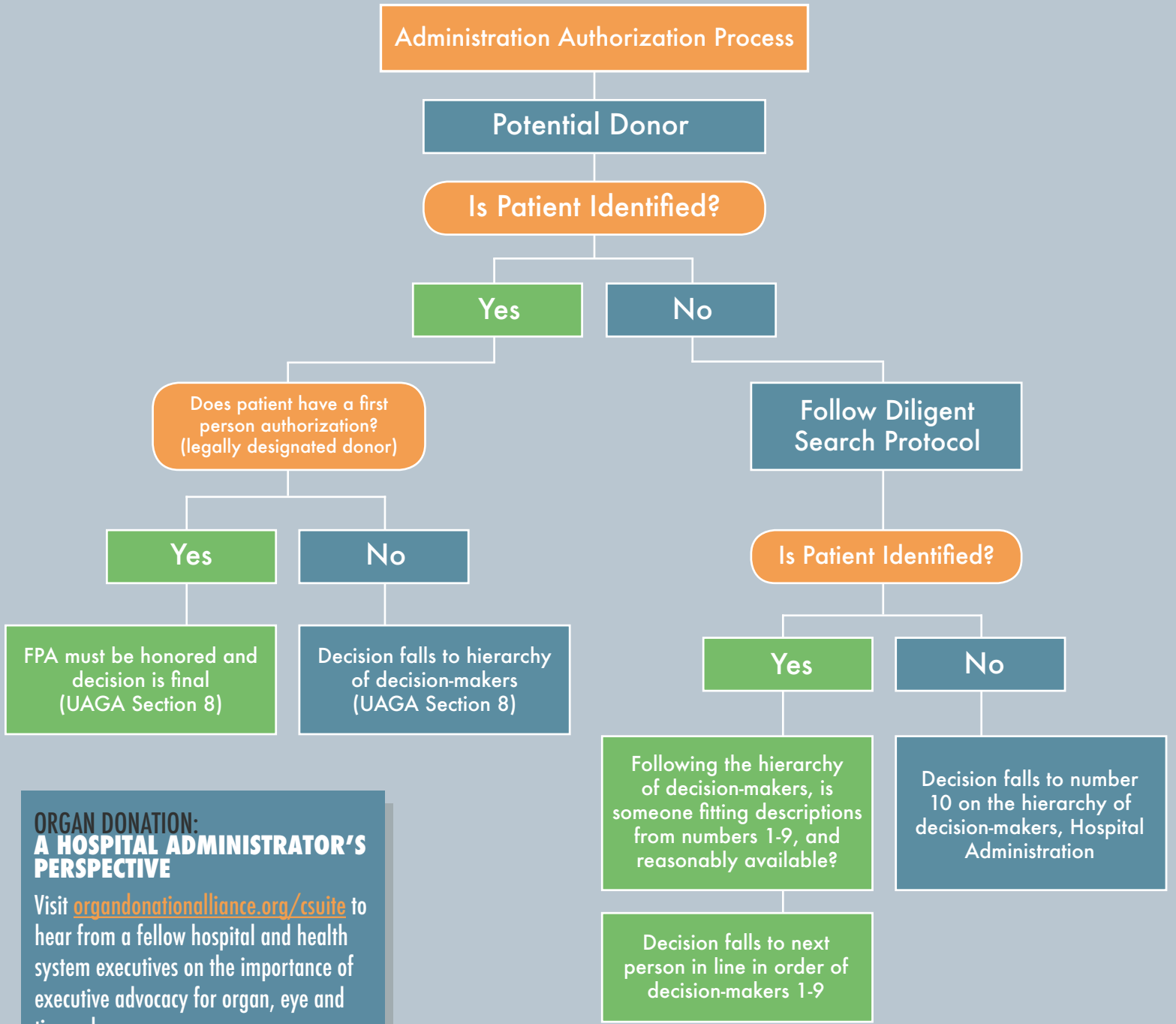
To register as an organ, eye and tissue donor, visit  
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### ORGAN DONATION: A HOSPITAL ADMINISTRATOR'S PERSPECTIVE

Visit [organdonationalliance.org/csuite](http://organdonationalliance.org/csuite) to hear from a fellow hospital and health system executives on the importance of executive advocacy for organ, eye and tissue donors.



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