Anatomical Donation/Materials Programs

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<th>Responsible Officer:</th>
<th>SVP - Health Sciences &amp; Services</th>
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The goal of the University is to ensure that anatomical materials are effectively managed and that the anatomical donation programs maintain public confidence in meeting the needs of donors and their families and advancing the health sciences education and research enterprise. Achieving this goal is the responsibility of the program staff, medical school deans and their designated Responsible Executive Officers (REOs), vice chancellors for research and the Office of the President.

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**I. POLICY SUMMARY**

The University of California (UC) is committed to maintaining a standard of excellence in managing and operating anatomical donation programs based at UC medical school campuses and with regards to the acquisition, use and disposition of anatomical materials used for education and research at all UC campuses. The UC Anatomical Materials Programs (AMP), also referred to as willed or donated body programs (hereafter referred to as “Programs”), provide
an valuable public service by enabling people to donate their bodies to the UC. All anatomical materials are used to support the education and training of health professionals and to further scientific and research endeavors. It is the policy of the UC to comply with all laws, regulations and requirements that are applicable to the management and operation of these programs and all anatomical materials used for education and research.

To meet this standard, UC maintains governance and oversight structures that ensure clear reporting lines and dual reporting mechanisms on campus and at the UC Office of the President (UCOP). Management initiatives and best practices for donation programs are regularly reviewed, and systemwide guidelines addressing major elements of these programs are in place. Key features include:

- Standard definitions for anatomical specimens for use in the acquisition, allocation, tracking and disposition of materials;
- The establishment of campus advisory boards to ensure compliance with anatomical donation program policies and guidelines;
- Information systems, at both the campus and UCOP levels, that permit tracking of anatomical materials from the time of donation or acquisition to the time of final disposition or return;
- Written guidelines for records management and standards for audit, security, staffing and personnel; and
- Systemwide donor forms, developed by the Office of Health Sciences and Services (HSS) and the Office of General Counsel, for use by campus Programs to ensure compliance with legal requirements as well as standard tracking forms developed by UCOP for use by all campuses to maintain consistency and proper chain of custody.

The goal of the University is to ensure that anatomical materials are effectively managed and that the anatomical donation programs maintain public confidence in meeting the needs of donors and their families and advancing the health sciences education and research enterprise. Achieving this goal is the responsibility of the program staff, medical school deans and their designated Responsible Executive Officers (REOs), vice chancellors for research and the Systemwide Director of Anatomical Services at the Office of the President.

II. DEFINITIONS
ACQUIRED SPECIMENS—Human anatomical material typically sourced from a non-UC entity for education or research use at a UC campus or by UC faculty, students, or researchers.
ALLOCATION—The lending of anatomical materials from a UC Program to an approved end user.

ANATOMICAL ADVISORY BOARD (AAB)—An advisory board that provides broad input from the community by advising the campuses on policy and making recommendations regarding program activities.

ANATOMICAL DONATION PROGRAM (ADP) also known as ANATOMICAL MATERIALS PROGRAM (AMP), DONATED BODY PROGRAM, BODY DONATION PROGRAM, WILLEDS BODY PROGRAM (Program(s)) —The Programs at the UC Schools of Medicine at Davis, Irvine, Los Angeles, San Diego and San Francisco that serve as the collection and preparation point for donated bodies and are the authorized custodians of anatomical materials.

ANATOMICAL MATERIALS also known as ANATOMICAL SPECIMENS—Human body parts (for use in education and research) that are grossly identifiable and commonly recognizable as such to a layperson without the use of any specialized methods of identification. This definition does not include blood, urine, feces, semen, or other bodily fluids, microscopic tissue samples, human cells, hair, nails, teeth, paraffin blocks, or tissue slides.

ANATOMICAL MATERIALS REVIEW COMMITTEE (AMRC)—A campus management team at UC campuses with an ADP which has the operational expertise to direct the Program.

ANATOMICAL SERVICES—The goods and services side of an anatomical donation program. The provision of anatomical materials and staff expertise or services for education and research purposes.

BLOOD-BORNE PATHOGENS—Microscopic organisms in human blood and some body fluids that can cause disease in humans.

CREMATED REMAINS also known as CREMAINS—The ashes and bone fragments of a human body that are left after cremation or alkaline hydrolysis and may include ashes from the cremation container. May also include foreign materials, pacemakers, or remnants of prosthetic devices.

DIGITAL DONOR LIBRARY (DDL) also known as ANATOMICAL MATERIALS REGISTRY—A secure, electronic application and database, accessible to UC Programs, auditors and UCOP, to ensure that active, real-time, transparent controls of Programs are in place and that standard elements are gathered from each Program. The DDL is a donor registry used to manage and track all stages of donation from registration to final disposition.

DONOR AGREEMENT also known as DONATION AGREEMENT, DOCUMENT OF GIFT—The legal document used by all UC Programs to register a donor or accept the at-need donation of a human body for scientific use.
DONOR RECORD—The complete file of the donor registry maintained by a UC Program on each donor that is enrolled in a Program. Donor records are kept in hard copy and/or electronic forms.

DONOR REGISTRY—A database that contains records of anatomical gifts and amendments to or revocations of anatomical gifts. All electronic and hard copy records regarding anatomical gifts to a UC Program are a part of the donor registry.

DURABLE POWER OF ATTORNEY—An agent under a power of attorney for health care who has the right and duty of disposition under the California Probate Code Division 4.7 (commencing with Section 4600).

END USER—An approved educator or researcher who requests and receives a loan of anatomical materials from a UC Program.

END-USER AGREEMENT also known as END-USER CONTRACT—The agreement entered into between an external end user and a UC Program that sets forth the terms and conditions by which the end user shall be permitted to use anatomical materials for education/research in accordance with Program policies and procedures and applicable laws and regulations. All end-user agreements must be in a form approved by UCOP and the Office of General Counsel.

ENVIRONMENTAL HEALTH & SAFETY (EH&S)—A UC office that supports the mission of the University by providing comprehensive environmental protection, occupational health, and industrial safety expertise to the entire University community. Each UC campus has an EH&S office.

EXTERNAL USER—An entity (educational, medical, or other) that is not owned, operated by, or affiliated with UC that has been approved as an end user in accordance with university policies.

FACILITY—A location for storage and or use of anatomical materials.

FINAL DISPOSITION—For the purposes of the Programs, this includes both the method of disposition, currently cremation or another legal method, and the scattering of the cremated remains.

INDIRECT COSTS also known as OVERHEAD—Those expenses incurred by an operating unit/UC Program that are not directly associated with providing a good or service (e.g., rent, telephone, or chemicals).

INTER-CAMPUS TRANSFER—The loan of anatomical material between UC Programs for use by UC faculty, students or researchers only.

INTERMEDIARY also known as THIRD PARTY, BROKER: A person or company who acquires and distributes anatomical materials that were not donated directly to that person/company. This
definition is not intended to apply to institutions that share research bio-specimens under formal academic/research collaborations.

INTERNAL USER—An entity (educational, medical, or other) that is owned, operated by, or affiliated with UC that has been approved as an end user in accordance with UC policies.

MASTER SPECIMEN CODE also known as CODE, IDENTIFICATION NUMBER—A unique alpha numeric code assigned to anatomical materials and linked to a donor or acquired specimen, from which the complete history of the materials can be tracked.

MASTER SPECIMEN LIST (MSL)—A list of anatomical material specimens, classified by region and used to define and track items through to final disposition.

RESPONSIBLE EXECUTIVE OFFICER (REO)—Provides management oversight of his or her respective Program, and is responsible for the accountability of all administrative and operational responsibilities, including campus director evaluations. The REO reports to and is accountable to the medical school dean and also serves as chair of the AMRC.

SITE VISIT—A physical inspection of an end users facility performed by UC Program staff or the Systemwide Director against a defined set of criteria.

STANDARD FORMS—Program-specific forms standardized for systemwide use and approved by the Systemwide Director with guidance by the SAMRC and Office of General Counsel. Forms may be Required (eg Donation Agreement, Tracking Forms) or Optional (eg Letter of Appreciation).

STANDARIZED REPORTS also known as REPORTS—A report that includes a defined set of criteria.

SYSTEMWIDE ANATOMICAL MATERIALS REVIEW COMMITTEE (SAMRC)—The committee that recommends guidelines, policies, and procedures for adoption by all UC Programs, and serves in an advisory capacity to the Senior Vice President of Health Sciences and Services and his designee(s).

SYSTEMWIDE DIRECTOR—A UCOP manager with designated responsibility for the coordination and oversight of campus Programs and who serves in an advisory capacity for all UC campuses with a need to procure anatomical materials for education and research purposes.

TEACHING COLLECTION—Bones, fixed prossections or plastinated specimens allocated to a specific educator at a UC Campus for anatomical education (i.e., without further dissection or use in research), inventoried annually by the AMP, but allocated without a specific end point for return.
THIRD-PARTY DONATION—A donation made when a donation agreement is completed by a Durable Power of Attorney, Spouse or Registered Domestic Partner. Other authorized agents may make this type of donation, by AMRC approval and with the use of the UC Standard Form designated for this purpose.

TRACKING FORM—A Required Standard Form that documents the chain of custody between a Program and an end user, vendor or third party service provider.

UNIFORM ANATOMICAL GIFT ACT (UAGA)—An act established in 1968 to standardize state laws on the donation of organs and tissues for transplant, education and research. The 2007 UAGA update was implemented, with modifications, in California in 2008.

III. POLICY TEXT

The UC relies on the support and generosity of the public or help in fulfilling its academic, research and healthcare mission. Each year, more than one thousand Californians make an extraordinary gift to the UC by donating their bodies or those of a loved one to support the education of health professionals and to further scientific research. The UC recognizes the value and importance of these donations and is committed to ensuring that they are stored, used, and disposed of with care and respect.

Human remains are integral to a wide range of educational, research, and clinical pursuits, including gross anatomy instruction, anatomical and physiological research, pathological examination, organ transplantation, skin grafts, stem cell research and reproductive therapy. Remains received by the UC Programs through donation, as well as those that may be acquired from approved alternate sources, provide valuable resources for use in study, training and research. These anatomical materials (which are also referred to as willed or donated bodies, cadavers, or human or anatomical specimens) are also used for surgical procedural training, basic and applied biological and biomedical studies, allied health education, forensic research and training, mortuary science education, and the development and testing of new medical devices.

Anatomical materials subject to these Standards and Guidelines are defined as those that are received by UC Programs or acquired from an approved alternate source and are used by UC faculty, researchers and students for education and research purposes. They are body parts that are clearly identifiable and commonly recognizable to a layperson without the use of any specialized methods of identification. In general, they do not include blood, urine, feces, semen, or other bodily fluids, microscopic tissue samples, human cells, hair, nails, and teeth, and specimens preserved in paraffin blocks or as tissue slides.

- This policy applies specifically to anatomical materials donated to or acquired by the University for use in non-clinical research and education endeavors (i.e., non-patient care activities such as transplantation or clinical therapy).
The Programs at the Schools of Medicine at Davis, Irvine, Los Angeles, San Diego and San Francisco are the sole authorized custodians of the anatomical materials described in this document.

Approval by the campus Anatomical Advisory Board or the Systemwide Anatomical Materials Review Committee (SAMRC) is required for clinicians, faculty and staff using the UC name while participating in research, education or training activities where anatomical materials from any source are used. This ensures that applicable University procedures including those administered by the Office of Contracts and Grants, Continuing Medical Education, Conflict of Interest Committees, the AMP’s or others, are followed by participants and vendors.

Use of Human Anatomical Material

The University’s five Schools of Medicine at Davis, Irvine, Los Angeles, San Diego and San Francisco have established a Program to serve as the collection and preparation point for donated bodies and that may provide services for anatomical materials acquired from an approved alternate source. These anatomical materials may be studied immediately as fresh tissue, or may be preserved for use at a later date by means of freezing or as specially preserved tissue for use in anatomical preparations, including dissections. Skeletal remains are also prepared and used for educational and research purposes. [Note: In October 2012, the Liaison Committee on Medical Education granted preliminary accreditation to the UC Riverside School of Medicine, making Riverside the university’s sixth School of Medicine. For purposes of this policy and the medical education and research activities at Riverside, anatomical materials will continue to be procured through the Program at UCLA.]

The University supports appropriate use of anatomical materials by faculty, students, and residents in training at University health sciences schools, by researchers on the campus, by qualified non-UC researchers (both in the non-profit and commercial sectors), by affiliated educational institutions such as the California State Universities and Community Colleges, and by certified continuing medical education programs. Specimen allocation by each campus Program will follow the hierarchy outlined below:

1. UC students and researchers enrolled at or working for the campus at which a Program is based
2. UC students and researchers at other UC campuses
3. External non-commercial research and education organizations
4. Commercial research programs and commercially-sponsored educational programs

The teaching and research needs of UC campuses are given priority over external requests for use of donated materials. To ensure that the needs of UC faculty and students are met, and to minimize the need for acquisition of materials from outside the UC system, the University encourages sharing and transfer of anatomical material between campus Programs.
IV. COMPLIANCE / RESPONSIBILITIES

The University has established a defined reporting structure for responsible oversight of the Programs (Appendix I). The structure involves dual local/systemwide reporting lines to reflect the important roles of each campus and the Office of the President in ensuring the proper management of the Program.

University of California Office of the President Division of Health Sciences and Services

Systemwide Anatomical Materials Review Committee (SAMRC)

- A SAMRC serves in an advisory capacity to the Senior Vice President (SVP) of Health Sciences and Services and/or his designee. SAMRC membership shall include a senior manager designated by the HSS SVP, the systemwide Director, representatives from the Office of the General Counsel, the Division of Audit, Ethics and Compliance, and campus participants representing the campus Anatomic Materials Review Committee (AMRC) and/or Anatomical Advisory Board (AAB). Unless otherwise approved, the individuals will include the REO, the campus Program Director, and the faculty Advisor from each of the five medical schools authorized to operate programs under this policy. Other members may be appointed to the SAMRC by the SVP.

- SAMRC shall recommend guidelines, policies and procedures for adoption by all UC Programs.

- SAMRC shall meet no less than three times per year.

Systemwide Anatomical Services Director

- The systemwide Director reports to the Senior Vice President for Health Sciences and Services or to a senior manager designated by the SVP for this function.

- The systemwide Director serves in an advisory capacity for all UC campuses with a need to procure anatomical materials for education and research purposes.

- The systemwide Director provides oversight and coordination of the five individual campus Programs.

- The responsibilities of the systemwide Director, with input from the SAMRC, include initiating policy and procedure development, developing inventory audit and monitoring procedures, verifying and reporting compliance with policies and procedures, and coordinating the development and implementation of ethical standards of conduct and guidelines for the management of campus Programs. The systemwide Director shall be directly involved in the recruitment, selection and evaluation of campus Program Directors.

- On a periodic basis, the systemwide Director shall receive and review campus and Program reports regarding all donations, procurements, inventories, requests, transfers and
allocations, returns of material, and final dispositions. The systemwide Director shall conduct regular reviews, site visits, inventory confirmations and conferences.

- To ensure that all Programs conform to UC policies and procedures and meet ethical standards, each campus Program Director is accountable to the systemwide Director with regard to his/her overall performance and compliance with systemwide policies and standards. Simultaneously the Program Director is accountable to the REO for all administrative and operational responsibilities. This represents the dual local/systemwide reporting structure of each UC Program. The REO, with input from the faculty Advisor, is responsible for annual (and other periodic) evaluations of the campus Director, and shall receive and consider formal input from the systemwide Director as a regular part of the employee evaluation process.

**UC Schools of Medicine**

- The five medical schools authorized to operate Programs (Davis, Irvine, Los Angeles, San Diego and San Francisco) will participate in systemwide activities and be subject to systemwide policies applicable to all UC Programs. These programs will have a direct link and systemwide accountability to the Office of the President (UCOP) through the Director of Anatomical Services (systemwide Director) in the Division of Health Sciences and Services.

- The Vice Chancellor or School of Medicine Dean shall serve as responsible executive officer (REO) providing management oversight of the Program. He/she may appoint a senior member of the administration to serve as the REO at his/her discretion.

- Locally, the Program will have a campus Director who shall be responsible for the daily operation of the Program and shall report to the REO.

- Each campus Program shall have an appointed faculty Advisor who shall be afforded sufficient time to provide meaningful participation in Program operations. The faculty Advisor shall provide active operational advice and shall participate in the hiring and evaluation of Program employees.

- Each Program shall operate under the direction of an Anatomical Materials Review Committee (AMRC), a management team with operational expertise, that consists of at least the REO, who will serve as chair, the campus Director, and the faculty Advisor (a senior faculty member with expertise in the use of anatomical materials). The Dean may appoint additional members with relevant qualifications to this committee as desired.

- The AMRC shall meet monthly, or a minimum of ten times per year, to ensure proper daily operation of the program. Designated members of this committee shall review and recommend action on requests for use of anatomical material as necessary.
Each campus shall establish an Anatomical Advisory Board (AAB) consisting of the REO, faculty, staff, users of anatomical materials and the community. This board shall provide broad input from the community by advising the campus on policy and making recommendations regarding program activities. The Dean of the School of Medicine shall serve as chair of the AAB. The AAB shall meet at least annually or as necessary.

The Program is not responsible for the receipt, tracking and disposition of anatomical specimens obtained during surgery or autopsy from the medical center or its affiliated clinics as these materials typically fall under the auspices of other departments such as the Department of Pathology.

IV. PROCEDURES

Acquisition and Management of Donated Materials

Each campus Program is required to comply with approved standardized donor application requirements. Each Program must use approved authorization/consent forms and other supporting documentation. Any local variation in forms to reflect unique program features must be approved in consultation with the SAMRC, legal counsel, and the Systemwide Director.

- An individual may prearrange for the donation of his or her remains to the Program.
- A spouse, registered domestic partner, or other individual may initiate the donation of anatomical remains on behalf of the deceased. Such donations shall be governed by applicable statutes, or under an acceptable and unambiguous durable power of attorney. As determined by the local campus, and with approval of the Systemwide Director, third party donations may also be accepted upon completion of required documentation.

- All donors must waive the right for the return of cremated remains, as stipulated in California Health and Safety Code 7154.4, unless otherwise mandated by court order.

The University shall maintain a centralized registry – the Digital Donor Library – using a secure electronic system accessible by Program staff at each campus and by the Systemwide Director, to ensure active, real-time, transparent control of the Programs. The DDL shall be managed by the Systemwide Director who shall ensure that standardized definitions are in place, and that standard data elements are gathered from each Program. Each campus shall ensure that the Program has secure computing environments and access to system-wide databases.

The DDL will manage and track all aspects of donation, including anatomical preparation, handling, inventory management, allocation, and disposal of anatomical materials and may be used to track anatomical materials acquired from an approved alternate source. A systemwide mechanism shall record and relay all death notifications from each campus to the Systemwide Director. This notification is accomplished via a call service as well as through access to the DDL.

Ceremonies of appreciation may be held annually at each campus and may include donor families at the discretion of the campus Program Director and AMRC.
Anatomical Material Preparation, Handling, Inventory Management and Tracking

All donations to a program shall be tested for communicable diseases including but not limited to HIV, Hepatitis B and Hepatitis C and results shall be recorded in the DDL. In general, infected anatomical material is not acceptable for use at the UC and shall not be allocated to any external entity. Entities wishing to utilize untested or positive material(s) must be approved in advance by the AMRC and they shall indemnify the UC, in writing, for all associated risks.

In order to manage the UC’s collection of human anatomical material more efficiently, human anatomical specimens shall be defined in a Master Specimen List (MSL) (Appendix II).

- The MSL has a common set of definitions and shall be reflected in a standard UC coding system.

- Standardized specimen tagging and tracking by means of a suitable technology shall be developed by the SAMRC and utilized by the local campus.

- The tagging system shall be integrated with the DDL, which permits data management from the preparation laboratory to UCOP.

- Complete inventories shall be validated on a monthly basis.

- Campus Programs shall establish a schedule for physical inventory of their collections to occur no less than annually. Discrepancies shall indicate the need for more frequent inventories. Upon request of the systemwide Director, inventories may be conducted at random or for cause.

- Campus audit services shall conduct unscheduled inventory and financial audits of local Programs. Audits may be initiated by the systemwide Director.

Anatomical Material Request and Fulfillment

Anatomical materials necessary to support UC teaching and research activities shall be requested from one of the Programs. Anatomical materials that are not available through the Programs may be obtained from an approved alternate source\(^1\) that has been requested via formal application to the campus committee designated with oversight responsibilities.

Each campus Program will adhere to the following principles when making decisions about allocations of donated anatomical material:

- The Program shall ensure that all requests for use of donated anatomical materials identify the prospective custodian of the material and the intended users, and contain an appropriately detailed description of the proposed use, the research protocol (if
applicable), the teaching or training application, and the expected duration of the use.

- Allocation decisions shall be made by the campus AMRC with general guidance on allocation policy from its AAB.

- The acquisition of anatomical specimens from third-party brokers or intermediaries is prohibited. Anatomical materials donated to UC may not be assigned to third-party brokers or intermediaries. All anatomical materials donated to the University may only be transferred directly from UC as the provider to an approved end-user for purposes of teaching or research.

- All end-users that request and receive anatomical materials must have an appropriate use facility such as a laboratory or other scientific venue that has received approval by the respective campus Program, and must undergo routine inspection by the local Program Director or his/her designee. The systemwide Director may also inspect facilities.

- Data on all users for all purposes shall be collected and included in the DDL.

- An individual or program approved for a loan of anatomical materials must certify agreement to the terms and conditions of the allocation, including the duration of use and conditions for return to the Program.

- Campus Programs may maintain permanent teaching collections, such as skeletal or plastinated collections whose loan duration may be considered indefinite.

**Anatomical Material Return and Disposition**

- All materials shall be returned to the Program to which they were originally donated. In exceptional circumstances, the AMRC may approve alternate disposition arrangements upon verification of records pertaining to the subject materials.

- Each campus Program shall verify and record the return and final disposition of materials within the DDL and the Systemwide Director shall be afforded access to this information.

- The University of California will provide for the appropriate disposition of anatomical materials through cremation or alkaline hydrolysis and scattering at sea, or by other legal methods of disposition according to the California Health and Safety Code and the State of California.

- Some materials are not individually catalogued by campus Programs; these include blood, urine, feces, semen, or other bodily fluids, microscopic tissue samples, human cells, hair, nails, and teeth, and specimens preserved in paraffin blocks or as tissue slides. In general, these materials are defined under separate criteria by the California Health and Safety Code, and are disposed of in accordance with those standards.
Financial Management

To the extent practical, the University shall fund the administration of the Anatomical Materials/Donation Program by assessing costs to all users of anatomical materials, internal and external, educational and commercial.

- A preparation fee for assigned materials shall be assessed by each campus Program. The amount of this fee shall be determined based on a master loan fee description and fee application standards, developed by the SAMRC. The master loan fee description shall be relevant to actual program costs in accordance with UC policies and procedures.
- Other fees for use of anatomical materials, supplies or labor shall comply with University policies (e.g., recovery of indirect costs).

Security

All Programs and campus facilities that store or use anatomical materials shall provide physical security at a level that will permit authorized access only by personnel approved by the AMRC or AAB to ensure that donations and anatomical materials are protected from misuse.

- Physical security mechanisms shall employ individualized coded entry access.
- Program security systems may include alarm systems, card-key access, and video cameras as determined by local facility configurations.

Program Staffing

- All Program employees are subject to UC personnel policies, including those on hiring and periodic performance evaluation. The hiring process shall include financial and criminal background checks, in accordance with applicable personnel policies and California law.
- Job descriptions shall designate positions assigned to Anatomical Materials Programs as critical positions.
- UC shall establish standardized job descriptions and classifications for campus Program Directors and key staff. Pay scales shall be regularly reviewed by the SAMRC to conform pay rates to the level of responsibility required for management of the Program. All employees shall have a completed background check on file.
- Each campus Anatomical Materials Program Director should be classified at a level that reflects the responsibilities and duties of the position.

Physical Plant
Programs shall be assigned space sufficient to permit appropriate storage of anatomical materials and work areas that allow faculty, staff and students to operate in a safe and secure environment. Program work areas will include areas appropriate for anatomical preparation, for dissection and for storage of frozen and embalmed tissues as well as intact remains.

Violations

Suspected violations of this policy shall be reported to the campus hotline, the Research Compliance Officer, or the Health System Compliance Office for investigation.

V. RELATED INFORMATION

For information or forms, contact the systemwide Director of Anatomical Services - UCOP.

1 Alternate sources of Anatomical Materials must be vetted through UCOP’s Division of Health Sciences and Services and may include non-UC anatomical donation programs; non-UC anatomical donation programs; licensed or unlicensed tissue banks; UC or non UC departments of pathology, surgery or others; Bio-repositories; medical examiners or coroners offices. Approved alternate sources must comply with national best practices or published standards for non-transplant anatomical donations, such as those developed by the American Association of Tissue Banks.

VI. FREQUENTLY ASKED QUESTIONS

VII. REVISION HISTORY

PP 110305 est. 2005; Revision UC-HS-12-0169 began 2012
Appendix 1

Dual Reporting Structure

Vice Chancellor
Health Affairs

Sr. Vice President
Health Sciences and
Services

Responsible
Executive Officer
(REO)

Systemwide Anatomical
Services Director

Campus
Program Director
MASTER SPECIMEN LIST
(Appendix II)

Whole Cadaver
Whole Un-embalmed Cadaver (WC-UN)
Whole Embalmed Cadaver (WC-EM)
Whole Un-embalmed Cadaver - Brain removed (WC-UNBR)
Whole Embalmed Cadaver - Brain removed (WC-EMBR)
Whole Skeleton (WC-SKEL)
Disposable Material (WC-DMAT) (Specify)

Cephalus
Whole Cephalus (C-HD)
R Hemi-sected Head (C-RHH)
L Hemi-sected Head (C-LHH)
Cephalus w/ Cervical Spine (C-CS)
Cephalus with Cervical-Thoracic Spine (C-CTS)
Occiput - C Spine (C-OC)
Skull (C-BS)
R Temporal (C-BTR)
L Temporal (C-BTL)
Calvaria (C-BC)
Mandible (C-BMR)
Maxilla (C-BML)
Whole Brain (C-WB)
R Half Brain (C-HBR)
L Half Brain (C-HBL)
Cephalus Tissue (C-T) (specify)
Disposable Material (C-DMAT) (Specify)

Torso
Whole Torso (T-W)
Whole Torso with Limbs (T-WL)
Torso with Shoulders (T-WSH)
Torso with Cephalus (T-WHD)
Torso with Cephalus and Shoulders (T-HDSH)
Torso with Cephalus and Whole Upper Limbs (T-HDWUL)
Torso with Upper Limbs (T-UL)
Torso with Lower Limbs (T-LL)
Torso with knees (T-LLK)
Thorax (T-TRX)
Cephalus, Thorax and Shoulders (T-CTSH)
Cephalus, Thorax and Upper Limbs (T-CTUL)
Whole Spine (T-SW)
Cervical Spine (T-SCV)
University of California – Policy PP110305
Anatomical Donation/Materials Programs

Thoracic Spine (T-STH)
Cervical-Thoracic Spine (T-SCT)
Cervical-Thoracic-Lumbar Spine (T-SCTL)
Thoracic Lumbar Spine (T-STL)
Thoracic- Lumbar-Sacral Spine (T-STLS)
Lumbar Spine (T-SLU)
Lumbo-sacral spine (T-SLS)
Sacral Spine (T-SS)
Spinal cord (T-SCD)
Abdomino-pelvis (T-ABD)
Pelvis (T-PW)
R Hemi Pelvis (T-PHR)
L Hemi Pelvis (T-PHL)
Pelvis with Lumbar Spine (T-PLS)
Pelvis with Lower Limbs (T-PLL)
Pelvis with LL at mid tibia (T-PLLMT)
Pelvis with LL at mid femur (T-PLLMF)
Organ (individual or Paired) (T-ORG) (specify)
Tissue (T-T) (specify)
Disposable Material (T-DMAT) (Specify)

Upper Limb
R Upper limb with Shoulder (UL-WR)
L Upper limb with Shoulder (UL-WL)
R Shoulder (UL-SR)
L Shoulder (UL-SL)
R with Full Humerus (UL-HRF)
L with Full Humerus (UL-HLF)
R at Mid Humerus (UL-MR)
L at Mid Humerus (UL-ML)
R Elbow (UL-ER)
L Elbow (UL-EL)
R Forearm (UL-FR)
L Forearm (UL-FL)
R Hand (UL-HR)
L Hand (UL-HL)
R Humerus (UL-BHR)
L Humerus (UL-BHL)
R Radius (UL-BRR)
L Radius (UL-BRL)
L Ulna (UL-BUR)
L Ulna (UL-BUL)
Upper Limb Tissue (UL-T) (specify)
Disposable Material (UL-DMAT) (Specify)
Anatomical Donation/Materials Programs

Lower Limb
R Lower with Hemi Pelvis (LL-HPR)
L Lower with Hemi Pelvis (LL-HPL)
R Lower with Full Femur (LL-WR)
L Lower with Full Femur (LL-WL)
R Lower at Mid Femur (LL-MR)
L Lower at Mid Femur (LL-ML)
R Lower at Tibia (LL-TFR)
L Lower at Tibia (LL-TFL)
R Knee (LL-KR)
L Knee (LL-KL)
R Foot (LL-FR)
L Foot (LL-FL)
R Femur (LL-BFMR)
L Femur (LL-BFML)
R Tibia (LL-BTR)
L Tibia (LL-BTL)
R Fibula (LL-BFR)
L Fibula (LL-BFL)
Tissue (LL-T) (specify)
Disposable Material (LL-DMAT) (Specify)

Other
Other Partial Remains (O-PR) (Specify)

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