Your donation is a noteworthy contribution to medical education, helping to improve healthcare in our region. The ETSU Quillen College of Medicine appreciates your generosity. If you have additional questions, please contact the Anatomical Gift Program.

Hours:

Monday - Friday, 8 a.m. - 4:30 p.m.

Call Toll Free:

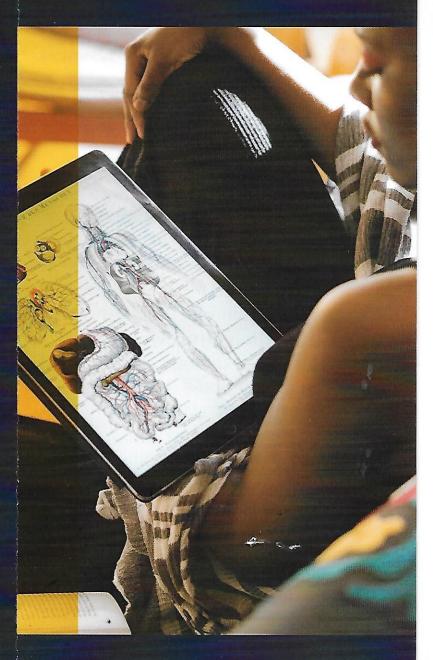
1-866-968-3668 (1-866-YOU DON8)

Write:

East Tennessee State University
Quillen College of Medicine
Anatomical Gift Program
Box 70582
Johnson City, TN 37614-1708

East Tennessee State University does not discriminate against students, employees, or applicants for admission or employment on the basis of race, color, religion, creed, national origin, sex, sexual orientation, gender identity/expression, disability, age, status as a protected veteran, genetic information, or any other legally protected class with respect to all employment, programs and activities sponsored by ETSU. The following person has been designated to handle inquiries regarding non-discrimination policies: Compliance Coordinator, PO Box 70271, Johnson City, TN 37614, 423-439-8544. ETSU's policy on non-discrimination can be found at: etsu.edu/universitycounsel/compliance. ETSU is an AA/EEO employer. ETSU-210302-A 500





Anatomical Gift Program

About Donating Your Body to Medical Education and Research

Anatomical donations are an indispensable aid in medical teaching. Human anatomy is the basis of all medical knowledge and can be learned only by studying the human body. Without this study, there would be no physicians or surgeons.

Donations help teach medical and physical therapy students and residents, assist in the continuing education program for surgeons, and aid in studying new operative techniques.

The process is simple. Complete and return a donation form, which requires only the donor's social security number and date of birth and two witnesses' signatures.

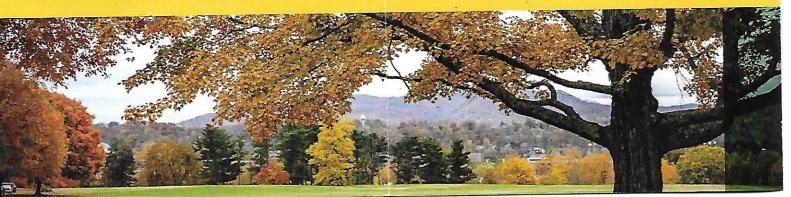
The need for anatomical donations is great and will increase with the demand for more physicians, dentists, nurses and healthcare providers.

We are unable to accept anatomical donations:

- if we do not receive the body within five hours of death.
- when tissues have been damaged (for example, a serious automobile accident).
- after an autopsy or incorrect embalming.
- following organ donation.
- if weight exceeds 230 pounds.
- if the donor has or dies of a contagious disease (e.g., HIV/AIDS; MRSA; VRE; staph; hepatitis A, B, or C; C. diff; syphilis; stage 3 or above decubitus ulcer).

Determining acceptability can only occur at the time of death.

Pre-arrangement does not guarantee acceptance. To avoid undue grief and disappointment, family should be made aware of these conditions and have an alternate plan.



Answers to Your Questions

Is anatomical donation normal and acceptable?

Yes. Healthcare providers, civic leaders and others recommend it.

Are there religious objections?

Religious leaders approve and encourage the practice. All donations are treated with dignity and respect and are always handled with the highest degree of professionalism.

Can a donation take place against the wishes of the spouse or next-of-kin?

Under the Uniform Anatomical Gift Act, your wishes take legal precedence. However, Quillen College of Medicine will not accept a body when there is an objection or dissension among family members who are legally responsible for final disposition. We advise notifying everyone concerned of your intention to donate your body.

What is the purpose of pre-arranged donation?

Pre-arrangement relieves the next-of-kin from making this decision while grieving. Your pre-arranged donation protects the Quillen College of Medicine and your survivors, and simplifies the procedure at the time of death. Quillen will not accept anatomical donations without prior arrangements.

Must a person be of legal age to sign a donation form?

Yes.

May I alter or revoke my donation if I change my mind?

Yes, at any time by writing to the Anatomical Gift Program.

Will I or my family be paid for my body? No. The law prohibits medical schools from purchasing bodies.

Are bodies acceptable if the eyes are donated elsewhere?

Usually not. The procedure makes it unlikely that we could obtain the body within the time required.

How long does the scientific study require?

Typically, 1 to 3 years pass between the body's arrival and the study's completion.

Must I be a Tennessee resident? Persons residing outside the state, but within 30 miles of Johnson City, may donate. Those outside of the 30-mile radius should contact medical schools within their state concerning donation.

What if my death occurs away from home?

We provide an identification card and necklace with instructions that should remain in your possession. However, should a donor die while traveling outside a 30-mile radius of the University, the family should contact the nearest medical school, as transportation costs and time limitations preclude a timely delivery to Quillen.

Your Questions Continued...

What if I move to another state?

If the distance precludes a timely delivery, a substitute arrangement with a medical school near your home may be required. Please call our office to discuss this situation, if necessary.

I live alone; who is to notify you when I pass away?

Those who live alone should have a family member, friend or neighbor check on them at least once daily. Because of time constraints, we may be unable to accept the body if we cannot determine time of death.

Should I notify the program if I change my address?

Yes. We occasionally mail updated information about the program. Providing your new address will ensure you receive new information concerning the program. If you move outside of the immediate area or state, please arrange to donate your body to the nearest medical school, and let us know to remove your name from our donor list.

May a traditional funeral service be held prior to transferring the body to Quillen? No, due to time constraints on

embalming. We recommend a memorial service without the body present.

May I select which funeral home handles delivery and embalming?

No. Quillen has a state contract with a funeral home for transportation and the

required embalming procedures, which differ from normal embalming requirements. If a donor's family utilizes another funeral home, the family is responsible for charges incurred, and Quillen cannot accept the body.

How will the death certificate be handled? Certified copies of the death certificate may be obtained from the health department in the county where the death occurred. Our contracted funeral home will provide the next-of-kin an application.

What happens when the scientific study concludes?

The program pays to cremate each donor individually. Burial of the ashes would be the surviving relatives'/executor's expense. Without such a request, ashes are interred at no cost to the family in a cemetery plot owned by the Quillen College of Medicine.

Will my family receive a report with the studies' results?

No. Studies do not include a pathological investigation that could result in a report.

If you have additional questions, Call TOLL FREE:

1-866-968-3668 (1-866-YOU DON8) or WRITE:



ETSU is an AA/EEO employer. ETSU-QCOM-0017-20 500

Being of sound mind and legal age, it is my desire to bequeath my remains, if acceptable at the time of my death, to ETSU Quillen College of Medicine for the advancement of medical education. If this donor form or a copy thereof is found on my person or among my effects at the time of my death, I authorize and request any person attending or present at such time to notify the ETSU Quillen College of Medicine for transport of my unembalmed body to the College of Medicine. No autopsy should be performed. I direct my next-of-kin, executor, or agency entitled to my body after death to cooperate with ETSU Quillen College of Medicine to carry out my wishes in this donation as indicated on this form. Having read this donor form in full and understanding its content, I hereby sign it in the presence of two (2) undersigned witnesses.

Return to: Quillen College of Medicine, Department of Biomedical Sciences, PO Box 70582, Johnson City, TN 37614-1708
Send white copy to Department of Biomedical Sciences • Keep yellow copy for your records

			M F			
PRINT LAST NAME	FIRST NAME	MIDDLE NAME	SEX	LAST FOUR # 0F SSN	DATE OF BIRTH	
STREET ADDRESS		CITY		STATE	ZIP CODE	
YOUR SIGNATURE WITNESS #1:		***************************************		TODAY'S DATE		
	PRINTED NAME OF WITNESS 1		-	LEGAL SIGNATURE OF WITN	IESS 1	
WITNESS #2:	RELATIONSHIP			PHONE NUMBER OF WITN	ESS 1	
PRINTED NAME OF WITNESS 2				LEGAL SIGNATURE OF WITNESS 2		
NEXT OF KIN:	OF KIN: RELATIONSHIP PHONE NUMBER OF WITNESS			ESS 2		
	NAME			RELATIONSHIP		
I wish my cremated remains	HONE NUMBER to be: returned not returned to returned returning your remains:		Al	DDRESS	· · · · · · · · · · · · · · · · · · ·	
NAME	STREET ADD	RESS	CITY .	STATE ZIP CODE	PHONE NUMBER	



Anatomical Gift Program Data Sheet

Date:					
Information requested from Anatomical Gif PLEASE COMPLETE BLANKS, EVEN	t donors (accuracy with spell IF PERSON IS DECEASE	ing and dates is very important \mathbf{D} .).		
Donor's Full Name First	Middle	Last	Accessed to the second		
Donor's Current Address					
Donor's County					
		Donor's birth date			
ce Donor's Place of Birth (city, state or foreign country)					
Donor's Marital Status (circle one): Marr	ied Never Married	Vidowed Divorced			
Name of Donor's Spouse: First	Middle	Maiden Surna	200		
Occupation of Donor:					
Kind of Business or Industry in which the I Was the Donor ever in the U.S. Armed Ford					
	representation to Associate State (See See				
Branch of Service					
Donor's Education - Elementary/Secondary		-4 or 5+)			
Maiden name of the Donor's Mother First	st of Middle	Maiden Surna	ame		
Full name of the Donor's Father First		: « *			
First	Middle	Last			
Name of the Donor's Physician		1 2			
Have any organs been removed during prio	r surgeries? (circle one)	Yes No			
If so, what organs were removed?	-				
Any major health issues?	1 3				
Significant medical history (attach addition	al pages, if necessary)				
Current weight:					
Any contagious diseases (MRSA, HIV/AID decubitus ulcer)? Yes No	OS, cdiff, hepatitis (A,B,C), sy	philis, VRE, staph, any stage	3 or above		
If yes, which one?					
Name, address and telephone number of Do	onor's next-of-kin or executor	of his/her estate	e medicace April and Stand		
Relationship of the next-of-kin/executor to	the Donor				
Please return completed form to the add	ress listed above. Thank you	ı.			