

No compatibility required

Email the following details to osteochondral@hema-quebec.gc.ca:

- Name and description of graft (no need to include the Héma-Québec code)
- Confirmation that compatibility is not needed
- Confirmation of laterality (important or not)
- Patient's sex
- Patient's last name or initials for supplier to designate the graft
- Surgeon's name
- Date of surgery

Note: You do not need to fill out the osteochondral graft request form.

Compatibility required

FORM

- Fill out the *Graft Request Form with Required Compatibility*:

ACCESS THE FORM

- Email the form to : osteochondral@hema-quebec.qc.ca.

SHARING IMAGING

There are several ways to provide imaging:

1. Send a .zip file through Héma-Québec's secure SharePoint link ([see Appendix for how-to](#)).
2. Send a .zip file to your Arthrex/Tribe Medical or CONMED representative who will forward it to Héma-Québec through a secure SharePoint link.
3. Send the CD-ROM with the imaging to your Arthrex/Tribe Medical or CONMED representative who will download the imaging and send it as a .zip file via the secure SharePoint link.

Note: Héma-Québec is responsible for submitting requests from hospitals to partner supplier portals and making sure requests have been opened by suppliers.

Graft Request Form with Required Compatibility

REQUEST COMING FROM OUTSIDE OF QUÉBEC
☐ YES
 ☒ NO
 Account number

PATIENT

Last
 First
 Middle
 Initial
 Address

HOSPITAL

Name
 Address
 City
 Telephone
 Fax
 Department
 Physician

REPRESENTATIVE INFORMATION

Address
 City
 Telephone
 Fax

PATIENT INFORMATION

Last
 First
 Middle
 Initial
 Address
 City
 Telephone
 Fax

Gender: Male Female
 Instrumental kit needed: Yes No
 Imaging: X-Ray MRI/CT
 Return time: Yes No
 Kit(s) needed: Yes No

ADDITIONAL INFORMATION

Request originates with a surgeon/patient team:

Comments:

GRAFT INFORMATION

Comminuted: ☐ Left ☐ Right ☐ No preference
 Storage method: ☐ Fresh ☐ Frozen ☐ No preference

FROZEN OSTEOARTICULAR

Knee type:

Osteotomy: ☐ OA ☐ AFO ☐ Total
 Ligament: ☐ L & M ☐ M ☐ W/ Anterior Cruciate (3/2)
 Graft(s): ☐ With CLUP ☐ Without CLUP
 Radius: ☐ Left ☐ Right
 Tibia: ☐ Left ☐ Right
 Meniscus: ☐ Medial ☐ Lateral

FROZEN MENISCUS

Whole Meniscus: ☐ Left ☐ Right
 Partial Meniscus: ☐ Left ☐ Right
 Lateral Meniscus: ☐ Left ☐ Right

FRESH OSTEOCHONDRAL GRAFTS

Harvest method: Left Right
 Patient's articular surface: Left Right
 Family: Left Right
 Femoral Condyles: Left Right
 Tibia: Left Right
 Distal Tibia: Left Right
 Anterior: Left Right
 Total/Patellar Meniscus: Left Right
 Anterior Horn: Left Right
 Posterior Horn: Left Right
 Medial Femoral Condyle: Left Right
 Lateral Femoral Condyle: Left Right

ADDITIONAL DESCRIPTION

Description:

Quantity:



Please send the form and the imaging (zip file) at
grasdonal@hema-quebec.ca

Version 05-05-2008

Following an osteochondral graft request (with or without compatibility)

Héma-Québec submits requests for grafts to partner supplier portals (LifeNet Health, JRF Ortho and MTF Biologics) and follows up with partners regularly about graft availability.

As soon as a potential graft becomes available, the supplier alerts Héma-Québec and sends over documents for approval.

Héma-Québec immediately forwards the information about the graft to the surgery team for their approval.

There are two possible outcomes:

- a) **The graft is not suitable:** the surgeon refuses the graft and does not sign the documents.
- b) **The graft is suitable:** the surgeon replies to the initial request email thread (osteochondral@hema-quebec.qc.ca) with the signed documents attached.

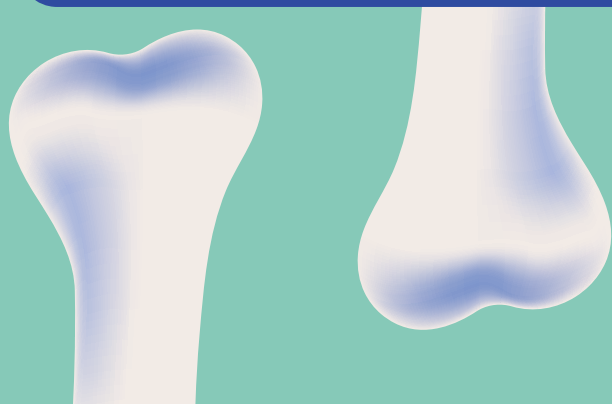
If a) the graft is not suitable:

Héma-Québec informs the supplier of the refusal, and the supplier continues to look for a graft.

If b) the graft is suitable:

- Héma-Québec sends the documents signed by the surgeon to the supplier.
- The supplier reserves the graft for the surgery.
- The hospital submits an order for the graft to the usual email address (tissus@hema-quebec.qc.ca).
 - The request must include the tissue batch number and expiration date, as well as the surgery date.
 - Héma-Québec may confirm details about the tissue as needed.
- Once Héma-Québec receives the hospital's order, it places an order with the supplier and arranges for the graft and instruments to be delivered with Arthrex/Tribe Medical or CONMED representatives, as needed.
- Héma-Québec keeps the hospital in the loop until the graft is delivered.

Questions about the ordering process for osteochondral grafts? Feel free to email us at osteochondral@hema-quebec.qc.ca.



APPENDIX

How to share imaging via the Héma-Québec secure SharePoint link

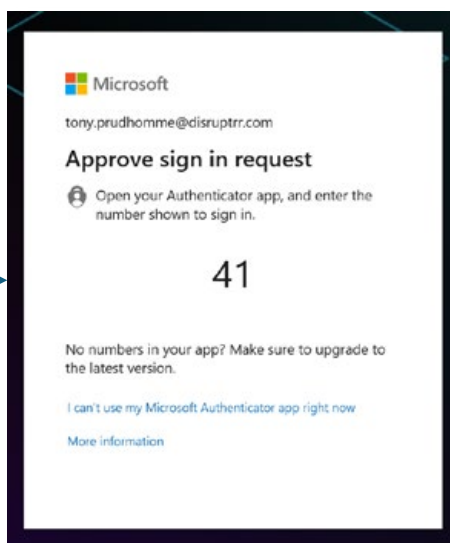
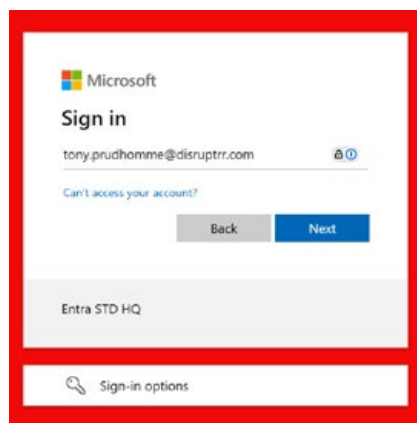


IF YOU ALREADY HAVE MULTI-FACTOR AUTHENTICATION (MFA) SET UP USING MICROSOFT AUTHENTICATOR

Once you get the email requesting authentication:

1. Log in using your Microsoft work email and password.
2. Enter the number that appears on screen in the Authenticator app.

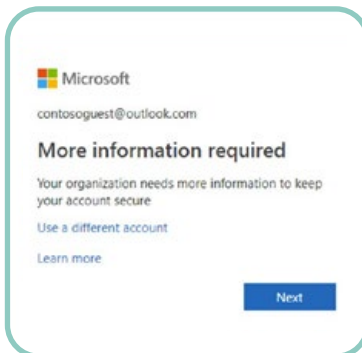
You're all set! Héma-Québec has authenticated you.





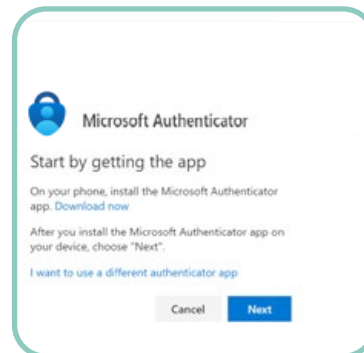
IF YOU DO NOT HAVE A MULTI-FACTOR AUTHENTICATION (MFA) SYSTEM USING MICROSOFT AUTHENTICATOR

Once you get the email requesting authentication, follow these steps:



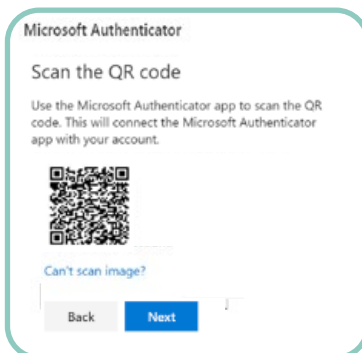
STEP 1

Log in to the Héma-Québec environment. Once you've accepted the invitation, you'll see this screen.



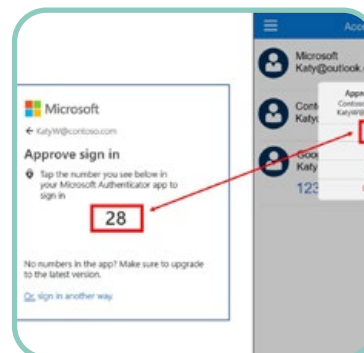
STEP 2

A dialogue box prompting you to set up multi-factor authentication will appear. Select the *Microsoft Authenticator* app and click Next.



STEP 3

Download the *Microsoft Authenticator* app from the app store on your phone and follow the steps that appear on screen.



STEP 4

Confirm your identity. You'll receive a notification on your phone asking for the number that appears on your computer screen. Use this number to verify your identity. You've finished setting up your authentication.

Héma-Québec has authenticated you.

AFTER LOGGING IN WITH AUTHENTICATION:

- Use the link to upload the imaging file.
- You will receive email an email from Héma-Québec confirming receipt of your request.