

# Keeping The Donation Option Open

Patient Sticker

## Clinical Triggers for Organ Donation

(Call within 60 minutes if one or more conditions below are met)

Patient is ventilated and...

- Devastating illness or injury
- Loss of three or more brainstem reflexes  
(i.e. pupils fixed, no cough, no gag, no spontaneous breathing, no doll's eyes reflex, no response to painful stimuli, etc...)
- Anticipated or planned discussion surrounding end-of-life
- Clinically induced hypothermia patients

Donor Referral Line Called:

1-888-543-3287

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Referral # \_\_\_\_\_

Check the appropriate box below after the initial call to the Donor Referral Line

Patient **IS** a suitable candidate for organ donation at this time

**LifeCenter Northwest will be checking in on a daily basis for updates on patient's condition, however, call the referral line immediately if any of the following occur:**

- Possibility of withdrawal to comfort care and/or a family conference is planned
- Brain death testing
- Declining neurological function
- Hemodynamic instability
- New DNR orders written
- Family mentions donation

To preserve the option of organ donation, maintain hemodynamic stability:

- » Maintain SBP >100mmHg
- » Urine output 100ml/hr
- » PaO<sub>2</sub>>100chH<sub>2</sub>O
- » Normothermic

Patient **IS NOT** an organ donation candidate **AT THIS TIME**

**A re-referral call must be made:**

- ➔ If the patient has a decline in neurological function or the family starts to discuss end-of-life. Please re-refer for further evaluation and investigate before you extubate.
- ➔ At cardiac time of death, and no more than 60 minutes after cardiac death. This call will generate a referral that will determine whether the patient is a candidate for tissue or cornea donation.

### Family Communication Plan

Organ donation conversations are initiated by the donation agency once the patient is determined to be medically suitable for donation. If the family asks about donation or you believe the time to speak with the family may be arriving soon, please call the donor referral line immediately to connect with the appropriate donation agency.

### Before The Family Leaves

Please ask for contact information and location in case the donation agency needs to call.

You can say:

*"If we were to need to call you in the next few hours, what is a good number we can call?"*

## Questions asked during initial referral call (1-888-543-3287)

- Area code and phone number of the unit the patient is located in
- They will confirm the name of the referring facility and the unit/floor the patient is on
- Name and title of the caller
- Does the patient have a heartbeat?
- Ventilator status of the patient? (Currently vented, previously vented or never vented)
- Facesheet type of questions
  - » Patient's full name and date of birth, race and gender
  - » Patient's medical record number
  - » Patient's ZIP Code
- Date and time of death  
*(If ruled out due to age, you will be informed at this point and told no one will be calling back)*
- Weight
- Admission date
- If not vented, they will ask about HIV/AIDS, Heb B/C, cancer and sepsis status
- They will say to you, "Please don't bring up the topic of donation to the family. A donation coordinator will call back to discuss donation suitability and next steps." If the family brings up donation, let them know another team who specializes in end-of-life will speak to them soon.

## Follow-up questions that may be asked if coordinator cannot find answers

- Cause of death, date and time of death
- Did the patient have any degenerative neurological diseases (i.e. MS, dementia, Alzheimer's, Parkinson's, ALS?)
- Hospital Course/Treatment
  - » Isolation status. Infection/Sepsis suspected? Temps?
  - » Labs (cultures, WBC)
  - » Blood loss or blood products given
  - » Antibiotics given
  - » Skin condition-breakdowns and ulcers
  - » AMOUNT OF FLUID GIVEN W/IN LAST HOUR OF LIFE  
(Essential for determination)
- Patient's weight and height if not in the computer
- Coroner's case? Funeral home determined
- Family dynamics? Family contact info (where will they be in the next couple of hours)

### Preserve the Option of Cornea Donation

#### The **SEE** Protocol

S-Saline flush of the eyes

E-Eyelids shut/taped

E-Elevate the head



## Reminders...

Preserving the patient's donation opportunity involves no assumptions (intentional or unintentional) on who can be a donor. Donor criteria change frequently. The donation agency will determine suitability.

If the family is asking for immediate withdrawal of life-sustaining therapies and the patient is ventilated, it is important to allow staff to arrive on-site for an evaluation prior to withdrawal of care. You can say to the family: "We will be making preparations to go to comfort care, but this might take a little time. This might be a good time to ensure all loved ones are informed and able to be at the bedside."

If the family brings up donation, let them know another team who specializes in end-of-life will speak to them soon, then contact LifeCenter Northwest immediately.