

The Physician's Role in Organ Donation

Physicians play a vital role in collaborating with LifeCenter Northwest—the federally designated organ procurement organization for Alaska, Montana, North Idaho and Washington—to honor the wishes of registered donors, ensure all families are provided the option of donation, help save lives of those in need and assist the hospital in remaining compliant with quality and regulatory requirements. Below are four ways physicians can help promote positive donation outcomes:

Support Timely Referrals

- All ventilated patients must be referred to LifeCenter within 60 minutes of meeting clinical triggers: A loss of three or more brainstem reflexes OR anticipated/planned discussion surrounding end-of-life.
- RNs are primarily responsible for making the referral call.
- Share information about anticipated or planned end-of-life discussions with the RN immediately so the referral can be made in a timely manner.
- Referral should be made based on clinical triggers, not assumed donation potential.

Investigate Before You Extubate

- Help honor registered donors' end-of-life decisions and give families the choice of donation.
- Continue hemodynamic, respiratory and fluid support to maintain organ viability until LifeCenter has ruled out or had time to speak to family.
- Always contact LifeCenter prior to de-escalation of care or terminal extubation so organ donation is still an option.
- Have a "time-out" huddle with the RN/RT prior to terminal extubation to slow things down.

Perform Proactive Brain Death Testing

- Providing a full diagnosis for families can alleviate the stress and trauma of making decisions regarding palliative extubation.
- Ensure that brain death declaration is always performed in compliance with hospital policy before any conversations about withdrawal of life-supporting measures are initiated on all patients who appear brain dead.
- Brain death testing helps honor donation and maximizes the gift.

Collaborate With LifeCenter on Timely Family Conversations

- Close and early collaboration with LifeCenter on timing of family conversations leads to a more positive experience.
- Update LifeCenter if the family is referring to the patient in the past tense, discussing or gathering to say goodbye, discussing funeral plans or if they mention donation.
- A collaborative huddle must always be held with LifeCenter prior to our conversation with the family.
- Do not mention or discuss donation with family.