

DONATION AFTER CARDIAC DEATH

GUIDELINE FOR THE ATTENDING PHYSICIAN IN THE OPERATING ROOM:

1) Administer Heparin, Solu-medrol, Sodium Bicarbonate, and Mannitol immediately before the withdrawal of support.

2) Initiate or maintain appropriate comfort care measures.

- ✓ Comfort care measures are to be consistent with the standard of practice for the hospital, the physician, and the ICU.

3) Withdraw ventilatory and pharmacologic support and extubate the patient.

- ✓ Withhold all medications except those for patient comfort
- ✓ Extubate to room air
- ✓ Continue to administer comfort care medications as indicated

4) Confirm ALL of the following:

- | | | |
|---|------------------------------|-----------------------------|
| a. Correct ECG placement: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| b. Pt is unresponsive to verbal and pain stimuli: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| c. Pt is apneic: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| d. Pt is pulseless via arterial catheter: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| e. Five consecutive minutes of v-fib, asystole, or PEA: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

5) Write a declaration of death in the patient chart.

- ✓ Time of cardiac death for purposes of donation is after five continuous minutes of a non-perfusing arrhythmia

NOTE: If patient does not arrest within 1 hour, she/he will be returned to the ICU with comfort measures in place and continuing.

- ✓ The patient's family is aware of this potential outcome