Life After Death: What Every Palliative Care Provider Should Know About Organ and Tissue Donation (FR412)

Dana Lustbader, MD FCCM FCCP FAAHPM, North Shore-LIJ, Great Neck, NY
Michael Frankenthaler, MD FCCP, North Shore-LIJ, Great Neck, NY

Objectives

- Describe the process for organ donation following cardiac death.
- Identify best practices for brain-death discussions and distinguish brain death from coma and persistent vegetative states.

Hospital-based palliative care teams are becoming increasingly involved with the care of critically ill patients for whom organ donation is being considered. The two types of deceased donors include brain-dead donors and donors with cardiac arrest for whom life-sustaining therapies have been withdrawn.

Families have a difficult time understanding the concept of brain death, and healthcare providers have misconceptions about brain death; therefore, effective communication is essential. Palliative care providers can use best practices in communication and avoid the pitfalls that are common in brain-death notification. Effective communication and education have been shown to help family members process complex medical information and also help with the bereavement period. Recent studies with bereaved family members of patients diagnosed with brain death show that there are still major gaps in palliative care services offered to this group. Media attention on famous cases creates further confusion regarding coma, brain death, and persistent vegetative states.

We will explore the process of organ donation after cardiac death and the special communication issues around this process when life-sustaining treatments are being withdrawn and death is expected in a short time. We will discuss donor suitability and common barriers to donation after cardiac death.

Honoring patient and family preferences regarding organ donation requires knowledge of the options available. This session will provide participants with the skills needed to understand all forms of organ and tissue donation.