

Confirmation of Death Determination by Circulatory Criteria (DCC) for the Purposes of Uncontrolled Organ Donation: Non-Perfused Organ Donation (NPOD)

Place in chart and fax to 416-214-7797

TGLN ID:				
Confirmation of Death Determination by Circulatory Criteria				
Section 1: Observation Period				
Following termination of resuscitation, a 10-minute observation period begins at the onset of apnea, asystole, and pulselessness for Non-Perfused Organ Donation (NPOD) following DCC as noted on page 2.				
Date/time of the start of the observation period	(DD-MM-YY):	(00:00):		
Section 2: Time of Death				
For the purposes of post-mortem transplant, the legal time of death shall be determined at the end of the observation period.				
This patient fulfills the criteria for DCC as noted on page 2			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Date/time of death	(DD-MM-YY):	(00:00):		
First Clinician (print):	Signature:			
Second Clinician (print):	Signature:			
Coroner Involvement				
Office of the Chief Coroner: (416) 314-4100				
* If required, please inform the Dispatcher this is an “Emergent NPOD Lung Donation”				
As per the <i>Coroners Act</i> , does this patient require a coroner investigation?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Coroner (Name):				
Permission obtained for donation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	(DD-MM-YY):	(00:00)
Coroner Restrictions/Instructions:				

Both physicians must be available to attend to the patient until the organ flush has commenced. The Ontario Health (TGLN) Coordinator will inform the physicians once organ flush has begun and relieve them of their duty.

Guidelines for Death Determination by Circulatory Criteria

Death Determination by Circulatory Criteria (DCC) is made based on the absence of extracranial circulation which leads to the permanent absence of intracranial (brain) circulation.

Process and Criteria

Uncontrolled DCC requires ECG monitoring or arterial line monitoring (if available), and a ten-minute observation period by two physicians to confirm that the three **Criteria for DCC** are met (see below).

For ECG monitoring, the observation period begins at the onset of apnea, electrical asystole, and pulselessness.

Criteria 1	ECG: electrical asystole	OR	Arterial line: a continuous arterial pulse pressure of less than or equal to 5 mmHg and within the error of measurement for clinical monitoring equipment
Criteria 2	Absence of respiratory effort		
Criteria 3	Absence of palpable pulse		

Should either physician note a return of ECG activity, arterial pulse pressure, respiratory effort or palpable pulse, the initial observation period ends and a new ten-minute observation period will begin at their cessation.

The patient must not be moved until the end of the ten-minute period. Once the observation period has been completed by one physician and confirmed by a second, no further clinical assessment is required.

Qualifications for Determining Death

For the purposes of a post-mortem transplant, death shall be determined by at least two physicians in accordance with accepted medical practice.

First Clinician: Must have full and current licensure for independent medical practice by the college of physicians and surgeons or licensing authority in the relevant Canadian jurisdiction, and the requisite skill and knowledge in death determination by circulatory criteria, including the ability to interpret the monitoring device(s) being used; a particular level of specialty certification is not required.

Second Clinician: May be a physician holding an Ontario general or educational license to practice medicine (e.g., residents, fellows), provided that they have the requisite skill and knowledge in death determination by circulatory criteria, including the ability to interpret monitoring devices being used.

No physician who has had any association with the proposed recipient that might influence the physician's judgment shall take any part in the determination of death of the donor.