

TGLN Approach Plan Checklist

- Introductions with attending MD**
 - Upon arrival to unit, introduce self to MRP/Bedside RN/Charge Nurse
 - If no MRP onsite, page
 - Ask HCP team for best place to set up your workspace
- Confirm current clinical situation with attending MD**
 - Assessment/active treatment
 - Neurological status, e.g. suspected NDD or progression to NDD
 - Hemodynamic status, e.g. concerns of stability or need for medical management
 - Metabolic status –electrolytes, ABGs being managed
 - Confirm team willingness to support the patient until approach for donation
- Confirm direction or plan of care with attending MD**
 - Limiting therapy, or a change in direction of treatment been considered
 - Content of communication to family about plan of care and prognosis
 - WLSM, e.g. discussion planned or has occurred
- Confirm the family's understanding of the patient's condition with MD/team**
 - Discuss team's assessment of family's understanding of clinical condition
 - Discuss team's assessment of family's understanding of plan of care and next steps (e.g. NDD or WLS plans)
- Family/Decision maker Assessment**
 - Assess with team if family has expressed concerns about care or stay
 - Confirm the decision maker for Health Care Consent Act (e.g. POA for DCD?)
 - Confirm the decision maker for donation under the TGLN ACT
 - Assess with team the dynamics between POA and the decision maker for donation
 - Confirm all key decision makers are available for the discussion
 - Assess any potential cultural/religious or language considerations for the family's end of life experiences
- Confirm approach plan with attending MD**
 - Determine best timing of approach

- Share Registered Consent Decision with team
- Backup plan if family brings up WLS/Donation
- Communicate plan with all team members and offer collaborative approach
- Write into Clinical Notes in iTransplant