DETERMINATION OF BRAIN DEATH

PREREQUISITES
(1) Core temperature > 36.2°C
(2) SBP > 90 mmHg
(3) No CNS depressants
(4) No paralytics 4/4 TOF
*** CONTACT TDS (322-2247)

PHYSICAL EXAM
(1) Non-responsive to painful stimuli
(2) Lack of midbrain function (no pupillary light reflex)
(3) Lack of pontine function (no corneal reflex)
(4) Lack of medullary/brainstem function (no cough or gag reflex)

PRE-APNEA VENTILATOR MANAGEMENT
(1) Set Respiratory Rate of ≥ 16
(2) FiO2 100%
(3) Pre-apnea abg with PaCO2 of 40-45 mmHg
(4) Pre-apnea abg with PaO2 of 200 mmHg, if possible

APNEA TEST *
(1) Disconnect from ventilator, deliver 100% FiO2 via ETT/trach, mask/oxygen tube
(2) May leave on ventilator with PEEP only (PS mode) if pulmonary status is labile
* - Attending or Fellow MUST be present

Hemodynamic instability or oxygen desaturation

Trans-cranial doppler
(call Dr. Adrian Valdivia)

CONSIDER DONATION AFTER CARDIAC DEATH (DCD)

PaCO2 rises > 60 mmHg
(or 20 mmHg above base-line)
AND
no spontaneous effort observed

Flow (+)

BRAIN DEATH
PHONE CALLS:
1. Patient attending or attending on call
2. Tennessee Donor Services (TDS) 322-2247
   - TDS is to be called on all deaths and all pending deaths
3. Coroner’s Office 518-8813 (pager)
   - Call the Coroner’s office on all deaths on the trauma service
4. Bereavement Counselor 835-1497 (pager)

REFERENCES

