STANDARDIZED ORGAN DONATION PROCEDURE
IN REFERENCE TO ARTICLE 204.1 (LSSSS)

Patient with a prognosis of impending death

1 IDENTIFICATION

ACTIVE MEDICAL TREATMENT

The patient satisfies the criteria for being a potential organ donor:

- A person of any age
- Has experienced a severe neurological insult (post-resuscitation, cerebral anoxia, CVA, cerebral haemorrhage, encephalopathy, traumatic brain injury, Glasgow score < 5 ...)
- Requires mechanical ventilation

Depending on the situation, a decision is made to continue or stop active medical treatment

Diagnosis of neurological determination of death (NDD)
Potential donor (NDD)
Severe and irreversible prognosis
Consider withdrawing life-sustaining therapy (WLST)
Potential donor for donation after cardiocirculatory death (DCD)
The patient’s condition improves
Continuation of active medical treatment

2 REFERRAL

PRIOR TO OFFERING THE OPTION OF ORGAN DONATION TO THE FAMILY

The liaison/resource nurse assigned to organ donation contact Transplant Québec to verify the patient’s inscription in the registries of the RAMQ and the Chambre des notaires du Québec

Do not offer the option of donation to the family before step 4

3 COMMUNICATION OF DIAGNOSIS / PROGNOSIS

Announce and explain the poor and irreversible prognosis
Discuss withdrawing life-sustaining therapies (WLST)
Provide the time necessary to absorb the information
Ensure that the family understands the prognosis
Be prepared to repeat the information as often as needed

4 OFFER / TEAM APPROACH

PRESENT THE OPTION OF ORGAN AND TISSUE DONATION

Ask the family to respond based on the known expressed wishes of the patient as indicated by:

- the inscription(s) in the RAMQ and the Chambre des notaires du Québec registries OR
- the signature on the back of the health insurance card OR
- a prior verbal consent

or if the wishes are NOT KNOWN, have the family decide by considering the person’s values and beliefs

Offer to involve the Transplant Québec coordinator to answer any questions the family might have
Allow sufficient time for a period of reflection
Be attentive to the family’s needs, answer questions and address concerns
Ascertain the family’s decision
Communicate the family’s decision to Transplant Québec
Consent
Refusal
Continue to provide family support
End-of-life care

5 EVALUATION, ELIGIBILITY AND PROCUREMENT

CONTINUE DONOR MANAGEMENT

Provide all available information concerning the donor to the Transplant Québec coordinator

Begin the donor evaluation and eligibility phase in collaboration with the medical team and the Transplant Québec coordinator

NDD
Diagnosis of neurological determination of death completed by 2 physicians
Transfer to the operating room* 
Organ procurement

DCD
Transfer to the operating room
WLST and end-of-life care
Diagnosis of death by cardiocirculatory criteria completed by 2 physicians
Organ procurement

* For hospitals that do not carry out procurements: Depending on the situation, the donor will be transferred to a procurement center as soon as possible.

Reference tools:
www.transplantquebec.ca and the following documents (available upon request at info@transplantquebec.ca): Trousse Pensez don (can be found in the intensive care units and the emergency departments) and pocket size donor guideline card