Lifecenter Northwest Donor Management (Brain Death) Protocol  [30400730]

### Height
_____________________

### Weight
_____________________

### Allergies
_____________________

## General

### Nursing Interventions

| [X] | Nursing communication | Routine, Once, Starting today For 1 Occurrences, Contact admitting to obtain a new billing number for all donor-related charges. |
| [ ] | Nursing communication | Routine, Once, Starting today For 1 Occurrences, Discontinue all previous orders except for the following. Keep same ventilator settings. Keep currently required IV vasoactive drips. |
| [ ] | Nursing communication | Routine, Once, Starting today For 1 Occurrences, Cutdown tray at bedside. Including: Gloves (size: REQUIRED), 3.0 silk suture, scalpel, 4x4 boat, betadine, and a razor. |
| [ ] | NG tube to low continuous suction | Routine, Until discontinued, Starting today Suction type: |
| [ ] | Retention catheter to gravity | Routine, Until discontinued, Starting today |
| [ ] | Turn patient every 2 hours | Routine, Now then every 2 hours, Starting today |
| [ ] | Oral care | Routine, Every 2 hours, Starting today |
| [ ] | Nursing communication | Routine, Until discontinued, Starting today Systolic BP less than: 100 Pulse greater than: 130 Pulse less than: 70 Urine output greater than (mL/hr): 300 Urine output less than (mL/hr): 30 O2 saturation less than (%): 90 PaCO2 greater than (mmHg): 45 CVP greater than (mmHg): 10 CVP less than (mmHg): 6 Potassium (K+) greater than (mmol/L): 5.5 Potassium (K+) less than (mmol/L): 3.5 Temperature greater than (celsius): 37.8 Temperature less than (celsius): 36.1 Notify Life Center Northwest Coordinator. |

## Labs

**SAH, SCH, SFH, SJMC & Harrison Chemistry**

| [ ] | TPN panel 10 | Once, Starting today |
| [ ] | Hepatic function panel | Once, Starting today |
| [ ] | Lactate dehydrogenase (LDH) | Once, Starting today |
| [ ] | Gamma GT | Once, Starting today |
| [ ] | CK total and CKMB | Once, Starting today |
| [ ] | Troponin I | Once, Starting today Order details |
| [ ] | Amylase | Once, Starting today |
| [ ] | Lipase | Once, Starting today |
| [ ] | Basic metabolic plus panel | Once, Starting today |

**Highline Chemistry**

| [ ] | TPN panel 10 | Once, Starting today |
| [ ] | Hepatic function panel | Once, Starting today |
| [ ] | Lactate dehydrogenase (LDH) | Once, Starting today |
| [ ] | Gamma GT | Once, Starting today |

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Provider Initial: ____________________
**PHYSICIAN ORDERS**

**PATIENT INFORMATION**

**Imaging**

**Imaging - Chest**

**Hematology**

**Type and screen**

**Transfuse Packed Red Blood Cells**

**CK total and CKMB**

**Troponin T**

**Amylase**

**Lipase**

**Basic metabolic plus panel**

**Transfuse RBC**

A single unit of pRBCs contains 200 ml of red blood cells and is expected to increase the hemoglobin by 1 g/dL and the hematocrit by 3% in a healthy, non-bleeding 70 kg person. All pRBCs are leukoreduced. Irradiation is generally not indicated in HIV/AIDS patients, patients who have undergone solid organ transplantation or patients with solid tumors unless these patients are receiving intensive immunosuppressive therapy. Frozen components, including frozen washed RBCs, FFP, and cryoprecipitate, have not been associated with TA-GVHD and do not require irradiation.

**Vital signs**

Routine, Per unit routine, Starting today, Check vitals pre-transfusion, during transfusion (15 minutes, 30 minutes, 1 hour, 2 hours, and 3 hours), and post-transfusion.

**Hold Transfusion and Notify Provider if:**

Routine, Continuous, Starting today, The patient experiences pruritus (itching) or hives, fever [>1C (1.8F) rise within 2 hours of infusion], chills, dyspnea, wheezing, cyanosis, anxiety or restlessness, new chest, back, or flank pain, pain at or above the infusion site, decreased urine output, tachycardia or tachypnea, hypotension, generalized bleeding, or hematuria.

**Verify informed consent for blood product transfusion**

Routine, Once, Starting today For 1 Occurrences Indicate one of the following to confirm the patient/representative has given informed consent for blood products.

**Transfusion Reaction Management**

Routine, Per unit routine, Starting today, 1) Stop transfusion immediately. Keep IV open with slow infusion of normal saline. 2) Notify provider and Transfusion Services about reaction. If hives and/or itching is the ONLY manifestation of reaction, the provider may order administration of an antihistamine and continuation of the blood product. 3) The provider may choose to order a Transfusion Reaction Workup, Basic. If the Transfusion Reaction Workup, Basic is ordered, complete the Suspected Transfusion Reaction flowsheet. 5) Draw EDTA (pink top) tube and send to blood bank. 6) Secure blood unit with tubing and close tubing securely to prevent contamination. Place in plastic bag and send to blood bank. 7) If requested by blood bank, collect a clean catch urine and send to the blood bank.

**CBC and differential**

Once, Starting today For 1 Occurrences

**Blood gas, arterial**

Once, Starting today For 1 Occurrences

**Protime-INR**

Once, Starting today For 1 Occurrences

**Activated partial thromboplastin time**

Once, Starting today For 1 Occurrences

**Urinalysis**

Once, Starting today

**Urine culture**

Once, Starting today

**Imaging**

**Imaging - Chest**

Provider Initial:
X-ray chest AP portable
Routine, 1 time imaging, Starting today For 1 Occurrences
Take 40 inches from sternum (after central line placement if not previously placed).
Reason for Exam:
Is the patient pregnant?
Reason for Exam (USE SIGNS AND SYMPTOMS):
Transport Mode:
Transport Mode: Bed

X-ray chest PA and lateral
Routine, 1 time imaging, Starting today For 1 Occurrences
Reason for Exam:
Is the patient pregnant?
Reason for Exam (USE SIGNS AND SYMPTOMS):
Transport Mode:
Transport Mode: Bed

X-ray chest PA or AP
Routine, 1 time imaging, Starting today For 1 Occurrences
Reason for Exam:
Is the patient pregnant?
Reason for Exam (USE SIGNS AND SYMPTOMS):
Transport Mode:
Transport Mode: Bed

Procedures

Access port
Routine, Once, Starting today For 1 Occurrences, If not done.

Insert arterial line
Routine, Once, Starting today For 1 Occurrences, If not done.

IV Fluids

Dextrose 5% and sodium chloride 0.225% infusion
IntraVenous, Continuous, Routine

Dextrose 5% and sodium chloride 0.2% with KCl 10 mEq/L infusion
IntraVenous, Continuous, Routine

Dextrose 5% and sodium chloride 0.2% with KCl 20 mEq/L infusion
IntraVenous, Continuous, Routine

Medications

Antibiotics
Cefazolin (ANCEF) IV
1 g, IntraVenous, Every 6 hours, Routine

T4 Protocol
Lifecenter Northwest T4 Protocol
Routine, Once, Starting today For 1 Occurrences, See organ procurement coordinator for instructions and meds.

Respiratory
Albuterol (PROVENTIL HFA; VENTOLIN HFA) inhaler
2 puff, Inhalation, Every 4 hours, Routine

Opthalmic
Lacrilube or Artificial Tears
2 drop, Both Eyes, As needed, dryness, Routine

Date: _____ Time: ______
Printed Name of Ordering Provider: ____________________________________________

Provider Signature: ____________________________

Date: _____ Time: ______
RN Acknowledged: ____________________________