

Critical Care CNHBD checklist

Process	Description	Signature	Date	Time	Position
1 Decision to withdraw life-sustaining treatment	Consultant in Intensive Care Medicine has made decision & documented it				
	Unit policy has been followed				
	Withdrawal checklist completed				
	Family/NOK understand and accept decision				
2 Identification of potential CNHB donor	No absolute contraindications exist <16 or >65 yrs HIV or CJD Non CNS malignancy Untreated sepsis CRF on dialysis Recipient of previous transplant Known objection by patient				
3 Consent/assent	Discussion of CNHBD is separate to discussions of withdrawal				
	ODR checked				
	Discussion of CNHBD by senior clinician, TCO or both				
	TCO provides full information on CNHBD & documents				TCO
	Family given time to reach decision				
	Regardless of decision family supported and thanked for their choice/consideration				
	If proceeding family aware of potential for abandoning process at any time				
	If CNHBD is not proceeding, withdrawal follows unit policy				
	Coroner informed if necessary and permission/refusal documented				
4 Withdrawal of life-sustaining treatment	Retrieval team within hospital and aware of case				TCO
	Family given time to be with patient before and after withdrawal				
	Bloods taken once family have given assent				
	CNHBD data set is completed by TCO and critical care nurse continues to provide appropriate care and observations				TCO
	ECG monitoring is continued				
	Operating theatre is identified by the TCO				TCO
5 Diagnosis of death and transfer to the operating theatre	5 minutes after asystole or lack of arterial waveform a critical care doctor will pronounce death				
	Nurse escorts family to suitable area as 5 minutes ends				
	Patient transferred by nurse/TCO/Doctor to the pre-booked theatre				