A Legacy of Love

The gift of organ donation is like no other. It can be the silver lining to the darkest cloud and the glimmer of hope for those so desperately in need.

When facing the challenges of end-of-life care decisions for a loved one, the consideration of organ donation can be a comforting option that will honor their legacy of life.

LifeQuest
Organ Recovery Services
What is LifeQuest?

LifeQuest is the organization designated by the federal government as responsible for organ donation throughout northern Florida. We are called an organ procurement organization (OPO) and our responsibility is to facilitate the donation process and support donor families. LifeQuest is one of four OPOs in Florida and one of 58 across the United States.
Organ Donation

Supporting organ donation is nothing less than heroic. In the midst of tragedy and grief, families can give other patients hope for a renewed life through organ transplantation. Donation also allows something positive to come from a tragic and painful situation.

Organ donation allows a person’s vital organs, like the heart, kidneys, liver, lungs and pancreas, to be surgically recovered and made available to patients on the national transplant waiting list. Surgical teams will perform a recovery operation, and within hours those organs will be transplanted into other patients who are suffering from life-threatening conditions. The surgical teams take great care to ensure that the donor’s body is treated with the utmost respect and dignity throughout the recovery process.

On occasion, we determine that organs cannot be recovered for life-saving transplant. They could show signs of disease, or we may have been unable to identify recipients who were suitable matches for these precious gifts. If organ donation does not take place, we still consider a patient’s family among our donor families and continue to provide outreach to family members.
Donation for Research

If an organ cannot be recovered for life-saving transplant, it is possible that donation for research can take place. Academic centers and research facilities can utilize organs to assist in the development of cures for diseases such as diabetes, Parkinson’s, Alzheimer’s and Lou Gehrig’s disease, or study what might be the causes of other diseases and conditions.

Evaluation

Before donation takes place, the LifeQuest team will order various clinical tests such as X-rays and blood screenings, to determine which organs can be recovered for transplantation. While testing is being done, the donor will remain on the ventilator so that the organs remain viable for transplantation. This process may take a few hours, and family members are able to be at their loved one’s bedside periodically throughout this time.

While these tests are being performed, the process of matching the donor’s organs to the recipients will begin. This also takes a few hours, as several transplant centers may need to be contacted.

If a donor experienced brain death, the family will have the opportunity to say their goodbyes in the intensive care unit before the donor is taken to the operating room.

The transplant physicians and organ recovery teams will come to the hospital where the donor is, and the recovery of gifts will take place in the operating room. Donors are treated with respect and dignity during the entire donation process. We also can read a tribute statement about the donor prior to the recovery operation.
Brain Death

There are two ways of determining death: when the heart stops functioning or when the brain stops functioning. Most people understand that when the heart stops, death follows, because most people die this way. Not everyone understands what happens when the brain stops working first.

When someone has suffered a severe head trauma, the damage to the brain can be so significant that the person cannot recover. This injury can cause blood to stop flowing to the brain. When that oxygen-rich blood stops flowing to the brain, the cells of the brain die, including the brain stem, which is the portion that tells the body to breathe, cough, respond to pain, etc. When the brain and brain stem cease to function, the result is called brain death.

Most organ donors are on ventilated support at the time of their death, meaning that a machine is breathing for them and allowing their heart to beat. It may appear that a patient is sleeping, but once someone has reached brain death, they have passed. There is no way to restore brain function. The patient no longer can move, breathe, think or feel, and pain and suffering also have stopped. The machines no longer are providing “life support” and soon will be turned off.

Brain death is not the same as being in a coma or in a persistent vegetative state. Sometimes people confuse the term brain death with coma. Unlike brain death, when a patient is in a coma, some parts of the brain still are working, and the patient is alive. A patient in a coma might survive on a ventilator for some time.
Donation After Circulatory Death

When a patient has suffered a severe injury or critical illness from which there is no chance of survival, the hospital team will discuss end-of-life decisions with the family. Among these decisions will be if an advance directive is in place, which states ventilator support should be withdrawn. If there is an advance directive, the family will discuss when to discontinue ventilator-support systems. This may be a very difficult conversation.

Only after a family has made the decision to withdraw ventilator support will they be offered the option of organ donation after circulatory death (DCD). Donation should not be considered as a factor in discontinuing support.

Donation after circulatory death may be an option for patients who have a neurologic injury and/or irreversible brain damage but do not meet the complete criteria for brain death. It allows them to fulfill their wishes to be organ donors. Unlike patients who have been diagnosed with brain death, these patients will succumb to circulatory death, which means the heart will stop working first.

A family, the LifeQuest coordinator and hospital staff will decide where the ventilator will be removed. This process typically occurs in an operating room, but in some situations, it may take place in the ICU or in an area close to the operating room. Prior to the withdrawal of support, end-of-life comfort measures are given to the donor, and they are the same measures that would be given even if he or she were not going to be a donor.

Families are given time to say goodbye and can be present when the ventilator is removed. After the removal of the ventilator, the heart will stop beating, and a physician will declare death.

The recovery team will wait an additional five minutes before starting the recovery process. It is difficult to say exactly when the heart will stop following discontinuation of ventilator support. It could happen in a couple of minutes, or it may extend beyond an hour. If circulatory death has not occurred within one to two hours, donation no longer will be possible due to a decline in organ function.
After the Donation

The organ recovery is the first operation to take place, as the organs will need to be transported to the recipients in a matter of hours. If tissue or cornea donation is to take place, those recovery teams will come to the operating room afterward.

When the recovery process has been completed, the donor will be taken to the hospital morgue and then to the funeral home or the ME’s office. The LifeQuest coordinator will call the family to let them know when the operation has been completed. The entire organ recovery process takes several hours, and LifeQuest ensures that funeral arrangements are not delayed and that open-casket viewings can occur.

The LifeQuest coordinator can provide limited information on the organ recipients who soon will be getting their life-saving transplants, such as their age, gender and region of the country in which they are being transplanted.

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