Family Objections to Death by Neurologic Criteria (DNC): **Lawyer Perspective**



Thaddeus Mason Pope, JD, PhD, HEC-C **ASBH Annual Meeting** Baltimore, Maryland October 14, 2023

2

nothing to disclose

3

2020 2022 2023 2021

Uniform Law Commission
Better Laws. Stronger States.



5 6

certainty clarity







10





11 12

variability uncertainty

13





objections to BD

16

how to respond

generally accepted rules

17 18

objection 1

19

21

family
rejects
DDNC

20

not concept not criteria as applied to this patient

22

Arizona College Student Bounces Back From the Dead After Nearly Giving Organs







Close call in death ruling of potential organ donor

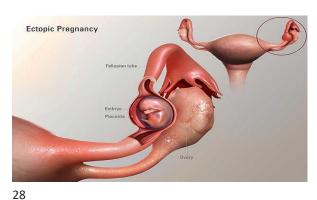
John Foster at Fresno Community

23 24







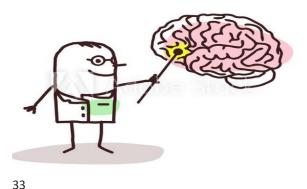






wrong before wrong now











objection 2

37

family wants
indefinite OST
after DDNC

38

want religious exemption

"if heart beats, they are alive"

39

40



"death ... shall not be declared ... violate ... religious beliefs ..."

41 42

may **not** withdraw OST because BD

BD ≠ death

43

45

2020s



46







but

RUDDA









no duty to continue
OST indefinitely
except in NJ



55

family wants
limited OST
after DDNC

accommodation

57 58





59 60

"continue only previously ordered cardiopulmonary support"

"No other medical intervention is required"

61

62

how long

"reasonably brief period"

63 64

"amount of time ... to gather family ... at the patient's bedside"

delegation deference

65 66

"hospital shall adopt a policy for providing ... with a reasonably brief period" <24h

67



custom & practice everywhere else

70

68

standard of care

SO...

71 72



duty to continue OST reasonably brief time (~24h)

73 74

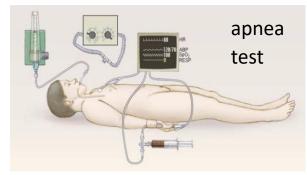
objection ____

family objects to BD testing

75

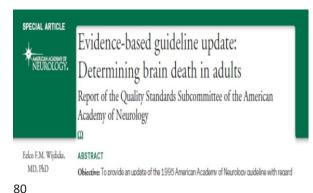
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must clinicians
get consent
for BD tests?



77 78







Cuidance for the Clinician in Rendering Pediatric Care

Clinical Report—Guidelines for the Determination of Brain Death in Infants and Children: An Update of the 1987 Task Force Recommendations

abataaat

Thomas A. Nakagawa, MD, Stephen Ashwal, MD, Mudit

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Published Ahead of Print on October 11, 2023 as 10.1212/WNL.000000000207740

Pediatric and Adult Brain Death/Death by Neurologic Criteria Consensus Guideline

Report of the AAN Guidelines Subcommittee, AAP, CNS, and SCCM

David M. Greer, M.D., M.A.* Matthew P. Kirschen, M.D. Ph.D.* Ariane Lewis, M.D.* Gary S. Gronseth, M.D.,
Alexander Rae-Grant, M.D. Stephen Ashwal, M.D., Maya A. Babu, M.D. MBA, David F. Bauer, M.D., MPH,
Lori Shillinghuss, M.D. KS. Annanda Greev, M.D. Sonia Patrau, M.D. M.S. Minhael A. Rubin, M.D., MA,
Lori Shutter, M.D. Courtney Takahashi, M.D., Robert C. Tasker, MBBS, M.D.,
Panayiotis Nicolaou Varelas, M.D. PhD, Eelco Wijdids, M.D., PhD, Army Bennett, J.D., Scott R. Wessels, MPS, ELS,
and John I. Hallorin M.D.

American Academy of Neurology guidelines@aan.com

Neurology® 2023;101:1-21. doi:10.1212/WNL.0000000000207740

82

84



more family refusals

83



before 2021

86

variability uncertainty



88



87

Book © 2022



Death Determination by Neurologic Criteria

Areas of Consensus and Controversy

90

Consent for determination of death by neurologic criteria in Canada: an analysis of legal and ethical authorities, and consensus-based working group recommendations

Canadian Journal of Anesthesia/Journal canadien d'anesthésie > Article authorities > Article (India bard Anesthésia) |

Canadian Journal of Anesthesia | Anesthésia |

Canadian Journal of Anesthésia |

Canadian Jour

91

2023 PA SUPER 35

IN THE INTEREST OF: M.A.P., A MINOR

APPEAL OF: L.P., FATHER

IN THE SUPERIOR COURT OF PENNSYLVANIA

No. 1753 MDA 2022

92



generally, consent not required

94





95 96

notify family
of testing

but you do not need consent

97

99

98



family claims DDNC does not follow "accepted medical standards"

100



when making determinations of irreversible cessation

101

"accordance with accepted medical standards"



104

which medical standards are accepted?



variability

Research

Original Investigation

Variability of Brain Death Policies in the United States

David M. Greer, MD, MA; Hilary H. Wang, BA; Jennifer D. Robinson, APRN; Panayiotis N. Varelas, MD, PhD; Galen V. Henderson, MD; Eelco F. M. Wijdicks, MD, PhD

108

18

107

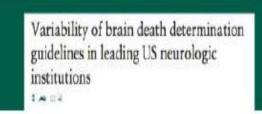
105

Improving uniformity in brain death determination policies over time OPEN

Hilary H. Wang, MD

ABSTRACT

109



David M. Greet, MD. ARSTRACT

fangoris N. Varday, MD, PkD

Background: in accordance with the Uniform Determinator of Death Act, guidelines for brain death determination are developed at an institutional level, potentially leading to variability of practice. We evaluated the differences in brain death guidelines in major US haspitals with a

110

Neurology[®]

February 26, 2019; 92 (9) ARTICLE

Variability in reported physician practices for brain death determination

Sherri A. Braksick, Christopher P. Robinson, Gary S. Gronseth, Sara Hocker, Eelco F.M. Wijdicks, Aleiandro A. Rabinstein

111

113



112

114





AAN guidelines not "accepted medical standards"



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119

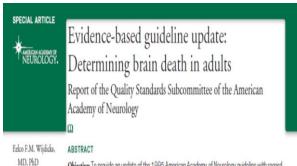
amended **NUDDA**

A.B. 424 (2017)

117

determination of BD "must be made in accordance with ..."

118



Objective: To provide an update of the 1995 American Academy of Neurology quideline with regard

American Academy of Pediatrics Cuidance for the Clinician in DEDICATED TO THE HEALTH OF ALL CHILDREN

Clinical Report—Guidelines for the Determination of Brain Death in Infants and Children: An Update of the 1987 Task Force Recommendations

abataaat

Thomas A. Nakagawa, MD, Stephen Ashwal, MD, Mudit

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2



124

123



family may have grounds

125 126

but no duty unless TRO PI

clinician duties after BD

127

128



Annals of Internal Medicine

American College of Physicians Ethics Manual Sixth Edition

Lois Snyder, JD, for the American College of Physicians Ethics, Professionalism, and Human Rights Committee'

"after ... brain dead ... medical support should be discontinued"

130

129



Views & Reviews

Really, most SINCERELY dead

Policy and procedure in the diagnosis of death by neurologic criteria

D.M. Shaner, MD; R.D. Orr, MD; T. Drought, PhD, RN; R.B. Miller, MD; and M. Siegel, MD

"once death ... diagnosed ... discontinue support"

Approved by the Los Angeles County Medical Association February 15, 2006 Approved by the Los Angeles County Bar Association March 22, 2006

Guidelines for Physicians: Forgoing Life-Sustaining <u>Treatment for Adult Patients</u>

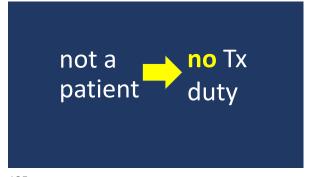
of the Los Angeles County Medical Association and Los Angeles County Bar Association

"all medical interventions should be withdrawn"

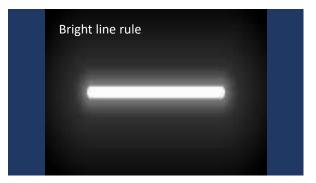
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family contends
DDNC violates
UDDA

140





141



irreversible cessation
all functions
entire brain

143 144





SPECIAL ARTICLE

Brain death, the determination of brain death, and member guidance for brain death accommodation requests

AAN position statement

James A. Russell, DO, MS, Leon G. Epstein, MD, David M. Greer, MD, MA, Matthew Kirschen, MD, PhD, Michael A. Rubin, MD, MA, and Ariane Lewis, MD, on behalf of the Brain Death Working Group

Neurology® 2019;92:1-5. doi:10.1212/WNL.0000000000006750

Correspondence J.A. Russell james.a.russell@lahey.org patient can
satisfy BD
guidelines

148

147

dead

yet...

149 150

"neuro-endocrine function may be present"



151

may determine BD despite function hypothalamus

"not inconsistent
with the whole brain
standard of death"

153

154



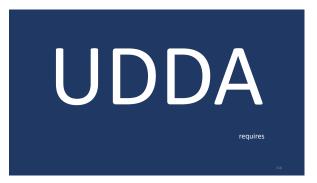


Beverly Whitehead

155 156

10/14/2023





158

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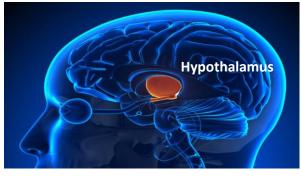
irreversible cessation of

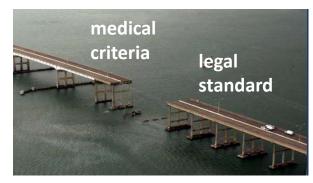
159

all functions

of the

entire brain





161 162





163

164

family may have grounds but <mark>no</mark> duty unless TRO PI

165

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conclusion



167



law sets only minimum duties

169

institutions may offer more accommodation than legally required

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171 172





173 17



you don't need the patient to be dead to withdraw LST

176

even if BD contested

use your

NBT policy

177 178



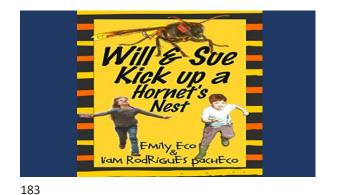


179 180





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Request Legal Help

184



Defending Religious Freedom, Parental Rights, And Other Civil Liberties Without Charge

185

use your NBT policy

Thaddeus Mason Pope, JD, PhD, HEC-C

Mitchell Hamline School of Law 875 Summit Avenue Saint Paul, Minnesota 55105

T 651-695-7661

C 310-270-3618

E Thaddeus.Pope@mitchellhamline.edu

 $\boldsymbol{W} \quad \text{www.thaddeuspope.com}$

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