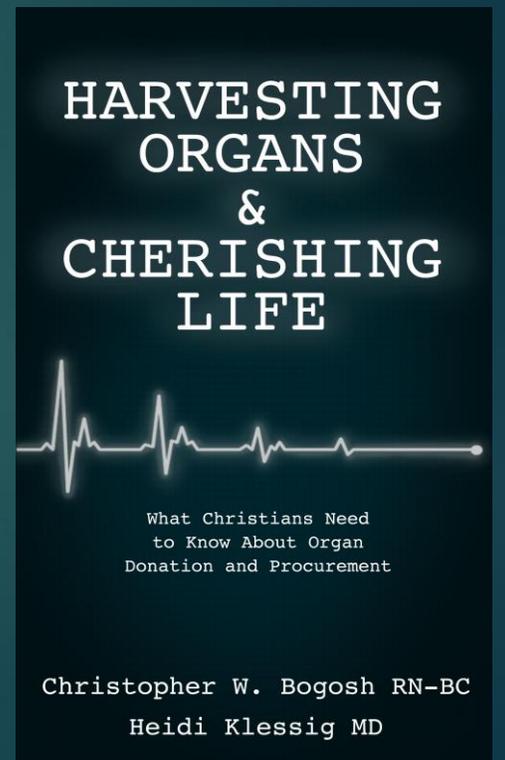




Dr. Heidi Klessig

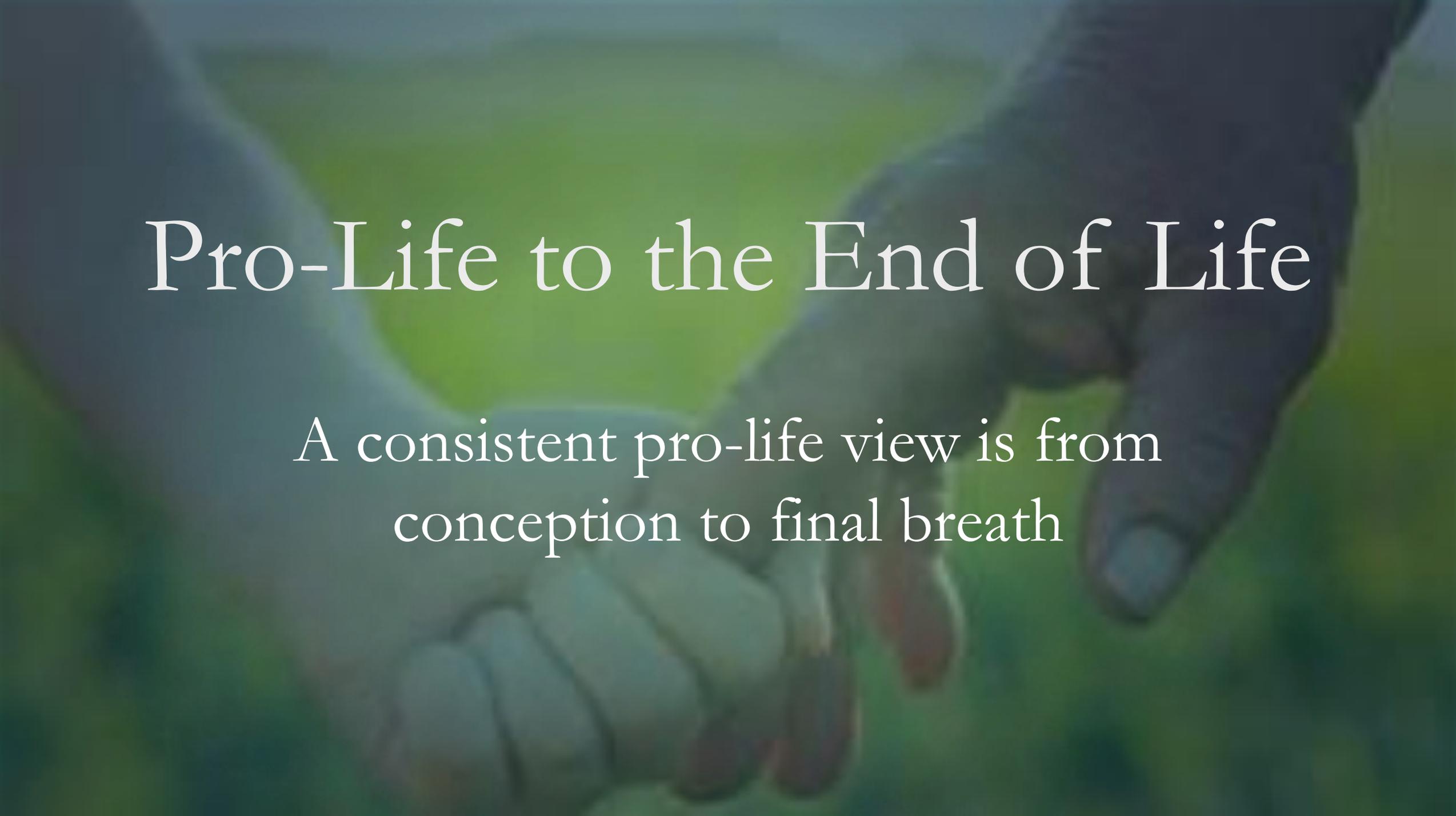
Retired Anesthesiologist &
Pain Management Specialist

Author: Harvesting Organs &
Cherishing Life



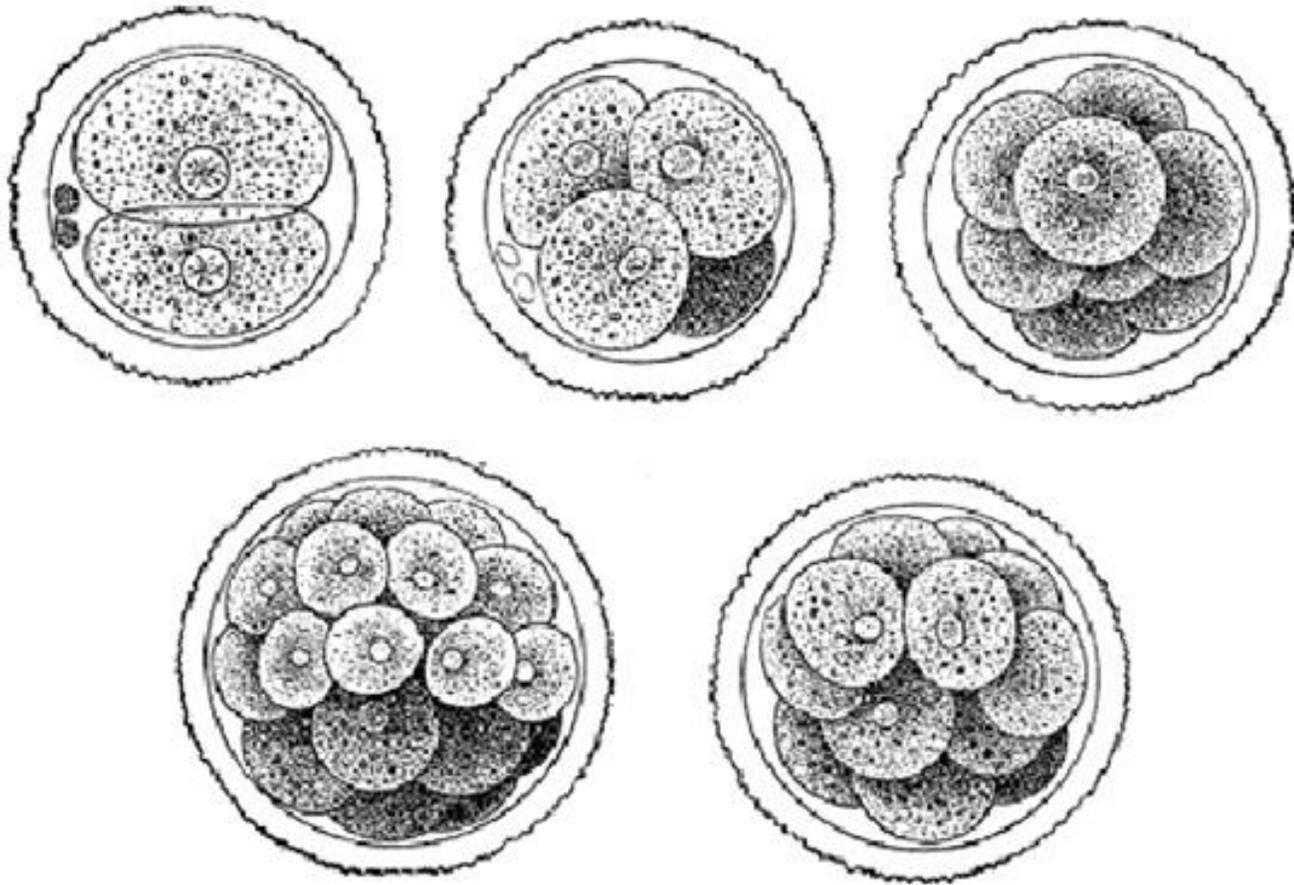
A close-up photograph of two hands, one appearing to be from an older person and the other from a younger person, gently holding each other. The background is a soft, out-of-focus green. The text "Pro-Life to the End of Life" is overlaid in the center in a white, serif font.

Pro-Life to the End of Life

A close-up photograph of two hands, one from a darker-skinned person and one from a lighter-skinned person, gently holding a small white cup. Inside the cup is a small green plant seedling with two leaves. The background is a soft, out-of-focus green. The text is overlaid on the image in a white, serif font.

Pro-Life to the End of Life

A consistent pro-life view is from
conception to final breath

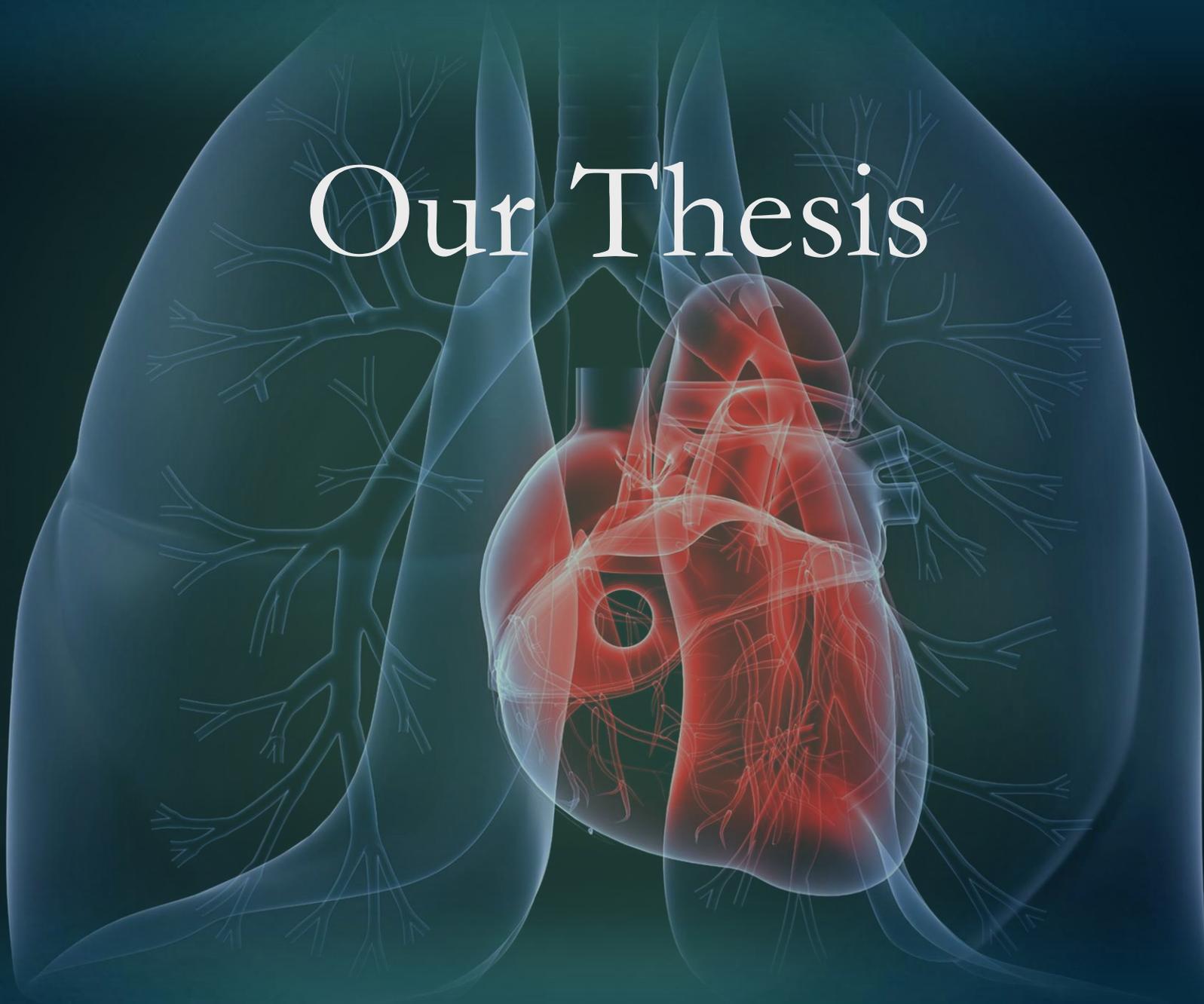


This is a
Person!



*This is Also
a Person!*

Our Thesis



An anatomical illustration of the human respiratory and circulatory systems. The lungs are shown in a light blue, semi-transparent style, with a complex network of branching bronchi and blood vessels. The heart is depicted in a vibrant red color, positioned centrally between the lungs. The entire illustration is set against a dark blue gradient background.

Our Thesis

Organs, unlike tissues, can
only be harvested from a
living donor

ORGAN DONORS MUST
BE ALIVE WITH
BEATING HEARTS AND
BREATHING LUNGS
FOR VIABLE ORGAN
DONATION

Why is There an Organ Donation Waiting List?

Why isn't there an
enormous excess of
organs for
transplants?

3,458,697

US Deaths

106,036

People on the Transplant Waiting List

UN & US Health and Human Services 2021 Data

According to US Health and Human Services

2021 Data

169,000,000

Registered Organ Donors

According to US Health and Human Services

2021 Data

169,000,000

Registered Organ Donors

When Multiplied by the mortality rate in 2021

According to US Health and Human Services

2021 Data

169,000,000

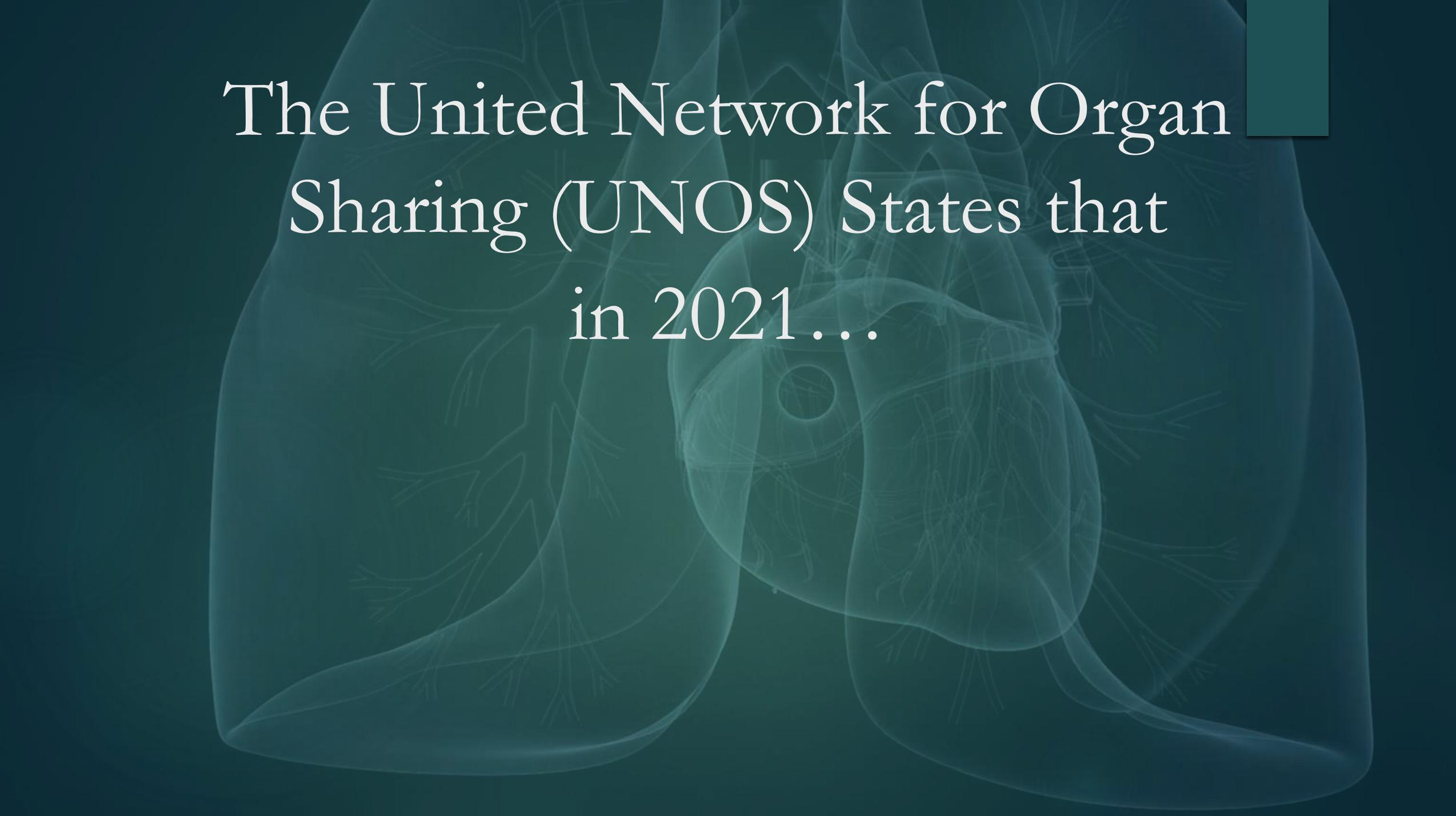
Registered Organ Donors

When Multiplied by the mortality rate in 2021

1,517,113

Registered Organ Donors Died

(Remember: 106,036 on the transplant waiting list)



The United Network for Organ
Sharing (UNOS) States that
in 2021....

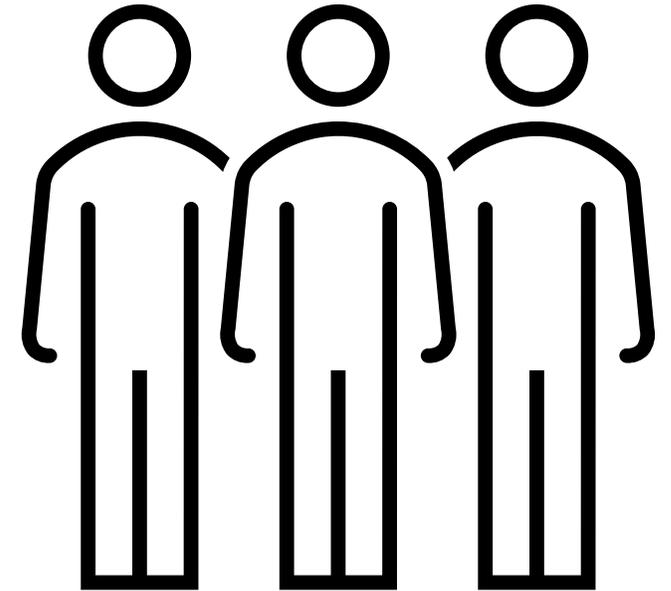
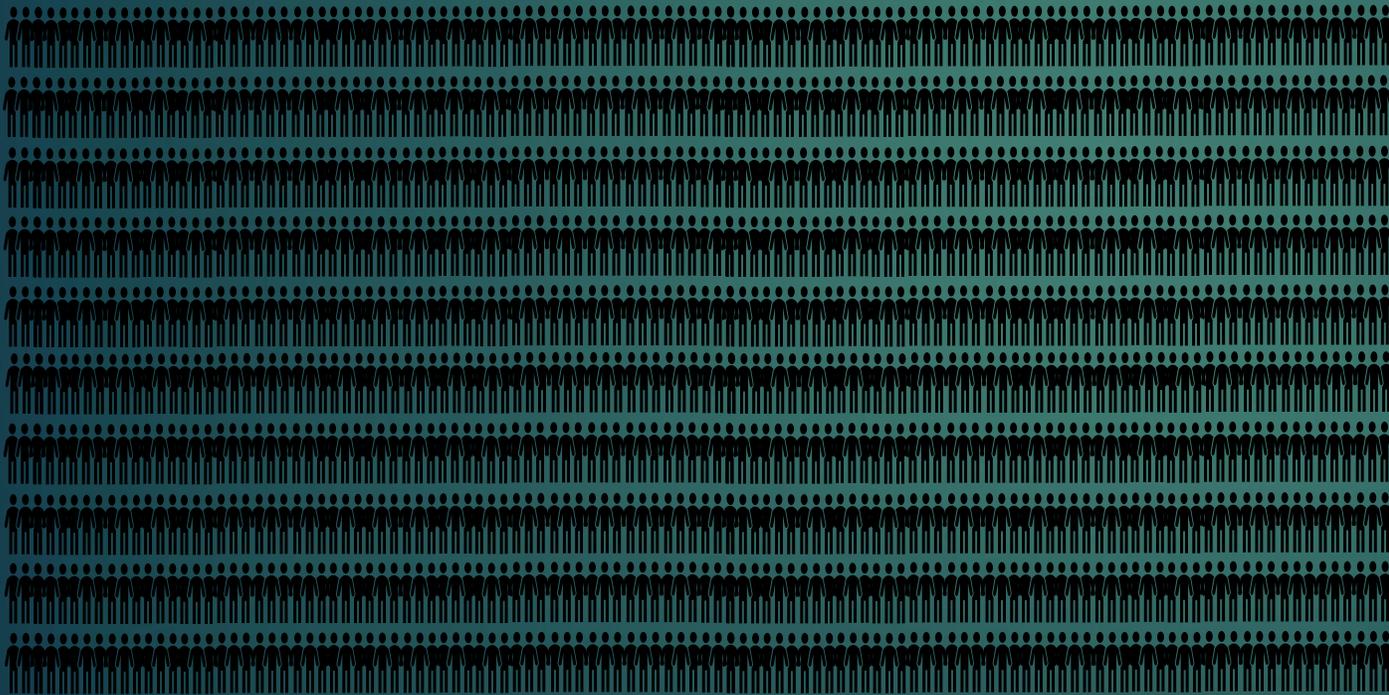
The United Network for Organ Sharing (UNOS) States that in 2021...

Only **13,861** people
became deceased organ donors

Remember about *1.5 million* registered organ
donors died in 2021

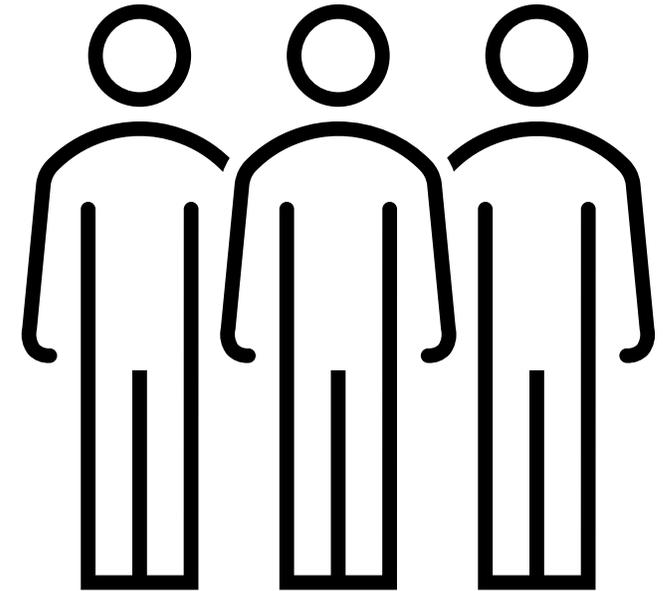
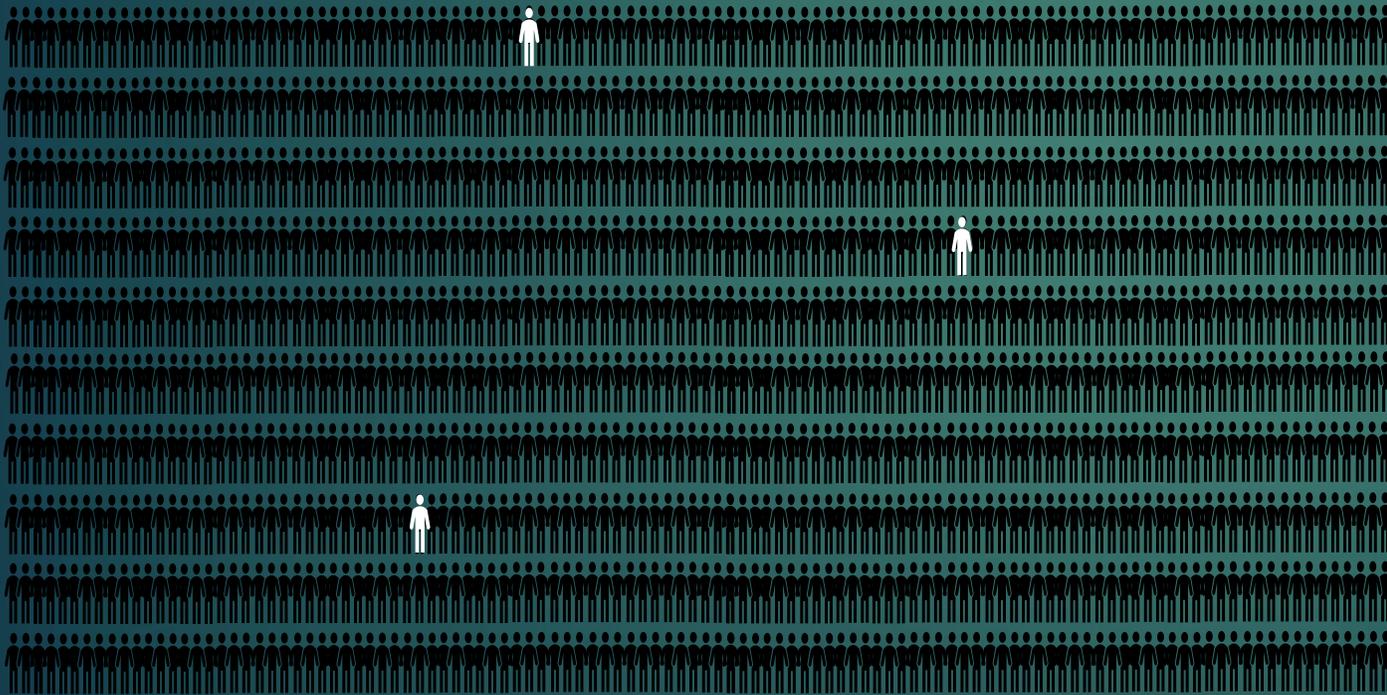
“Only 3 in 1000 people *die in a way*
that allows for deceased organ
donation”

~ OrganDonor.gov



“Only 3 in 1000 people *die in a way*
that allows for deceased organ
donation”

~ OrganDonor.gov



The definition of death changed in 1968

Article

August 5, 1968

A Definition of Irreversible Coma

Report of the Ad Hoc Committee of the Harvard Medical School to Examine the Definition of Brain Death

JAMA. 1968;205(6):337-340.

doi:10.1001/jama.1968.03140320031009

Uniform Determination of Death Act (UDDA)

The ad hoc committee's recommendations became law in 1981 in order to permit organ harvesting.

The UDDA defined death as either:

- 1. *Irreversible* cessation of circulatory and respiratory functions, or
- 2. *Irreversible* cessation of all functions of the entire brain, including the brainstem

The UDDA is Controversial



THREE PRESIDENTIAL COUNCILS WERE
APPOINTED TO STUDY IT, BOTH BEFORE
AND AFTER ITS PASSAGE INTO LAW.



IN 2018, HARVARD MEDICAL SCHOOL
HELD A CONFERENCE, “DEFINING
DEATH: ORGAN TRANSPLANTATION AND
THE 50 YEAR LEGACY OF THE HARVARD
REPORT ON BRAIN DEATH”.

From the 2018 Harvard Conference:

The UDDA is best used as a legal instrument to represent death in the US, not as a way to describe death as a biological occurrence.

UDDA Uniform Determination of Death Act

Allows people to be declared

Legally Dead

while they are

Biologically Alive

Allows people to be declared

Legally Dead

while they are

Biologically Alive

Another Quote
from the 2018
Harvard
Conference

“Policy-making becomes indoctrination whenever public opinions and preferences are intentionally manipulated in ways that destroy or prevent citizens’ independent judgment and rational deliberation...The history of death determination in the context of organ donation can be described as an indoctrinating attempt to settle a moral controversy.”

~ David Rodriguez-Arias

Researcher in moral philosophy &
Bioethics at University of Granada



Death, Dying, and Organ Transplantation

Reconstructing Medical Ethics at the End of Life

FRANKLIN G. MILLER

ROBERT D. TRUOG

OXFORD

These authors want to be more honest: these patients are NOT dead...but our system of ethics needs to change so we can harvest them anyway!

Harvesting Organs and Cherishing Life

Living Donation

Morgue Donation

Forced Organ Harvest

Organ Trafficking

Donation after “Brain Death”

Donation after Circulatory Death

Harvesting Organs and Cherishing Life



Living Donation

Morgue Donation

Forced Organ Harvest

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Donation after “Brain Death”

Donation after Circulatory Death



Living
Voluntary
Donation

Blood, bone marrow, skin,
stem cells

One of a pair of organs
such as the kidney

Part of lobed organs, such
as the liver

Living, Voluntary Donation



In addition to being a wonderful example of selfless service, these donations are generally more long lasting and successful



This is because the organ can be removed in one OR, and immediately taken to a waiting recipient in the OR next door

Harvesting Organs and Cherishing Life



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Morgue Donation

Tissues can be harvested from a biologically dead donor such as

- Corneas
- Skin
- Bones
- Heart valves

Morgue Donation

Because these people are biologically dead, they cannot donate whole organs, which have already become necrotic due to lack of blood flow



BUSINESS

In the rush to harvest body parts, death investigations have been upended



A body at the Pierce County medical examiner's office in Tacoma, Wash. (Christina House / Los Angeles Times)

By MELODY PETERSEN | STAFF WRITER

OCT. 13, 2019 3 AM PT

Morgue Donations are not without problems

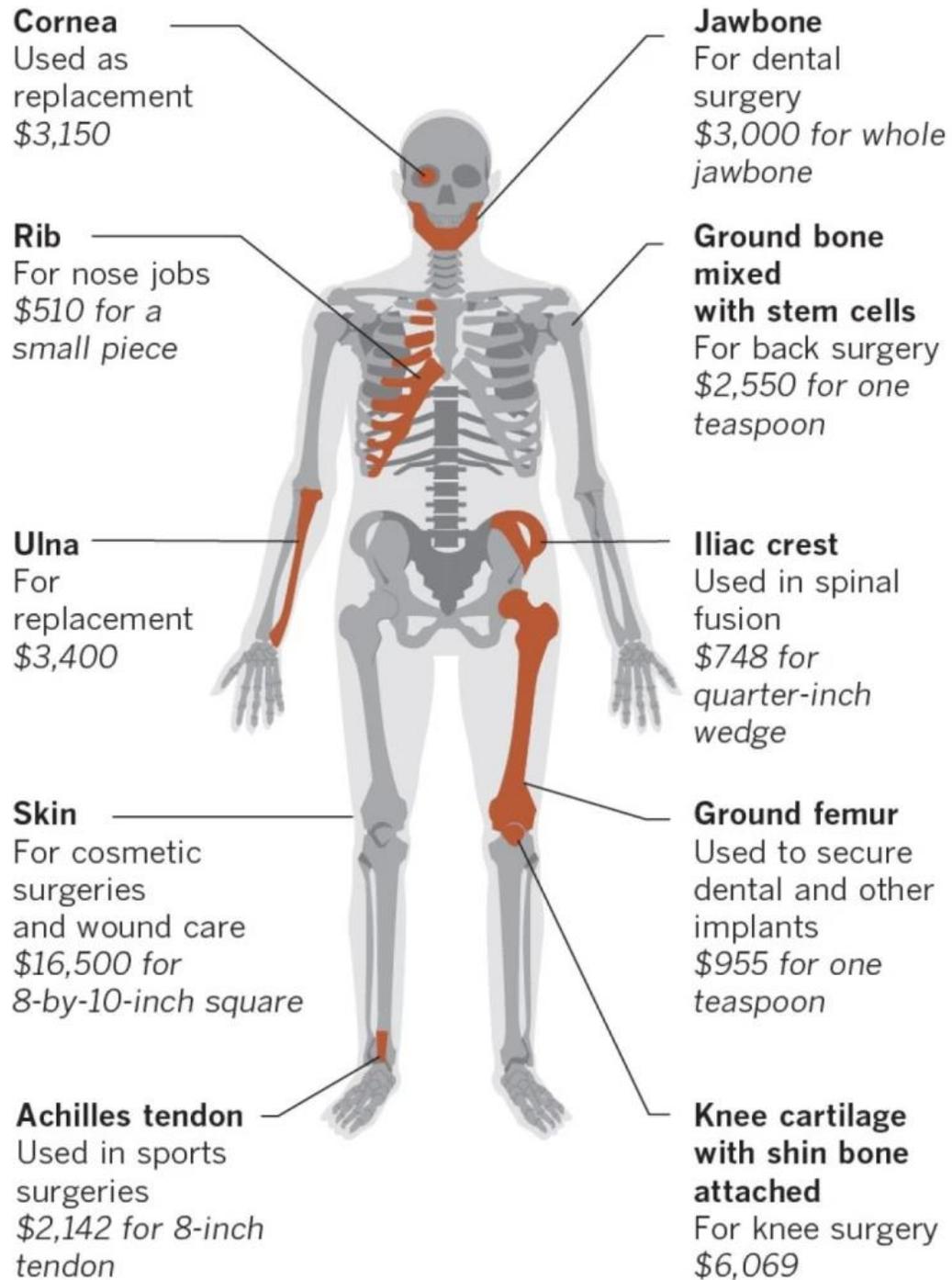


Jonnn Flath

Christy
Rettenmund

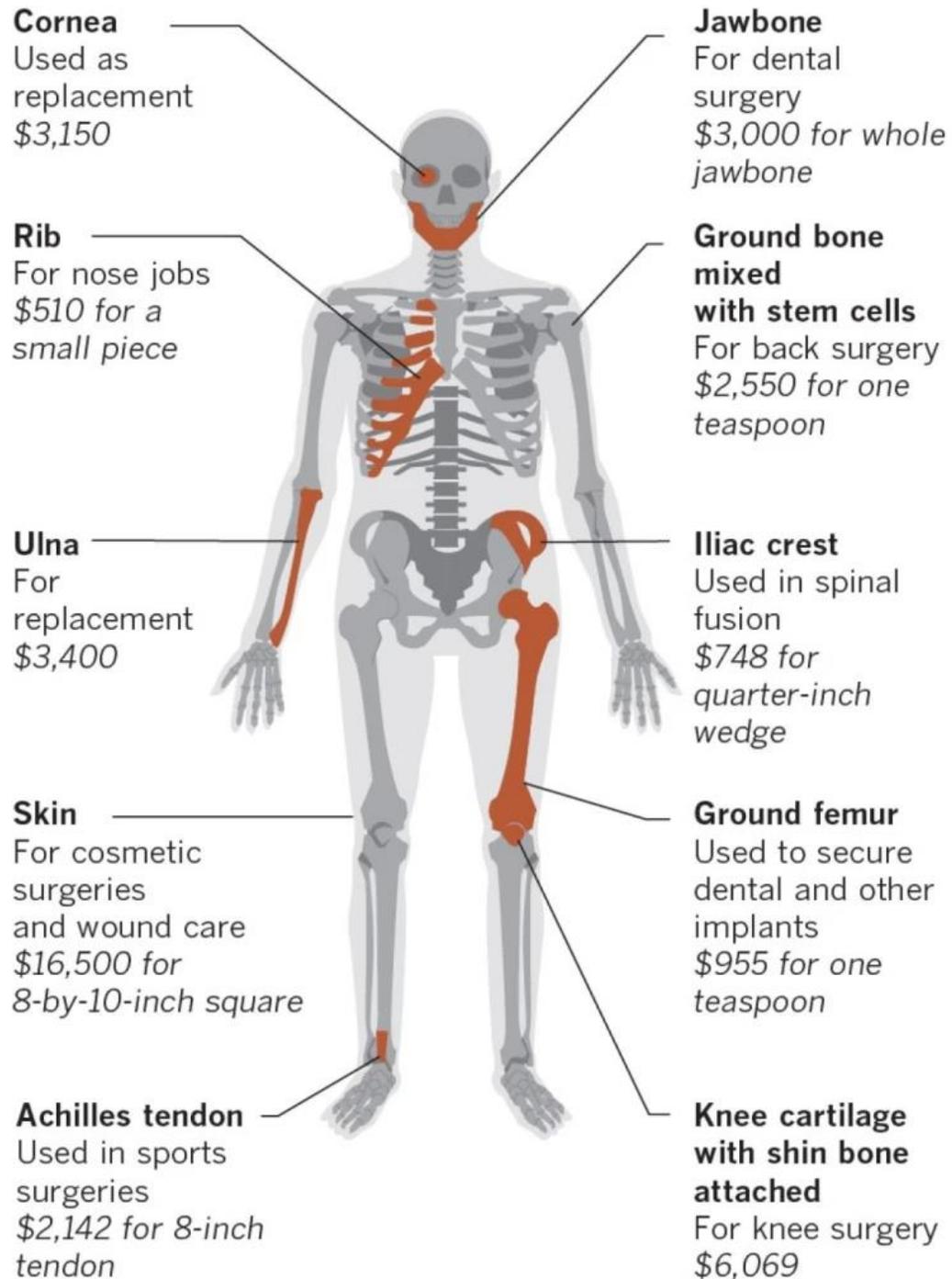


How Much is a Human Body Worth?



How Much is a Human Body Worth?

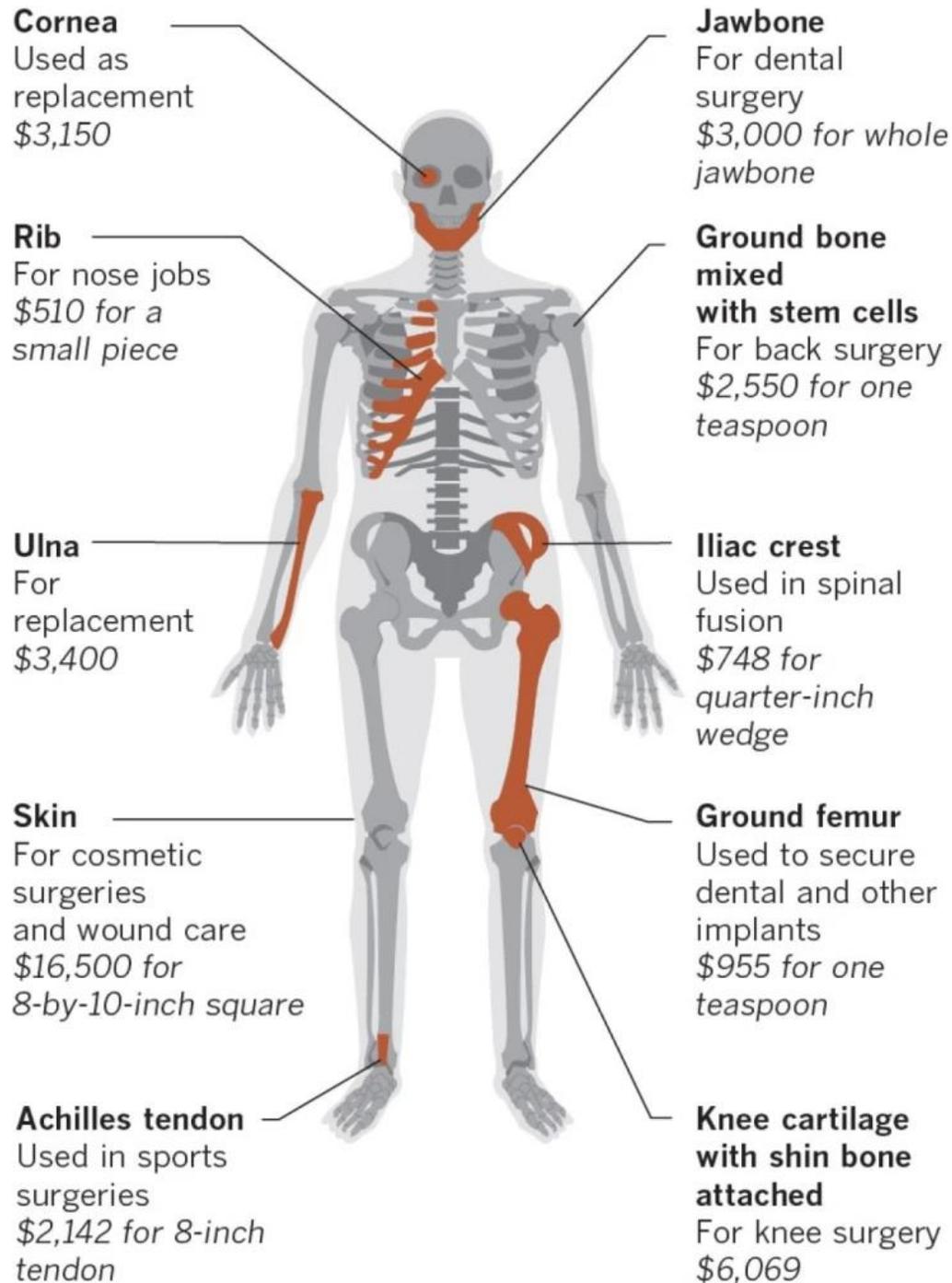
Including the Heart, Lungs, Liver, Kidneys, and other organs - an intact human body can be worth



How Much is a Human Body Worth?

Including the Heart, Lungs, Liver, Kidneys, and other organs - an intact human body can be worth

5 Million Dollars



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➔ Morgue Donation

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Living Donation

Morgue Donation

→ Forced Organ Harvest

Organ Trafficking

Donation after “Brain Death”

Donation after Circulatory Death

HUMAN HARVEST



Forced Organ
Harvesting



The US still permits insurance companies to pay for Chinese organs

THIS PRACTICE HAS ALREADY BEEN BANNED IN OTHER COUNTRIES,
SUCH AS ISRAEL, SPAIN, ITALY, TAIWAN, NORWAY, AND BELGIUM



Dr. Thomas Diflo

Transplant Surgeon at Westchester Medical Center, NY has testified against this practice before congress



Dr. Thomas Diflo

Transplant Surgeon at Westchester Medical Center, NY has testified against this practice before congress

Nothing Has Changed



Don't Give Up Hope

April 23rd 2022
Flushing, NY

Harvesting Organs and Cherishing Life

Living Donation

Morgue Donation

→ Forced Organ Harvest

Organ Trafficking

Donation after “Brain Death”

Donation after Circulatory Death

Harvesting Organs and Cherishing Life

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→ Organ Trafficking

Donation after “Brain Death”

Donation after Circulatory Death

'I've already sold my daughters; now, my kidney': winter in Afghanistan's slums

Crushing poverty is forcing starving displaced people to make desperate choices



Organ Trafficking

Declaration of Istanbul

The Declaration of Istanbul was created at the *Istanbul Summit on Organ Trafficking and Transplant Tourism* held in Istanbul, Turkey in 2008. The Declaration clarifies the issues of transplant tourism, trafficking, and commercialism and provides ethical guidelines of practice in organ donation and transplantation. Since the creation of the declaration, over 100 transplant societies in various nations have endorsed the principles

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→ Organ Trafficking

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→ Donation after “Brain Death”

Donation after Circulatory Death



Donation After “Brain Death”

Donation After “Brain Death”

Surprisingly, the diagnosis of brain death does NOT require anything other than a bedside physical exam.



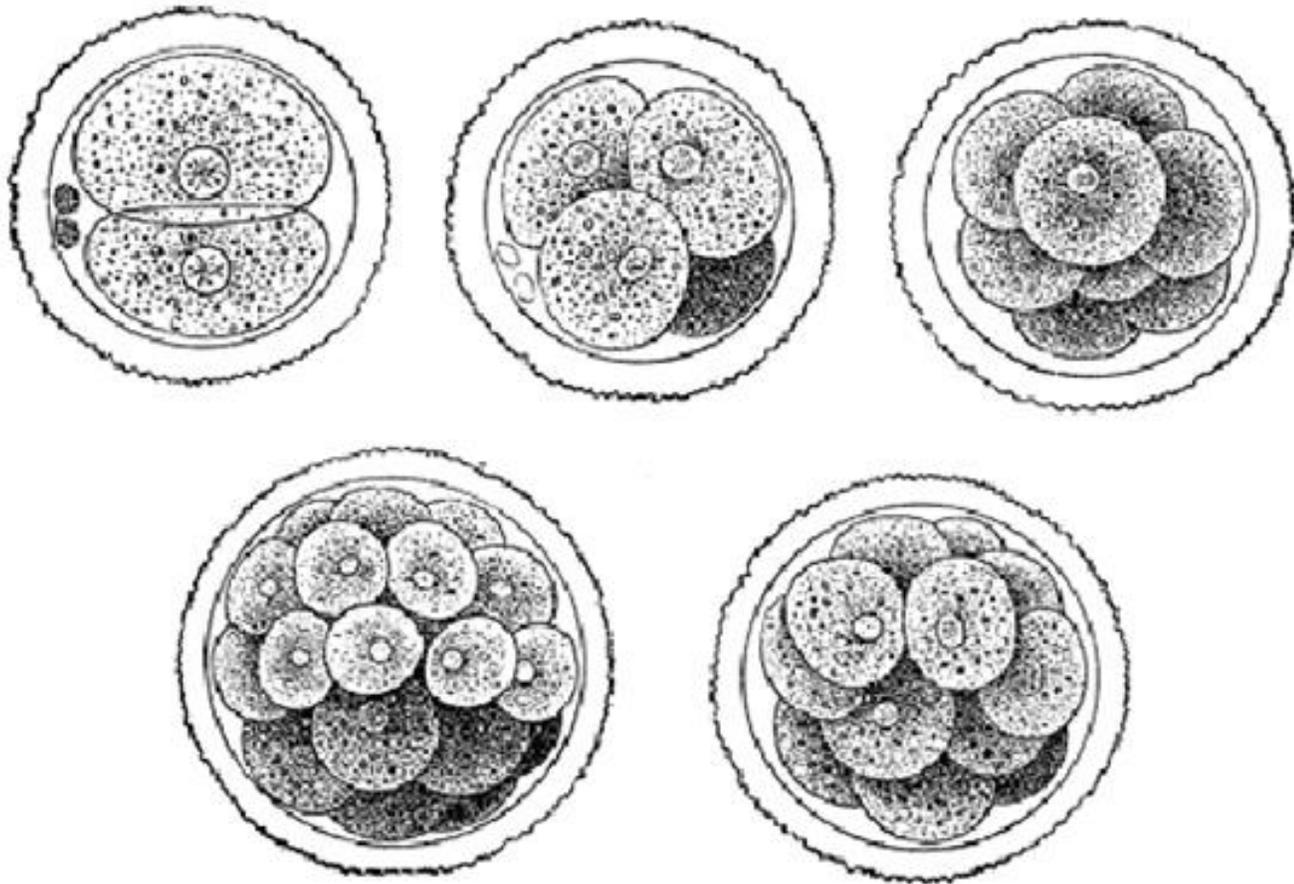
The requirement for an EEG to test for brain waves was removed in 1971.



The standard exam tests only the brain stem. It can be performed using common household items and takes only a few minutes.



If your brain stem isn't working, the conclusion is that the rest of your brain “probably” isn't working either.



Do you see
a brain?



Donation after “Brain Death”

ZACK DUNLAP

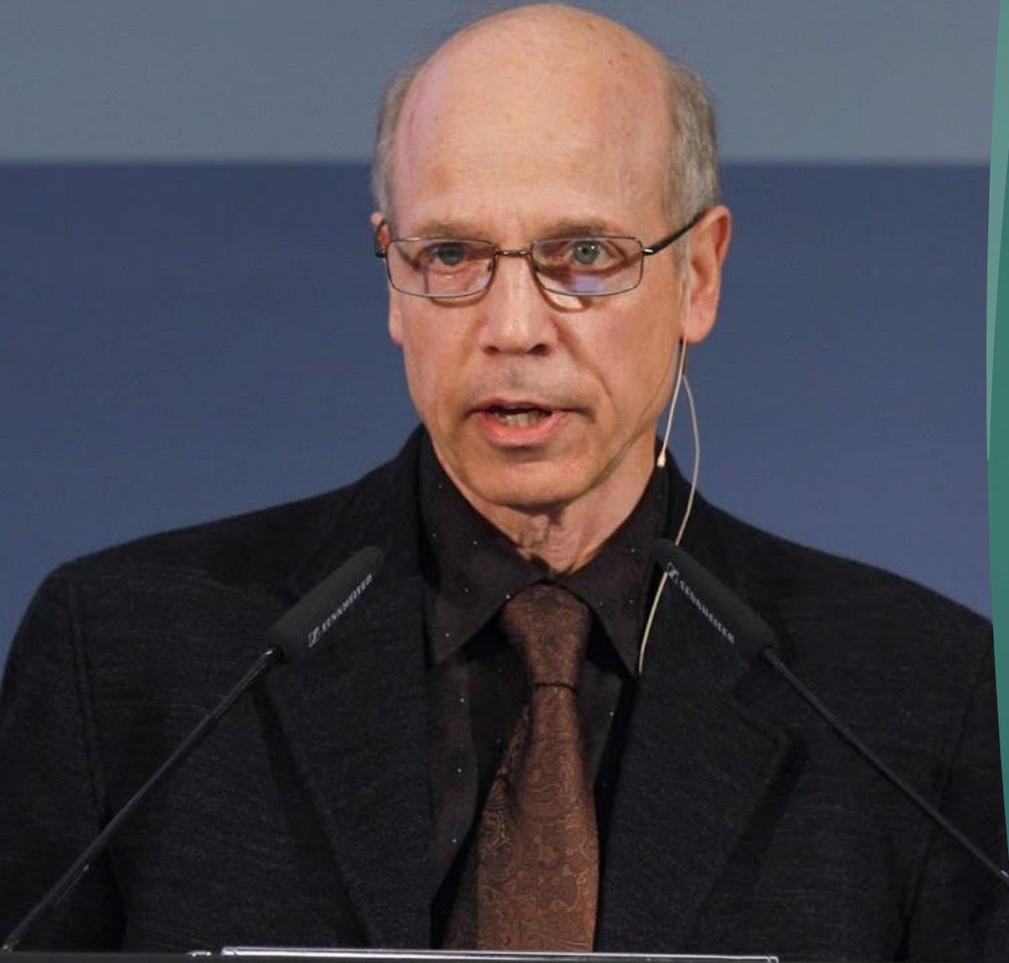


“The next thing I remember was laying in the hospital bed, not being able to move, breathe - couldn’t do anything, on a ventilator. I heard someone say, ‘I’m sorry, he’s brain dead. He’s passing away.’ And there’s nothing I could do, just get mad. I couldn’t do anything - to sign - at all... I tried to scream, tried to move, just got extremely angry.”

Donation after “Brain Death”

ZACK DUNLAP

utscher Ethikrat



Donation after “Brain Death”

Dr. D. Alan Shewmon

pediatric neurologist at UCLA

He has documented **175 cases of “brain dead” people who lived** after the declaration of death under the UDDA, some for more than 20 years!

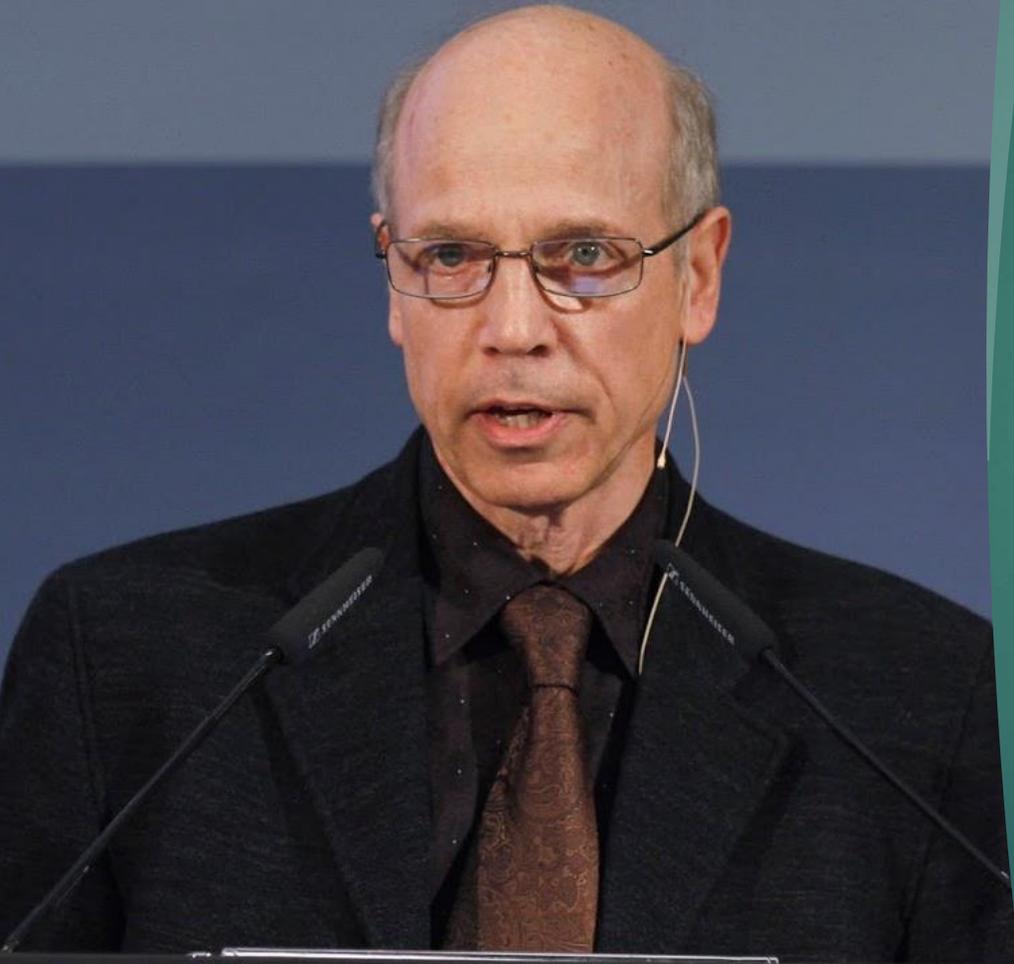
utscher Ethikrat



Dr. D. Alan Shewmon

- ▶ After injury, the brain enters a shock-like state, but if given enough time, often the brain can make an amazing recovery.
- ▶ Troublingly, patients are often declared “brain dead” and sent to be harvested before this recovery can occur.

utscher Ethikrat



Dr. D. Alan Shewmon

Just as cigarette ads are required to contain a footnote warning of health risks, ads promoting organ donation should contain a footnote along these lines:

utscher Ethikrat



Dr. D. Alan Shewmon

Just as cigarette ads are required to contain a footnote warning of health risks, ads promoting organ donation should contain a footnote along these lines:

Warning: It remains controversial whether you will actually be dead at the time of the removal of your organs

Harvesting Organs and Cherishing Life

Living Donation

Morgue Donation

Forced Organ Harvest

Organ Trafficking

➔ Donation after “Brain Death”

Donation after Circulatory Death

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Donation after “Brain Death”

➔ Donation after Circulatory Death



Donation After Circulatory Death

In the 1990s, a new donor pool was “discovered”

Donation After Circulatory Death

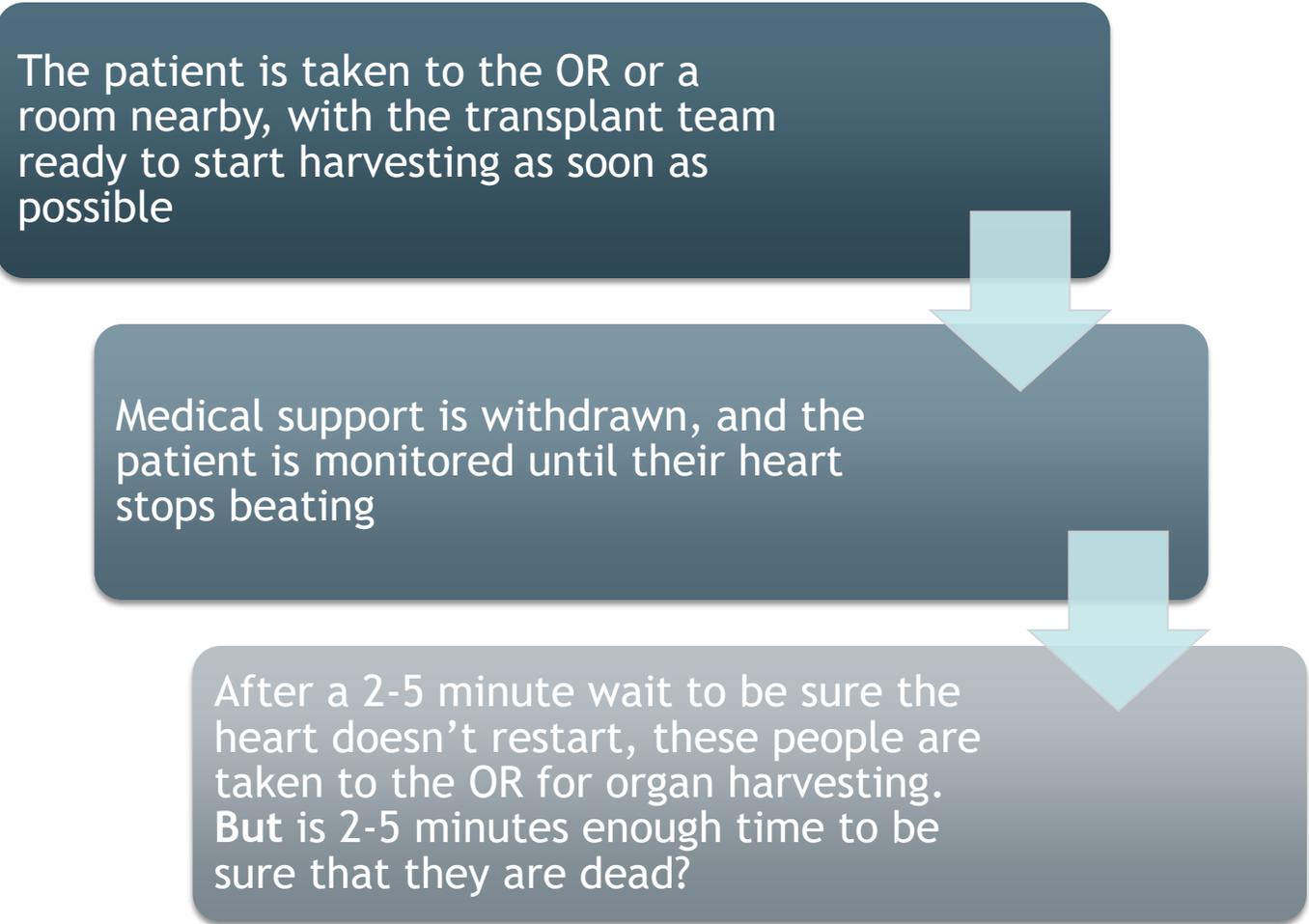
Patients are not
“brain dead”, but
are not expected to
survive



Their care is
withdrawn in a
way that allows
their organs to be
harvested

Donation After Circulatory Death

The patient is taken to the OR or a room nearby, with the transplant team ready to start harvesting as soon as possible



```
graph TD; A[The patient is taken to the OR or a room nearby, with the transplant team ready to start harvesting as soon as possible] --> B[Medical support is withdrawn, and the patient is monitored until their heart stops beating]; B --> C[After a 2-5 minute wait to be sure the heart doesn't restart, these people are taken to the OR for organ harvesting. But is 2-5 minutes enough time to be sure that they are dead?];
```

Medical support is withdrawn, and the patient is monitored until their heart stops beating

After a 2-5 minute wait to be sure the heart doesn't restart, these people are taken to the OR for organ harvesting. But is 2-5 minutes enough time to be sure that they are dead?

Donation After Circulatory Death

Many medical professionals are uncomfortable with harvesting organs after only 2-5 minutes of cardiac arrest (no heartbeat).



Donation After Circulatory Death

Many medical professionals are uncomfortable with harvesting organs after only 2-5 minutes of cardiac arrest (no heartbeat).

Patients are routinely resuscitated after this amount of time.



Received: 2020.12.06
Accepted: 2021.04.08
Available online: 2021.04.14
Published: 2021.05.20

Pronounced Dead Twice: What Should an Attending Physician Do in Between?

Authors' Contribution:
Study Design: A
Data Collection: B
Statistical Analysis: C
Data Interpretation: D
Manuscript Preparation: E
Literature Search: F
Funds Collection: G

ABCDEFG 1 Annie Bao
ABCDEFG 2 Shiping Bao

1 Department of Biology, Duke University, Durham, NC, U.S.A.
2 Champaign County Coroner, Urbana, IL, U.S.A.

Corresponding Author: Annie Bao, e-mail: annie.bao@duke.edu
Conflict of interest: None declared

Patient: Female, 39-year-old
Final Diagnosis: Acute Fentanyl toxicity due to a Fentanyl injection in the hospital
Symptoms: Unresponsive
Medication: Fentanyl
Clinical Procedure: Endovascular coiling for the ruptured berry aneurysm
Specialty: Neurosurgery

Objective: Unusual clinical course

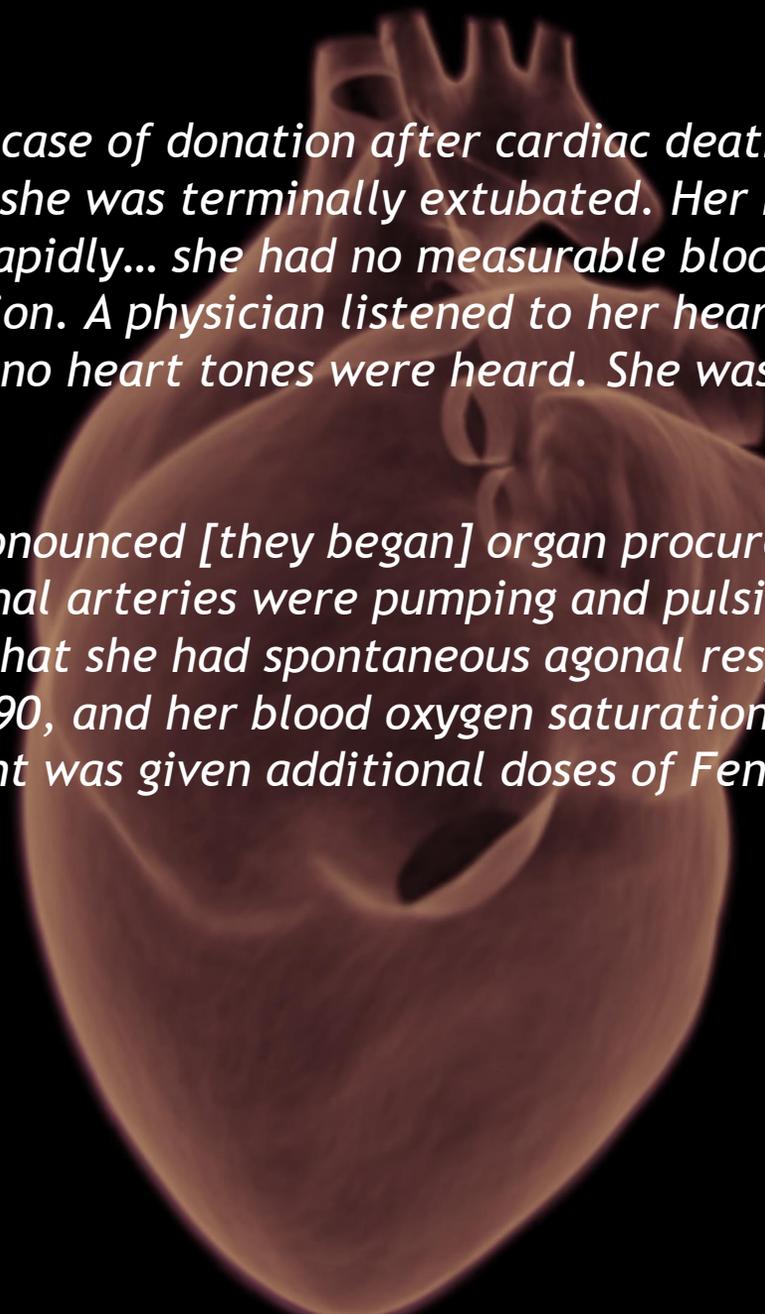
Background: Organ donation after cardiac death (DCD) is a well-accepted practice in the medical, philosophical, and legal fields. It is important to determine the amount of time required for the loss of circulation to lead to irreversible brain loss, and ultimately brain death.

Case Report: We report a rare case of organ donation after cardiac death. During organ procurement, it was noted that the patient's aortic and renal arteries were pumping and pulsing, and her cardiopulmonary activities were back to unexpected levels. The organ procurement surgery was stopped. At the time, the patient was given Fentanyl and Lorazepam. Subsequently, she was pronounced dead again 18 minutes after she was initially pronounced dead. After a complete autopsy, the cause of death was determined to be acute Fentanyl toxicity due to a Fentanyl injection in the hospital. The manner of death was determined to be homicide.

Conclusions: What should an attending physician do in the rare case that the organ procurement team notices the patient is still alive? It is our opinion that: first, the organ procurement team should leave the room immediately and withdraw from the case, and second, the attending physician should let nature run its course and refrain from excessive medical intervention.

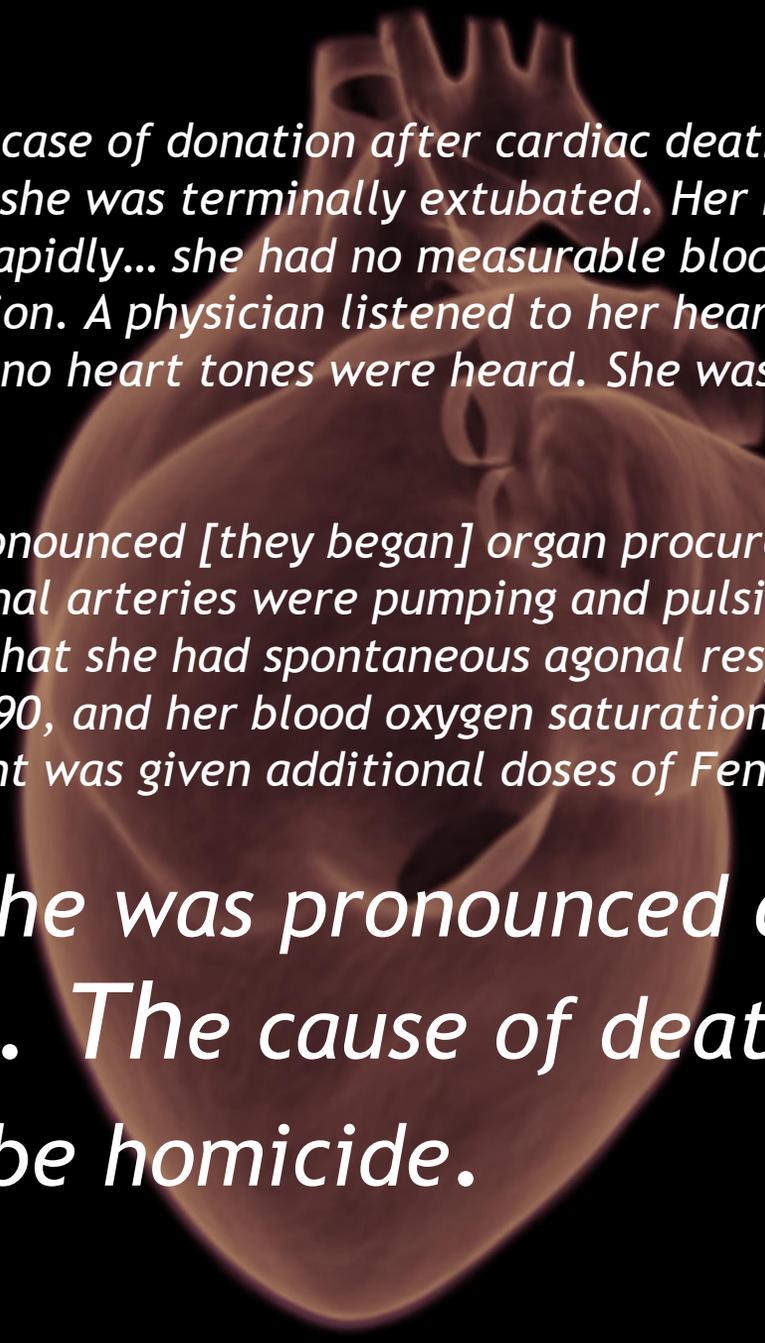
Keywords: Autopsy • Bioethics • Death • Fentanyl • Resuscitation Orders • Tissue and Organ Procurement

Full-text PDF: <https://www.amjcaserep.com/abstract/index/idArt/930305>



A 39 year old woman was a case of donation after cardiac death... After consent was provided from the family... she was terminally extubated. Her heart rate and oxygen saturation levels dropped rapidly... she had no measurable blood pressure, no oxygen saturation, and no respiration. A physician listened to her heart...for an additional 2 minutes. During that time, no heart tones were heard. She was pronounced dead at 2:59am.

After cardiac death was pronounced [they began] organ procurement at 3:00am. It was seen that her aortic and renal arteries were pumping and pulsing. The organ procurement was stopped. It was noted that she had spontaneous agonal respiration. Her heart rate was back in the mid 80s to 90, and her blood oxygen saturation levels were back in the 50s. At the time, the patient was given additional doses of Fentanyl and Lorazepam.



A 39 year old woman was a case of donation after cardiac death... After consent was provided from the family... she was terminally extubated. Her heart rate and oxygen saturation levels dropped rapidly... she had no measurable blood pressure, no oxygen saturation, and no respiration. A physician listened to her heart...for an additional 2 minutes. During that time, no heart tones were heard. She was pronounced dead at 2:59am.

After cardiac death was pronounced [they began] organ procurement at 3:00am. It was seen that her aortic and renal arteries were pumping and pulsing. The organ procurement was stopped. It was noted that she had spontaneous agonal respiration. Her heart rate was back in the mid 80s to 90, and her blood oxygen saturation levels were back in the 50s. At the time, the patient was given additional doses of Fentanyl and Lorazepam.

Subsequently, she was pronounced dead a second time at 3:17am. The cause of death was determined to be homicide.

Donation After Circulatory Death



If the donor's heart is to be harvested, the circulation to the brain is clamped off.



The organs then are re-oxygenated and *the heart restarted* to be sure they are healthy enough to be transplanted

Protocol for DCD from the University of Nebraska

► Safety and Effectiveness of NRP for DCD Heart Transplantation (DCDNRPHeart)

Specifically, normothermic regional perfusion involves the following steps:

1. Opening the chest through a standard sternotomy used for heart and lung procurement.
2. Ligation of the all the blood vessels that supply blood to the brain to ensure that blood flow to the brain is not reestablished once circulation is restarted as described below.
3. Standard cannulation of the aorta and the right atrium as is done for cardiac surgical procedures.
4. Initiation of cardiopulmonary bypass, which will re-establish the flow of blood to all organs of the body including the heart under normothermia. The initial step for ligation of the blood vessels to the head is necessary to ensure that blood flow to the brain does not occur.

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**Once blood flow to the heart is established,
the heart will start beating.**

Uniform Determination of Death Act (UDDA)

The ad hoc committee's recommendations became law in 1981 in order to permit organ harvesting.

The UDDA defined death as either:

- 1. *Irreversible* cessation of circulatory and respiratory functions, or
- 2. *Irreversible* cessation of all functions of the entire brain, including the brainstem

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Dr. Ari Joffe

Pediatrician & Critical Care
Specialist at University of Alberta

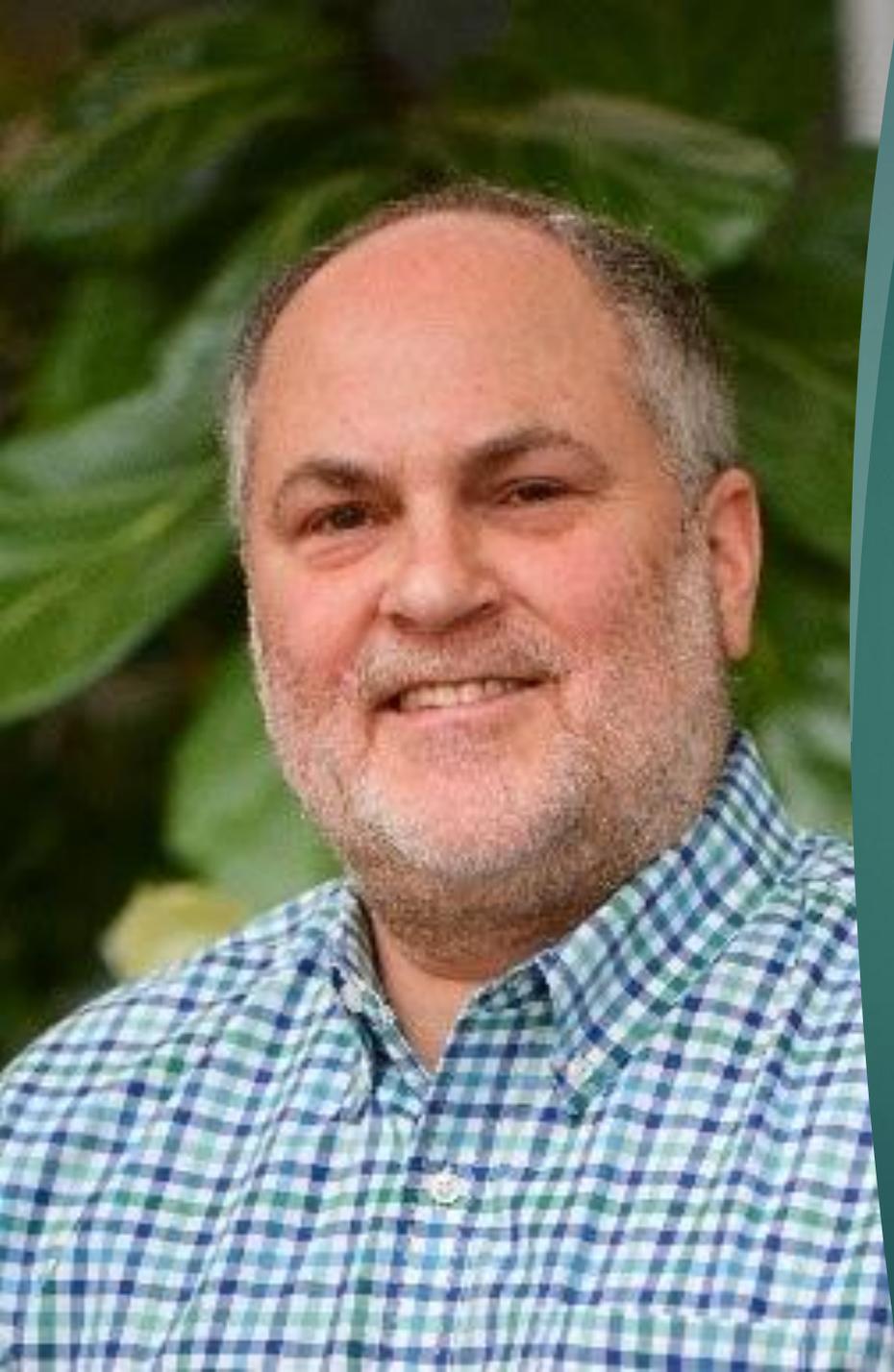


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I have argued that brain death is not death itself... it leads to death when (and only when) ventilation is stopped, and therefore breathing stops, followed by cardiac arrest, followed by irreversible loss of circulation...and this is death.

Further, I believe that at 2 to 10 minutes after loss of circulation, the DCD donor is not dead. This is because there is not necessarily irreversible loss of circulation (i.e. loss of circulation could still be reversed)...When exactly this state of irreversibility occurs is an important question. At present this is not known; however, it is known that it is not at even 10 minutes after cardiac arrest.



Dr. Ari Joffe

Pediatrician & Critical Care
Specialist at University of Alberta

Whether I am challenging the practice of organ donation is another question. The question is not whether organ donors are dead (because they are not). The question is whether organs can be harvested before death from patients whose prognosis is death, and hence be a contributing cause of death. My argument is that this is the current practice, and this is also precisely what needs to be debated urgently.

Is organ harvesting before death violating respect for persons and using them as means?

~ “The ethics of donation and transplantations: are definitions of death being distorted for organ transplantation?” *Philosophy, Ethics, and Humanities in Medicine* 2007



Xenotransplantation

Xenotransplantation

Xenotransplant is the transplantation of organs from other species to humans

- Historically, this has been a failure due to incompatibility and rejection

Recently, an American patient became the first to receive a genetically modified pig heart transplant

- The donor pig had undergone deletion of certain pig genes and insertion of certain human genes to make the organ less likely to be rejected



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- The donor pig had undergone deletion of certain pig genes and insertion of certain human genes to make the organ less likely to be rejected

Sadly, David Bennett Sr. passed away due to complications due to porcine cytomegalovirus from his donor heart.



Will I receive an
anesthetic when I donate
my organs after “death”?

UDDA Uniform Determination of Death Act

Allows people to be declared

Legally Dead

while they are

Biologically Alive

UDDA

Uniform Determination of Death Act

When you are **Legally Dead**, you have no right to
autonomy or self-determination.

UDDA

Uniform Determination of Death Act

When you are **Legally Dead**, you have no right to
autonomy or self-determination.

**The Medical System changes from serving your
best interests, to serving the best interests of
those who will receive your organs.**

Review Article/Brief Review | [Published: 26 February 2015](#)

Anesthetic considerations in organ procurement surgery: a narrative review

Considérations anesthésiques pour la chirurgie de prélèvement d'organes: une étude narrative

[T. Anthony Anderson MD, PhD](#) , [Peter Bekker MD](#) & [Parsia A. Vagefi MD](#)

[Canadian Journal of Anesthesia/Journal canadien d'anesthésie](#) **62**, 529–539 (2015) | [Cite this article](#)

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This Article Reviews

- ▶ Blood pressure management
- ▶ Fluid management
- ▶ Lung protective ventilatory strategy
- ▶ Endocrine (hormonal) therapy
- ▶ Transfusion to maintain optimal oxygen delivery to the organs
- ▶ Neuromuscular blockers to prevent movement during surgery

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15 Altmetric | [Metrics](#)

This Article Reviews

- ▶ Blood pressure management
- ▶ Fluid management
- ▶ Lung protective ventilatory strategy
- ▶ Endocrine (hormonal) therapy
- ▶ Transfusion to maintain optimal oxygen delivery to the organs
- ▶ Neuromuscular blockers to prevent movement during surgery

It Does Not Mention Actual Anesthesia



Death, Dying, and Organ Transplantation

Reconstructing Medical Ethics at the End of Life

FRANKLIN G. MILLER
ROBERT D. TRUOG

OXFORD

Miller and Truog reviewed the European anesthesia literature debate about whether the “brain dead” donor should be given anesthesia.

They found two responses.



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1. Since “brain dead” patients retain some brain functions, we cannot be sure that they don’t feel pain during the harvest – blood pressure and heart rate increase with incision. Therefore, an anesthetic should be given to be on the “safe side”.



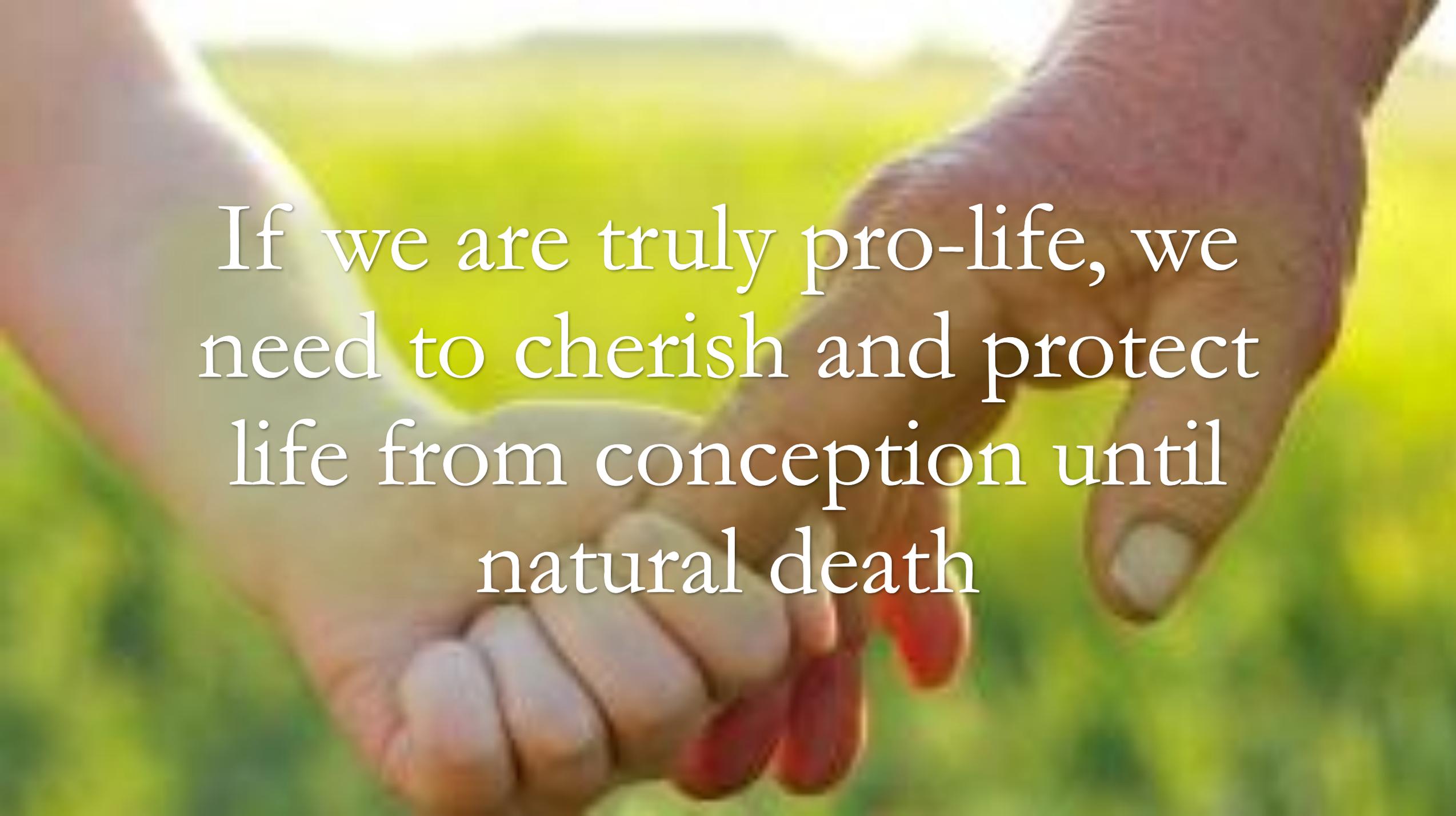
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2. “Others disagreed. Surprisingly, their position was not based on the claim that the patients were incapable of experiencing pain. Instead, they were concerned that if the public learned that anesthesiologists were giving an anesthetic to ‘dead’ patients, it would make them suspicious that the patients were not really dead.” – Excerpt

A close-up photograph of two hands, one light-skinned and one dark-skinned, gently holding a small green plant seedling. The background is a bright, out-of-focus green field. The text is overlaid in the center in a white, serif font.

If we are truly pro-life, we
need to cherish and protect
life from conception until
natural death

A photograph of two young Black women embracing and laughing joyfully. The woman on the left has her hair in braids and is wearing a dark top. The woman on the right has curly hair and is wearing a denim jacket. The background is blurred, suggesting an outdoor setting. The text is overlaid in white, serif font.

Organ Donors are
Biologically and
Spiritually Still Alive



Organ Donors are Biologically and Spiritually Still Alive

Even if the law has taken away their
rights by declaring them legally dead -



Organ Donors are Biologically and Spiritually Still Alive

Even if the law has taken away their
rights by declaring them legally dead -

We can, and must,
fight for them

Refuse to Be a **Registered** Organ Donor

Registering as an organ donor means that your organs **will be** taken, regardless of your living will or the desires of your surviving family

Leaving you helpless against being harvested while biologically still alive

Sadly, this may
not be enough.

Removing your consent from your driver's license
does NOT guarantee that you will be removed from
your state's Organ Donor Registry

**I REFUSE TO
BE AN ORGAN
DONOR**

Healthcare Advocacy and
Leadership Organization
7301 Bass Lake Rd
Minneapolis, MN 55428

www.halovoice.org
feedback@halovoice.org
1-888-221-HALO

I, _____,

REFUSE TO BE AN ORGAN DONOR.

Do not perform an apnea test.

Do not notify an organ procurement organization if I appear to be at or near death.

Do not take any organs for transplantation or research.

Signature: _____

Witness: _____

Witness: _____

Date: _____

Not All Transplants are Bad

Consider

- Consider becoming a voluntary, living donor if you are in a position to do so.

Notify Family

- Notify family members if you would like to donate tissues **AFTER** they are sure that you are biologically dead.

Speak Out
Against
Immoral
Harvesting

Forced Organ Harvest

Organ Trafficking

“Brain Dead” Organ
Harvest

“Circulatory Death”
Organ Harvest

What if You Need a Transplant?

Decide ahead of time
what types of
transplants are okay
with you

MANY TYPES OF TRANSPLANTS ARE ETHICAL

Ethical Transplants

Living Donation

- Both donor and recipient remain alive after the procedure

Morgue Donation

- The donor is biologically dead and tissues such as corneas, heart valves, skin, bones...etc can be donated



Be Prepared During Tragedy

Study the issue for when the unexpected happens and transplant professionals approach you about your loved one becoming an organ donor.

Be Forgiving to Yourself and Others

The transplant industry has existed for over 50 years, touching many lives. Decisions made with the best intentions and limited information may make for regrets.

Be Forgiving to Yourself and Others

The transplant industry has existed for over 50 years, touching many lives. Decisions made with the best intentions and limited information may make for regrets.

I am one of these people



RespectforHumanLife.com



HARVESTING ORGANS & CHERISHING LIFE



What Christians Need
to Know About Organ
Donation and Procurement

Christopher W. Bogosh RN-BC

Heidi Klessig MD

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Q&A

Dr. Heidi Klessig

Retired Anesthesiologist &
Pain Management Specialist

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Neonatologist

Retired Clinical Professor of
Pediatrics at University of Toledo
College of Medicine