

Understanding an Unplanned DCD Pause

This educational resource explains the donation after circulatory death (DCD) unplanned DCD pause process, including what constitutes an unplanned DCD pause, who may request one, and when someone may request one. The information outlines organ procurement organization (OPO) responsibilities before, during, and after an unplanned DCD pause, including necessary communication with stakeholders and documentation practices.

Donation after Circulatory Death

DCD is the organ recovery process that may occur following death when the heart and lungs have stopped functioning. On May 28, 2025, the Health Resources and Services Administration (HRSA) directed the Organ Procurement and Transplantation Network (OPTN) to propose policies to better safeguard DCD patients and improve communication with families.

What is an Unplanned DCD Pause?

An unplanned DCD pause is an unexpected stopping of the DCD process due to an unresolved difference of opinion about whether a patient meets the donor hospital's criteria for withdrawal of life-sustaining therapies. An unplanned DCD pause is a “stop the line” patient safety mechanism used to address an unresolved difference of opinion about a patient's candidacy for withdrawal of life-sustaining therapies after all other hospital and/or OPO communication and escalation methods are exhausted.

Table 1. What an Unplanned DCD Pause Is and Is Not

What It Is	What It Is Not
A "stop the line" patient safety mechanism	A tool for authorization disputes
A formal process for raising and resolving concerns	A substitute for clinical decision-making
Used after usual communication channels are exhausted	A routine delay

When Can an Unplanned DCD Pause Be Requested?

An unplanned DCD pause can be requested any time after DCD authorization/disclosure through the time of cross-clamp, a surgical procedure that occurs during the organ recovery process.

Who Can Request an Unplanned DCD Pause?

A broad range of stakeholders may raise unresolved concerns and request an unplanned DCD pause. Stakeholders include, but are not limited to:

- Patient (when applicable) and/or patient's agent or family
- Donor hospital staff
- OPO staff
- Third-party procurement or preservation teams
- Transplant program staff

Organ Procurement Organization Responsibilities

OPOs have specific responsibilities to ensure that all applicable stakeholders know how to request an unplanned DCD pause. OPOs are also required to follow appropriate processes to resolve, document, and report a requested unplanned DCD pause.

Notification of Stakeholders

- Inform all stakeholders how to request an unplanned DCD pause at no fewer than two timepoints
 - Within two hours of case initiation
 - At the timeout before withdrawal of life-sustaining therapies
- Document that all stakeholders were informed in the donor record

Response to a Requested Unplanned DCD Pause

- Immediately suspend all DCD and allocation activities
- Notify all applicable stakeholders that an unplanned DCD pause has been requested
- Convene a review with relevant stakeholders, including the person who requested the unplanned DCD pause
- Follow escalation pathways per the OPO's policies and procedures
- Document every action and communication in the donor record

Communicating that an Unplanned DCD Pause is Resolved

- Document the outcome (resumption or closure of the DCD process)
- Record rationale for the outcome, notifications made, and actions taken
- Obtain acknowledgement from transplant programs that accept an organ if the DCD process resumes
- Report unplanned DCD pause to the OPTN within 72 hours of initiation of the unplanned DCD pause or within 24 hours of resolution of the unplanned DCD pause, whichever occurs first
- Retain all related records

Possible Outcomes of a Requested Unplanned DCD Pause

There are two possible outcomes for a requested unplanned DCD pause: DCD process resumption or DCD process closure. The following explains the potential rationale and required actions for each outcome.

Resume DCD Process

- The patient still meets the appropriate criteria to withdraw life-sustaining therapies
- Transplant programs that accept an organ for transplant must be notified that an unplanned DCD pause was requested as well as the resolution that the DCD process may continue
 - The transplant program must acknowledge awareness of the unplanned DCD pause and decision to proceed
- The OPO must document rationale, notifications, and acknowledgements received

Stop DCD Process

- The patient no longer meets criteria to withdraw life-sustaining therapies
- The DCD process may restart if the patient is later found to be suitable for DCD and the patient/patient's agent and care team elect to proceed

What Makes an Unplanned DCD Pause Reportable?

Every requested unplanned DCD pause is reportable. If an unplanned DCD pause is requested by a stakeholder, OPOs must make a report to the OPTN according to the following timelines.

Table 2. Reporting Timelines for OPOs

Reported Information	Deadline
An unplanned DCD pause is requested	Within 72 hours of initiation OR within 24 hours of resolution, whichever comes first
Resumption of the DCD process	Within 24 hours of resuming DCD processes
Closure of the DCD process	Within 24 hours of donor organ disposition form completion*

*The donor organ disposition form is a document that OPOs are required to submit for potential donors. This data collection form is submitted to the OPTN even if DCD recovery does not proceed.

Example: Unplanned DCD Pause

A hospital refers a potential donor to the OPO. The patient is not registered as a donor, but the patient's agent agrees to DCD after the OPO and hospital explain the process, its effect on withdrawal of life-sustaining therapies, how to request an unplanned DCD pause, and normothermic regional perfusion. The OPO begins the donor evaluation and reminds the incoming care team that an unplanned DCD pause may be requested.

The bedside nurse later questions whether seizure medications are masking the patient's neurologic status. The physician declines to reconsider the withdrawal decision. After available communication and escalation steps fail to resolve the concern, the nurse requests an unplanned DCD pause.

This is an unplanned DCD pause because an unresolved difference of opinion remains about whether withdrawal of life-sustaining therapies is appropriate.

Example: Not an Unplanned DCD Pause

A hospital refers a potential donor to the OPO. The OPO confirms the patient's donor registration and explains how DCD affects withdrawal of life-sustaining therapies, how to request an unplanned DCD pause, and normothermic regional perfusion.

The patient's agent later objects to donation and requests immediate withdrawal of life-sustaining therapies. After learning that the registration is binding under state law and withdrawal will occur when recovery resources are ready, the agent requests an unplanned DCD pause.

This is not an unplanned DCD pause because it concerns donation authorization. The hospital and OPO should address the issue according to state law and local policy.

Summary

An unplanned DCD pause is a "stop the line" patient safety mechanism used after donation authorization and before cross-clamp when unresolved differences of opinion remain about whether a patient meets the donor hospital's criteria for withdrawal of life-sustaining therapies. Any stakeholder may request an unplanned DCD pause during this timeframe after standard communication and escalation options are exhausted. If an unplanned DCD pause is requested the OPO must immediately suspend DCD and allocation activities, notify and convene relevant parties, document all actions, and determine whether the DCD process should resume or stop. OPOs must also communicate unplanned DCD pause procedures at required time points, retain related records, and report the unplanned DCD pause and its outcome to the OPTN within the applicable deadlines.