

# Pediatric brain death guideline

Although pediatric brain death guidelines stipulate when ancillary testing should be used during [brain death](#) determination, little is known about the way these recommendations are implemented in clinical practice.

Lewis et al. conducted a survey of pediatric intensivists and neurologists in the United States on the use of ancillary testing. Although most respondents noted they only performed an ancillary test if the clinical examination and [apnea test](#) could not be completed, 20% of 195 respondents performed an ancillary test for other reasons, including (1) to convince a family that objected to the brain death determination that a patient is truly dead (n=21), (2) personal preference (n=14), and (3) institutional requirement (n=5). Our findings suggest that pediatricians use ancillary tests for a variety of reasons during brain death determination. Medical societies and governmental regulatory bodies must reinforce the need for homogeneity in practice <sup>1)</sup>.

<sup>1)</sup>

Lewis A, Adams N, Chopra A, Kirschen MP. Use of Ancillary Tests When Determining Brain Death in Pediatric Patients in the United States. J Child Neurol. 2017 Jan 1;883073817724697. doi: 10.1177/0883073817724697. [Epub ahead of print] PubMed PMID: 28828924.

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