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**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

Holly J. Mitchell
Second District

Sheila Kuehl
Third District

Janice Hahn
Fourth District

Kathryn Barger
Fifth District

Jorge Orozco
Chief Executive Officer

Brad Spellberg, MD
Chief Medical Officer

Edgar Solis, RN
Chief Operations Officer

Annie M. Marquez, RN
Interim Chief Nursing Officer

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To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

Despite all efforts, your family/loved one has been diagnosed with a devastating brain injury and the prognosis is now considered grave. We offer our sincere condolences to you and your family/loved ones. We wish to share important information during this most difficult time. We encourage you to gather appropriate family members/loved ones you may wish to have present at the bedside.

As you are gathering your family/loved ones, the nurses and physicians will continue to provide the best possible care for your loved one, but further special testing is now necessary. Doctors will shortly begin testing to determine if your loved one has died from the severe injury to the brain. These tests will include physical examinations and other studies. These evaluations are commonly known as "Brain Death Testing". The details and findings of the tests will be discussed with you. Two independent doctors will perform the tests to be certain that there is no possibility for mistake.

You will be kept up to date with the progress of the examinations and will have the opportunity to ask any questions that you may have. If these tests indicate that your loved one has died, you will be notified immediately. Although this will be a very difficult time, it is important to understand that these tests are final and your loved one will be pronounced dead at the completion of the second confirming examination. You will then be permitted a reasonable period of time to have family members visit your loved one or to have previously requested religious or cultural practices addressed prior to the removal of the intensive care machines at the bedside. We have members of our care team who will assist you with any end of life questions you may have.

Please let us know if you have requests for special religious or cultural practices for your loved one or concerns about family members being able to have adequate time to arrive at the hospital. These issues should be immediately discussed with your doctors, the Clinical Social Worker or Hospital Chaplain.

Sincerely,

Print Attending Name (or licensed physician designee)

Attending Signature (or licensed physician designee)

Date/Time



Health Services
www.dhs.lacounty.gov