

Thank you for considering our whole body donation program. Please complete the forms that apply to your situation. After we review them, we will reach out if we have any questions, and to let you know if we can accept your generous donation.

Informed Consent for Whole Body Donation: Please sign this form so we can accept the donation. If you choose to donate the body for advanced brain research, there are some additional requirements—this type of donation requires Death with Dignity, also known as Medical Aid in Dying.

Donor History: We use this form to help decide if we can accept the donation. Please answer each question as clearly and accurately as you can. If anything changes, please let us know.

Return of Partial Remains: Use this form to tell us if you would like partial remains returned and how you would like them returned.

Witnesses for Authorized Person Unable to Sign: Complete this form only if the Authorized Person—who may be the Donor—cannot physically sign the informed consent form. In that case, witnesses sign to confirm the consent.

Additional Next of Kin: Complete this form only if more than one person has legal authority and there may be a disagreement about the donation.

Submitting Your Packet

The forms can be sent to us

by **email** to info@bristlecones.org with the subject line: “Donation (Last Name, First Name)”, please scan or photograph the completed and signed forms;

or by **mail**, please mail the printed, completed, and signed forms to:

Bristlecones Body Donation Inc.
650 NE Holladay Street, Suite 1600 A
Portland, Oregon 97232



Information about Body Donation

What is body donation? Body donation means agreeing to donate the body after death for research and education. It is a generous and charitable act that helps advance science.

What is Bristlecones Body Donation? Bristlecones Body Donation (Bristlecones) is an organization that coordinates whole body donation for scientific research. We currently accept human body donations in the state of Washington, and companion animal body donation in the states of Washington and Oregon. We cannot guarantee that a donation will be used for any specific study or purpose. However, most of our work supports research focused on how the brain works. This type of research can lead to better treatments for brain diseases.

What is body donation for advanced brain research? Some advanced brain research requires the brain to be preserved as quickly as possible, after death with dignity (Medical Aid in Dying, MAiD). Fast preservation reduces damage caused by a lack of oxygen. This brain preservation can be greatly helped by medication that prevents blood clotting and by medical imaging of the patient's brain before MAiD. We can only accept this type of donation if we are informed at least two weeks before the planned MAiD date. We will also need to ensure that the Donor is not infected with certain pathogens. This is to protect Bristlecones staff and researchers. If you plan to donate the body for advanced brain research, please contact us as soon as convenient.

Who can choose to donate the body? Any adult can choose to donate their own body after death. Another Authorized Person—for example, a relative—can also give consent. Bristlecones does not impose any limitations, such as age or medical condition. However, Donor's body must be in our care within 48 hours of death, and the body cannot be embalmed. We currently accept human body donations if the death occurred in the state of Washington. If you are interested in body donation for advanced brain research and the Donor is not currently a Washington resident, but plans to be one in the future, and [utilize the Washington Death with Dignity Act](#), please contact us as soon as convenient.

What costs will be covered by Bristlecones Body Donation? If we accept the donation, we will cover costs directly related to the donation process and all the costs associated with the distribution of anatomical material for research. The cost we will cover includes any testing required by us and transportation. Bristlecones will also provide, free of charge, the death certificate—if we receive the information needed. We will cover the cost of cremation of partial remains—the part of the body that remains after anatomical material is removed for research. Based on your choice, we will also cover either scattering the cremated partial remains or returning them to a designated recipient. We will not be responsible for any other costs—this includes any expenses that occur after we return the partial remains.

What additional costs can be covered if the body is donated for advanced brain research? If such donation is accepted, and you choose return of partial remains, we will also cover preparation of the remains for viewing and transfer to a funeral home, required authorizations, a minimum shipping container, and transport to a location in Oregon or Washington. This includes transport to the airport. We do not cover costs of visitation, services, ceremonies, or air transportation.

What costs will be covered if the donation cannot be accepted or the consent is revoked? If this happens, Bristlecones will not charge for any expenses, such as the cost of blood tests, that we require to consider the donation. However, Bristlecones Body Donation or its associated agents will not be responsible for any costs related to the death or disposition of the remains. Alternative arrangements will need to be taken for the disposition of the Donor's remains and for any associated costs.

What will happen to the body and can any remains be returned? All human material will be treated with respect and following strict ethical standards. We review the details of the planned research to ensure these standards will be followed before we distribute anatomical material to scientific organizations. These organizations may keep the material long-term and may not return it to us. They must follow both their agreement with us and all laws that apply to human remains. Unless you make another choice, we will cremate any anatomical material that remains with us, or is returned to us, and is no longer needed for research. We will then scatter respectfully these cremated remains. You may also choose for them to be returned to a designated recipient. We prefer this option as it will allow us to express our gratitude in person. If you donate the body for advanced brain research, we may remove certain

anatomical material after preservation. This may include the brain and other organs or tissue. The remaining portion of the body can be returned, if you choose this option.

Is whole body donation compatible with organ or tissue donation for transplantation? No. Whole body donation to our organization is not compatible with organ or tissue donation for transplantation or treatment. Under no circumstances will the donated tissue, organs, or other anatomical material be implanted in humans or animals.

Can the decision to donate the body be changed? Yes, it can be changed at any time before the donation takes place. Please inform us in writing.

Who is an Authorized Person? An Authorized Person is the person giving consent for body donation and the disposition of remains. The law specifies the order of priority—priority classes. The Donor or their authorized health representative would have a higher priority than a spouse, then adult child, parent, adult sibling, adult grandchild, grandparent, and so on. If the Donor's wishes are known, they must be followed. A person in a lower priority class can give consent only if members of all higher classes are not reasonably available. An Authorized Person can give consent even if there are several people in the same priority class and some of them object. In this case, we ask you to fill out the form Additional Next of Kin.

If the Donor is alive, what steps should be taken? Please let your loved ones know that you have chosen whole body donation for science. This helps them contact our organization when needed. Because we focus on brain science, it is important to reduce any damage to the brain after death. If you plan to donate your body for advanced brain research, please contact us as soon as convenient. This will allow us to discuss the details of the process with you.

How is confidentiality maintained? We strictly follow confidentiality guidelines for all protected health information. Before sharing any biomedical data or tissue with research institutions, we remove all information that could identify an individual.

Will Bristlecones Body Donation always accept the donation? No. To protect our staff, we are unable to accept donations from people with certain active infections. In emergency situations or due to unforeseen circumstances at the time of death, we may be also unable to accept the donation. In such cases, we may be able to provide information about other organizations that

could accept the donation. However, we cannot guarantee that these organizations will be able to accept it.

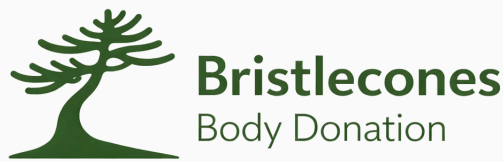
What will happen to any personal effects? Any personal possessions or valuable materials, such as dental gold, jewelry or medical devices, should be claimed before body donation. If they are not claimed, they may be destroyed or may not be recoverable. Unclaimed items will be disposed of in a lawful manner. This may include recycling or donation to charitable organizations, with no financial benefit to Bristlecones or any crematory.

How and when will the death certificates be received? If you provide the information needed for the death certificate, we will file for and provide one death certificate. Once we receive it, we will mail it to the designated recipient. The required information depends on the state. We will send you the correct form after you register. If the Donor is alive, some fields will need to be left blank.

Can Bristlecones determine the cause of death or any pathologies? No. We do not determine the cause of death or diagnose any medical conditions. We recommend that families consult medical professionals if they need this information.

Will you contact me after I submit the documents? We will confirm that we have received your documents. We may also contact you if we need additional information. Unless you tell us otherwise, we will first contact you by email, then by phone, and finally by mail.

Who can I contact with questions? Please email info@bristlecones.org or, if you prefer, call us at 503 847 1477. We are happy to answer any questions and guide you through the registration and donation process. A copy of the signed forms can be provided to the Authorized Person at any time.



Informed Consent for Whole Body Donation

Donor's Full Legal Name: _____

Donor's Date of Birth (MM/DD/YYYY): _____

Donor's time of death, if it has occurred (MM/DD, HH:MM): _____

I hereby provide consent for body donation after the death of the Donor to Bristlecones Body Donation (Bristlecones). I have had adequate time for consideration and all my questions have been answered to my satisfaction. I confirm that the donation is motivated by altruistic reasons, without any compensation to the Donor, Authorized Person (where different from the Donor), or the Donor's estate.

I understand that signing this consent form does not guarantee acceptance of the donation, and that Bristlecones may not be able to accept the donation in emergency situations or due to other unforeseen circumstances at the time of death. I understand that the Donor's blood samples will be tested for infections, and that positive results will be reported to the relevant state authorities if required by law.

I understand the costs that will be covered by Bristlecones if the donation is accepted, as outlined in the accompanying *Information about Body Donation*. I also understand that if consent for body donation is rescinded in writing, or if Bristlecones is unable to accept the donation for any reason, then the Authorized Person will be fully responsible for making alternate arrangements for the disposition of the Donor's remains, including any associated costs.

The Donor's body may be preserved or dissected to prepare anatomical material for further research. Images and videos may be recorded for the purposes of research and education, while protecting the Donor's privacy and dignity. I authorize the storing and processing of the Donor's personal and medical information for as long as needed. This data will be accessed and

stored securely, and shared only in a way that does not permit the identification of the Donor. Anatomical material will be provided to research institutions to advance scientific knowledge and may be kept indefinitely to enable future research. No rights, title, or interest in any such results, findings, or intellectual property shall vest in the Donor, the Donor's estate, or any party claiming through or on behalf of the Donor.

Unless the body is donated for advanced brain research and a request is made to return partial remains by completing the necessary document, I authorize the cremation of any anatomical material that remains at Bristlecones, or is returned to it, and is not needed for further research. These cremated partial remains will be scattered respectfully, unless I request that they be picked up or mailed to a designated recipient by completing the necessary document.

By signing and marking one of the options below, I confirm, to the best of my knowledge, that I am the Authorized Person with the authority to consent to body donation and disposition of remains.

- I am an Authorized Person belonging to a group of individuals with equal authority to consent to anatomical donation, and one or more persons in the same group object to the donation. I have completed the form *Additional Next of Kin*.
- I do not need to complete the form *Additional Next of Kin* because I am the only person in my priority group, or no one in my priority group objects.

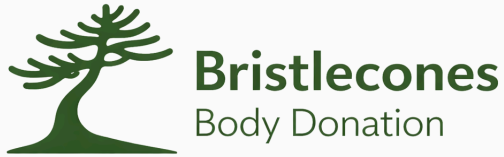
Name: _____

Signature: _____ Date: _____

Mailing Address:

Phone: _____ Email: _____

Relationship to the Donor (or "Self" if completing for yourself):



Donor History

The information you provide here will be kept confidential and is needed to help maximize the benefits of the donation for research. Please fill out the Donor's health history as accurately as possible. If any significant changes occur later, please let us know. If the answer to any question is "Yes," please provide details in the space provided.

Any implanted devices (for example, a pacemaker)? No Unknown Yes

Any surgery on the brain, head, neck, or chest? No Unknown Yes

Any history of radiation (IV or implanted)? No Unknown Yes

Any long-term infections like HIV, hepatitis, TB, or Creutzfeldt-Jakob Disease? No Unknown Yes

Any neurologic or psychiatric diagnoses, such as shaking, trembling, uncontrolled movements, poor coordination, dementia, severe loss of memory or other cognitive functions?

No Unknown Yes

Any diagnosis with a terminal condition?

No Unknown Yes

Questions for donors in a terminal condition or deceased

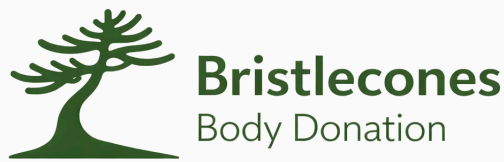
Was the donor prescribed with any blood thinners or anticoagulants (e.g. heparin, Coumadin/warfarin, or Eliquis/apixaban)?

No Unknown Yes

Is/was the donor on life support with a ventilator/breathing machine?

No Unknown Yes

What is the terminal condition or most likely cause(s) of death if known or suspected?



Return of Partial Remains

I hereby make the following choice regarding the return of partial remains, by checking one of the options below:

- 1. Cremation and respectful scattering of cremated partial remains (default option)
If you select this option or no option at all, Bristlecones Body Donation will respectfully scatter the cremated partial remains.
- 2. Cremation and return: cremated partial remains to be picked up
A designated recipient may pick up the cremated partial remains directly from Bristlecones.
- 3. Cremation and return: cremated partial remains to be mailed
Bristlecones will mail the cremated partial remains to a designated recipient in the United States. Note that Bristlecones does not accept responsibility for delay, loss, damage, or misdelivery once the remains have been handed to the postal carrier.
- 4. Return of partial remains for burial or cremation
This option is only possible for whole body donations for advanced brain research. The partial remains will be prepared for viewing and transfer to a funeral home.

If you choose option 2, 3, or 4, we will attempt to arrange the pickup, mailing, or transfer of partial remains once the donation process concludes. If the Recipient of the cremated partial remains cannot be reached, we will hold the remains safely for up to one year so that alternative arrangements can be made. After one year, the remains will be respectfully scattered. Please provide the contact details for the Recipient if you choose option 2, 3, or 4:

Recipient's Name: _____

Recipient's Relationship to Donor: _____

Recipient's Phone _____ Email: _____

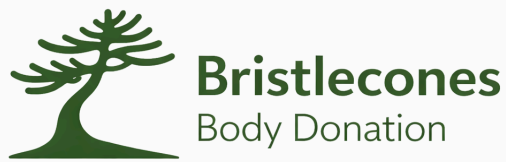
Recipient's Mailing Address (only necessary if mailing has been chosen):

My signature indicates my informed, voluntary decision about the return of partial remains. I acknowledge that I have had the opportunity to review and ask questions about the options above.

Name: _____

Signature: _____ Date: _____

Relationship to the Donor (or "Self" if completing for yourself):



Witnesses for Authorized Person Unable to Sign

Please complete this form only if the Authorized Person—who may be the Donor—is physically unable to sign the informed consent document at the time of signing, but is mentally competent. In this situation, this form may be signed at their direction by another person and witnessed by a *Disinterested Witness*, a witness other than:

- (A) A spouse, state registered domestic partner, child, parent, sibling, grandchild, grandparent, or guardian of the Authorized Person; or
- (B) An adult who exhibited special care and concern for the Authorized Person; or
- (C) A person to whom an anatomical gift could pass.

This consent document has been signed at the direction of the Authorized Person because they are physically unable to do so.

Authorized Person's Name: _____

We hereby witness this consent and verify:

- (1) That this consent document was signed at the direction of the Authorized Person, who is mentally competent.
- (2) That the Authorized Person is physically unable to sign this consent document.
- (3) That we are both adults and at least one of us is a Disinterested Witness.

Witness 1 Name: _____

Witness 1 Signature: _____ Date: _____

Witness 2 Name: _____

Witness 2 Signature: _____ Date: _____



Additional Next of Kin

Please complete this form only if you are an Authorized Person who belongs to a group of people with equal right to consent to the donation, and at least one person in that group objects. For example, this may apply if the Donor has several adult children, siblings, grandchildren, or grandparents who share equal priority. If this is the case, please list the persons who belong to the same group. We will proceed with the donation only if the majority agree. Please remove or add pages as necessary, and initial the last page.

Name: _____

Relationship to the Donor: _____

Address:

Phone: _____ Email: _____

Objects to donation Does not object Unknown

Name: _____

Relationship to the Donor: _____

Address:

Phone: _____ Email: _____

Objects to donation Does not object Unknown

Name: _____

Relationship to the Donor: _____

Address:

Phone: _____ Email: _____

Objects to donation Does not object Unknown

Name: _____

Relationship to the Donor: _____

Address:

Phone: _____ Email: _____

Objects to donation Does not object Unknown

Name: _____

Relationship to the Donor: _____

Address:

Phone: _____ Email: _____

Objects to donation Does not object Unknown

Name: _____

Relationship to the Donor: _____

Address:

Phone: _____ Email: _____

Objects to donation Does not object Unknown

Name: _____

Relationship to the Donor: _____

Address:

Phone: _____ Email: _____

Objects to donation Does not object Unknown

Name: _____

Relationship to the Donor: _____

Address:

Phone: _____ Email: _____

Objects to donation Does not object Unknown