Pre-Transplant Evaluation

Joanna Gundrum, BSN, RN-BC, CCTC



Learning Objectives

Upon completion of this presentation, ESRD Professionals will be able to:

- Understand the recipient's evaluation process, from the evaluation to being placed on the waitlist
- Learn what testing is required during the evaluation phase
- Learn about contraindications to transplantation and our center's current Selection Criteria
- Describe the two types of kidney transplants
- Understand the organ acceptance process

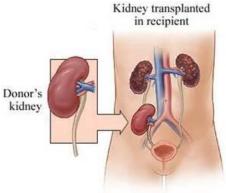


Treatment Options

- Hemodialysis/Peritoneal Dialysis
- Kidney Transplant
- No Dialysis or Transplantation







Risks & Benefits

Dialysis	Transplant
Structured	Flexibility
Maintain immune system	Suppress immune system
Strict diet	Less strict diet*
Many medications at dialysis	Take medications <u>daily</u> to prevent rejection
Cannot skip treatments	Cannot skip follow-up appointments
Increased mortality rate	Increased risk of cancer (skin most common)
Qualify for Medicare	Based on age/reason, may no longer qualify for Medicare three years post-transplant



Transplant Process

Evaluation

Waitlist

Re-evaluation

Acceptance & Transplantation



Initial Evaluation Visit

- Patient Education Presentation that outlines the Evaluation, Transplant,
 Expectations: Approximately 5 hours
- Multidisciplinary Team Sessions
- CXR, EKG, Bloodwork
- Testing/consults
- Provide access to patient's health information online-MyChart
- <u>Priority</u>: Ensure that recipient is healthy enough to undergo kidney transplantation



Transplant Multidisciplinary Team

Transplant Surgeon

Transplant Nephrologist

Transplant Coordinator

Registered Dietitian

Social Worker

Pharmacy

Financial Coordinator

Bariatric Center for BMI > 35

Other disciplines engaged as needed



Evaluation Requirements for Listing

- Tests/Consults
 - Age specific cancer screenings
 - Colonoscopy– all over 50
 - PSA- men >45
 - Mammogram women >40
 - Pap smear women > 18
 - EKG, Echocardiogram, Stress test
 - Consultations and other testing as indicated by medical history
 - Lab tests
 - CT abdomen and pelvis
 - CT Scan of the chest (for extensive smoking history)
- Once ALL testing is completed and reviewed, then presented to the committee.



Transplant Team Assesses for Following Contraindications

- Active/Chronic infection (i.e. TB) except cases of chronic Hepatitis
- Irreversible Cardiac Disease
- Severe peripheral vascular disease (without an appropriate target vessel for transplantation)
- Severe pulmonary hypertension
- Moderate pulmonary hypertension is a relative contraindication to be evaluated on a case by case basis by medical team
- Active Psychosis
- Evidence of non-compliance
- Malignancy based on type, histology and staging
 - History of melanoma
- Advance chronic liver disease



HackensackUMC Organ Transplant Selection Criteria

- Our center currently does not transplant:
 - Patients over 80 years old (relative)
 - Patients with active cancer
 - Patients with current substance abuse
 - Patients with Body Mass Index > 40 (relative)
- Recent Updates:
- HIV positive patient are be evaluated on a case by case basis



Waitlist

- UNOS United Network for Organ Sharing is the organization that manages the nation's organ transplant system under contract with the federal government.
 - Manages the national transplant waiting list, matching donors to recipients 24 hours a day, 365 days a year.
 - Maintaining the database that contains all organ transplant data for every transplant event that occurs in the U.S.
- Wait time clock begins when the patient is listed or dates back to dialysis start time.
- Most recent dialysis start date is used for patients who were transplanted.
- Wait time varies per region
- Average wait time for kidney in NJ is approximately 4-5 years.
- Average wait time for kidney at Hackensack Organ Transplant is 1-3 years.



Multi-listing & Transfers



Multi-listing gives patients more access to deceased donor pools

Pre-dialysis patients may transfer time to another center



Waitlisted

- Written notification of listing status
- Monthly sample to Sharing Network
 - 10ml red top tube
 - Label: Patient's first, last name, DOB, last 4 digits of social security number must be included
 - Mail before the 10th of every month
- Quarterly updates sent to dialysis centers on patients' statuses
 - Evaluation In Process
 - Waitlist Active/Inactive
 - Waitlist Removed/Evaluation Discontinued
- Monthly samples only needed for ACTIVE waitlist patients

NJ Sharing Network Monthly Blood Packet Presented by: Vanessa Baque

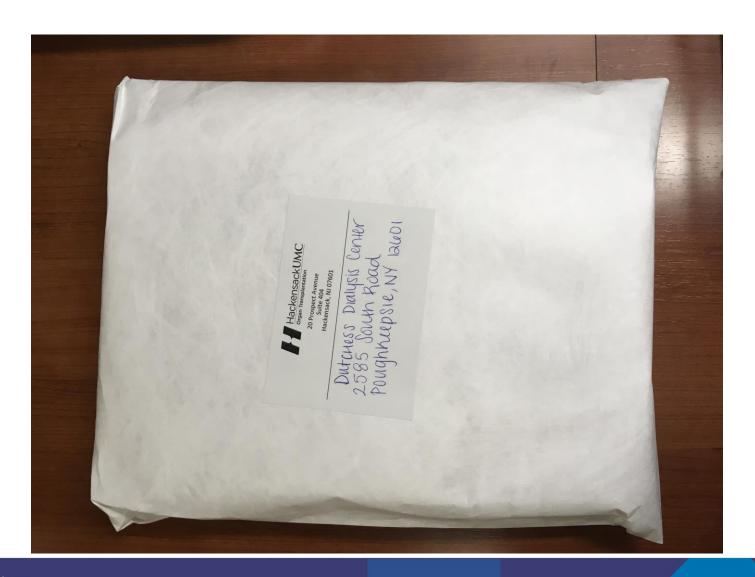


Office Coordinator

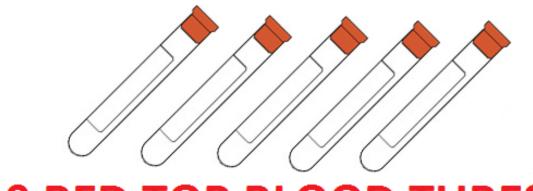
Overview on Monthly Blood Packets

- Red top tubes
- Patient labels
- Requisition forms
- A Canister
- FedEx Shipping Labels

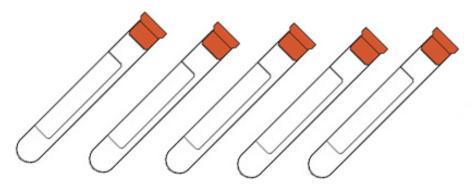








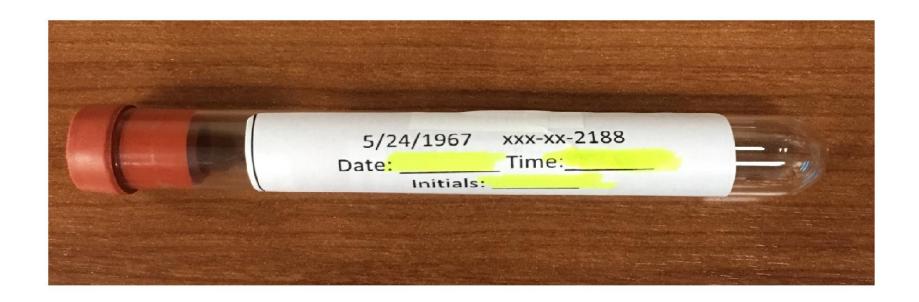
10 RED TOP BLOOD TUBES



PATIENT LABELS

BOM TRADY	BOM TRADY	BOM TRADY
1/1/1900 123-456-7899	1/1/1900 123-456-7899	1/1/1900 123-456-7899
Date: Time:	Date: Time:	Date: Time:
Initials:	Initials:	Initials:
BOM TRADY 1/1/1900 123-456-7899 Date: Time: Initials:	BOM TRADY 1/1/1900 123-456-7899 Date: Time: Initials:	BOM TRADY 1/1/1900 123-456-7899 Date: Time: Initials:
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Date:Time:	Date:Time:	Date: Time:
Initials:	Initials:	Initials:











CLIA ID # 311	54 Fax: 908-516-5554			
Redrav	ly Antibody Screen I w Sample	Lequested (PRA)		
Patient Name:	Antonio M Martin	S	Patient SS#:	143-58-3836
Transplant Center:	Hackensack Univers	ity Medical Center	Physician: Michael J.	Goldstein, MD
Dialysis Center: Maintenance Dia	alysis History			
Start	End Typ	e	Comments	Center
5/31/2017			MWF	DaVita Matawan Dialysis
DaVita Mat Phone: 8 Address: 764 NJ-3 SUITE A	4	on	Fax: 732-566-3 6	532
X				
Specimen Type: B	lood X Date:	Time:		
Organ Type: Kidn	ey			
If W De In	eived a blood/blood of yes, when? hat was transfused? esensitizing Protocol: munosuppressive Thaccinations:	N/A	ion? No How much?	

SPECIMEN REQUIREMENTS AND INSTRUCTIONS

- 1. For each patient active on the renal recipient list, draw 1 10ml tube of clotted blood, preferable before patient is dialyzed, and mail it to the Transplant laboratory by the 10th of each month.
- 3. Place the specimen tubes in the plastic specimen bag. Wrap the requests around the smaller container and place inside mailer..
- 4. Send the specimen immediately to the address below. Please do not store, centrifuge, or separate the serum. Send to: New Jersey Organ and Tissue Sharing Network

Transplant Laboratory 691 Central Ave New Providence, NJ 07974

Specimens with no collection date or SSN, illegible or incomplete labels and those without request forms must be discarded







In Conclusion

- It's very important that the blood tube that you are shipping out to the sharing network is correctly labeled with the patient's information.
- MAIL BEFORE THE 10th of every month.



Re-evaluation

- Goal of re-evaluation
- Update patient's records annually
- Maintenance test results
 - Mammo, pap, colonoscopy, cardiac testing
- Patients & Dialysis centers encouraged to inform us of any changes in
 - Health status changes
 - Address
 - Phone #'s
 - Insurance
 - Dialysis center
- May require a status change



Donor Types

Deceased Donors

- Usually no relation to recipient
- Donor quality is scored based on estimated longevity of the kidney (KDPI)
- Case reviewed by transplant surgeon and patient decides when to accept an organ offer

Living Donor

- Relative, friend, spouse, neighbor, acquaintance
- Willing to donate without payment or pressure from recipient
- Center ensures that donation is in best interest of the donor

After Organ Acceptance

- Patient on dialysis may need to be dialyzed right before their surgery
- Coordinator on call will contact the dialysis nurse to let him/her know if the patient needs to come off the machine earlier than scheduled time
- Patient is notified by coordinator about the time to arrive at the hospital for renal transplant
- After surgery, dialysis center is notified that the patient has been transplanted
- At times, transplanted kidney does not function immediately

References

(2016). Frequently Asked Questions about Kidney Transplant Evaluation and Listing. *UNOS*. Retrieved from https://www.unos.org/wp-content/uploads/unos/Kidney_Eval_Brochure.pdf

LaPointe Rudow, D., Ohler, L. & Shafer, T. (2006). *A Clinician's Guide to Donation and Transplantation*. Applied Measurement Professionals, Inc. : Lenexa, KS

"What Every Patient Needs To Know" United Network For Organ Sharing, Copyright 2009, Amanda Pfeiffer et all.

