The Transplant Coordinator shall see each transplant recipient each day that she is on duty, from day of transplant to day of discharge.

To provide the patient with continuity of care, to facilitate discharge planning and patient education, and to act as liaison with the physicians and to be available to assist the patient.

The Transplant Coordinator will make rounds on a regular basis, reviewing the charts, seeing the patients, and identifying patient needs.

The Transplant Coordinator will facilitate multidisciplinary rounds on hospitalized recipients, interacting with all members of the transplant team to enhance communication related to the plan of care and documenting rounds in the patient record.

The Transplant Coordinator will assist in the care and/or teaching of the patients as is indicated.

Prior to discharge, the Transplant Coordinator reviews all aspects of home care with the patient, and if possible, his/her family. This discussion will include:

- Contact numbers of transplant program staff that should be contacted for questions.
- Clinical signs and symptoms of when to call the doctor, monitoring for rejection.
- A plan for addressing relevant psychosocial issues; if applicable.
- Activity restrictions and limitation.
- Need for coordination of other health services; if applicable.
- Medications and administration including patients schedule for taking medications and how to obtain medications.
- Assistance required to access local medical care, equipment or support; if applicable.
h. Necessity of follow up clinic/lab visits and medication
   i. Documentation is done on the multidisciplinary patient education form/progress notes in the patient’s chart.