


Name of Policy:	<u>Renal Transplant Conference/Candidate Selection</u>	 Effective Date: 11/1/2021 Initial Effective Date: June 15, 1990
Policy Number:	3364-140-20	
Department:	Kidney Transplant Administration (Nursing Service)	
Approving Officer:	Chief Nursing Officer Director, Renal Transplant Program	
Responsible Agent:	Transplant Coordinator	
Scope:	The University of Toledo Medical Center	
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy		<input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy

(A) Policy Statement

A multidisciplinary Transplant team conference will be held on a regular basis.

(B) Purpose of Policy

1. Forum for review for new ESRD patients who are potential renal transplant candidates.
2. Forum for review and update of patients on waiting list for renal transplant.
3. Forum for review of renal transplanted patients.
4. Forum for review of living donor candidates.

(C) Procedure

Frequency of Conferences

1. Renal transplant conferences will be held on a weekly basis at UTMC.
2. In the event of the need for an emergency meeting, the UTMC Patient Selection Committee will be convened by the Transplant Administrator.
3. The Transplant Coordinator or other designated individual will prepare the agenda, make arrangements and maintain minutes of all meetings.

Attendance – Members of the UTMC Patient Selection Committee will be appointed by the Executive Director, Transplant Director and/or the Transplant Medical Director

The primary Transplant team participants and their responsibilities;

1. Kidney Transplant Surgeon(s) – evaluates potential renal transplant patients, provides work up plans, reviews medical testing and provides input into listing of patients. Performs renal transplant surgery. Provides post op follow up care.
2. Transplant Nephrologist – evaluate potential renal transplant patients, provide work up plans, review medical testing and provide input into listing of patients. Provide outpatient care to post transplant patient.
3. Transplant Coordinator – Provide orientation to potential candidates on a monthly basis.

4. Pre-Transplant Clinical Coordinator – coordinate the pre-transplant process and present patient at transplant conference. Assist with listing process and annual evaluations.
5. Post-Transplant Clinical Coordinator – provides input on patients post-transplant and discusses issues needing resolution.
6. Living Donor Clinical Coordinator – coordinates all aspects of potential donor work up and presents donors for appropriateness of donation.
7. Social Worker – performs psychosocial evaluation and presents data to transplant committee.
8. Financial Coordinator – provides financial education to patients regarding expectations post transplant for medications and insurance coverage. Any problems identified are addressed at transplant committee.
9. Independent Living Donor advocate/ advocate team-ensure protection of the rights of living donors and prospective living donors.
10. Tissue typing representative – present any data related to concerns regarding potential donation.
11. Pharmacy representative – address any pertinent pharmacy issues.
12. Clinical nutrition –address any pertinent nutrition issues.
13. Additional members on the committee are considered ad hoc and are invited to attend all meetings. Specific requests are made for attendance when patients being presented require further input from these specialties. They include but are not limited to representatives from the following areas:

Anesthesiology	Organ procurement	Rehabilitation Medicine.
Cardiology	Pathology	Renal Nursing Unit
Chronic dialysis units	Pediatrics	Respiratory therapy
Hepatology	Physical Therapy	Vascular surgery
Immunology	Pulmonary	Hospital Administration
Infectious Disease	Radiology	

Method

1. After referral to UTMC for kidney transplant evaluation, the patient must attend an orientation session and see a transplant nephrologist or surgeon for a complete history and physical examination.
2. At the time of the transplant evaluation, the patient's psychosocial and financial evaluations are completed.
3. The transplant coordinator arranges all necessary testing and consultations to complete the transplant evaluation.
4. Once the evaluation and testing results have been received, the transplant coordinator presents the patient at the Transplant Selection Committee meeting. This includes a brief history and pertinent medical and social information in a prescribed format which will help to make a decision regarding suitability for transplantation.
5. Patient's suitability for renal transplantation is discussed by the committee members.
6. Patient is accepted or declined for transplantation by a vote of the committee.
 - a. If declined, adequate documentation should be made in the minutes of the conference.

