### Policy Statement

At the time of their initial evaluation appointment, all prospective transplant recipients and donors will be assessed by a social worker regarding a history of mental health problems, substance use/abuse, and alcohol intake.

### Purpose of Policy

To identify psychosocial issues which may have an impact on patient compliance while awaiting transplant and/or after a transplanted organ is received.

### Scope

This policy applies to members of the medical staff performing transplantation procedures at the University of Toledo Medical Center, UTMC Personnel and any other persons involved in the transplantation programs of the University of Toledo.

### Procedure

1. **Alcohol Use**

   a. Those individuals who admit to heavy alcohol use in the last 6 months as defined by a daily consumption of three drinks or more will be considered likely to have indications of alcohol abuse or dependency.

   b. They will be referred to a chemical dependency specialist for a formal diagnosis and treatment recommendations and are asked to notify the social worker when an appointment has been scheduled. This initial consultation will be reimbursed by the Kidney Acquisition Fund.

   c. An assessment will then be requested from the chemical dependency specialist following this appointment, including any treatment recommendations.

   d. Any individuals who are non-compliant with these treatment recommendations will not be eligible for transplant, or to participate as donors.

   e. Those individuals who resume heavy drinking while awaiting transplant will be immediately made inactive or removed from the list. They will be asked to again participate in an active recovery program or referred to another transplant center for re-evaluation.

   f. Those individuals who have a second relapse while awaiting transplant will not be eligible for relisting.
(2) Substance Use/Abuse

(a) Those individuals who admit to any substance use/abuse in the last 6 months or demonstrate current behavior which is highly suggestive of such use even in the absence of any admission may be given a random toxicology screen. They will also be educated as to the University of Toledo Medical Center's expectations regarding further drug use and may be asked to sign a contract with the University of Toledo Medical Center Transplant Program spelling out the expectations.

(b) The patient may be requested to do periodic toxicology screen. This toxicology screen will be done at University of Toledo Medical Center

(c) Those individuals presenting with a negative toxicology screen may proceed with the rest of their transplant work up immediately and may be presented for listing as soon as medically cleared.

(d) Those individuals presenting with a positive toxicology screen will require further assessment.
   - In the case of a toxicology screen positive for pain meds, individuals will be asked to indicate prescribing physician, and physician will be contacted to verify accuracy of this prescription.
   - If this is not a prescribed medication, those individuals, as well as those presenting with a toxicology screen positive for illegal substances, will be referred to a chemical dependency specialist for a formal diagnosis and treatment recommendations and are asked to notify the social worker when an appointment has been scheduled.
     - The initial consultation will be reimbursed by the Kidney Acquisition Fund.

(e) An assessment will then be requested form the chemical dependency specialist following this appointment, including any treatment recommendations. Notification will be sent to their referring physician.

(g) Once this plan of care has been successfully completed and a report from the therapist attesting to this has been obtained, these individuals can then proceed with the rest of their work-up.

(h) Any individuals who are non-compliant with these treatment recommendations will not be eligible for transplant or to be donors.

(i) Those individuals who fail to maintain complete abstinence while awaiting transplant will be immediately made inactive or removed from the list. They will be asked to again participate in an active recovery program or referred to another transplant center for re-evaluation.

(j) Failure to submit to random blood or urine screening is considered to be evidence of a relapse.

(k) Those individuals who have a second relapse while awaiting transplant will not be eligible for relisting.

(3) Mental Health Issues

(a) Individuals will be referred to a psychiatrist or psychologist for further assessment and treatment recommendations if they:
   - have received inpatient or outpatient psychiatric treatment within the last 12 months
   - have attempted suicide within the last 12 months
   - demonstrate evidence of dementia
   - were non-compliant with their treatment regimen following a previous transplant
   - have experienced functional limitations or difficulty in their ADL's on a continuing or intermittent basis during the last 12 months due to a mental disorder

(b) They will be asked to notify the social worker when an appointment has been scheduled.

(c) The initial consultation will be reimbursed by the Kidney Acquisition Fund.

(d) A written report will then be requested from the psychologist or psychiatrist following this appointment assessing the individual's ability to commit to a complex medical regimen.

(e) Notification will be sent to their referring physician.

(f) If therapy or medications are recommended, a report from the mental health practitioner attesting to the individual's compliance with and stability on this regimen will be obtained.

(g) These individuals can then proceed with the rest of their work-up.
(h) Any individuals who are non-compliant with these treatment recommendations will not be eligible for transplant or to be donors.

(i) Individuals who relapse while awaiting transplant will be immediately made inactive or removed from the list. They will be asked to again participate in a treatment program or referred to another transplant center for re-evaluation.

(j) Individuals who have a second relapse while awaiting transplant will not be eligible for relisting.

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<td>Monceca Smith MSN, RN</td>
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**Review/Revision Completed By:**

- Transplant Program
- Hospital Administration

**Next Review Date:** 5/1/2021

**Policies Superseded by This Policy:** Prior Referral for Renal Transplant Candidates for Psychiatric Evaluation that was departmental only.