


Name of Policy:	Management of the Recipient after Renal Transplantation	 <p>Effective Date: January 12, 2010 Initial Effective Date: April 29, 2009</p>
Policy Number:	3364-140-41	
Department:	Kidney Transplant Administration (Nursing Service)	
Approving Officer:	Associate Vice President/ Associate Executive Director Director, Renal Transplant Program Administrative Director, Renal Transplant Program	
Responsible Agent:	Transplant Coordinator	
Scope:	The University of Toledo Medical Center	
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Major revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy		

(A) Policy Statement

All renal transplant recipients will be under the care of a multidisciplinary team coordinated by the transplant surgeon throughout the pre-operative, operative, post-operative, and discharge phases of transplantation.


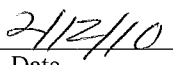


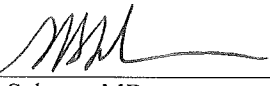
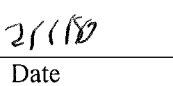
(B) Purpose of Policy

To ensure optimal care of the renal transplant recipient.

(C) Procedure

- (1) The multidisciplinary team will be represented by the following disciplines:
 - (a) Surgery
 - (b) Medicine (Transplant Physician or consulting physicians)
 - (c) Nursing
 - (d) Dietary Services, as needed
 - (e) Social Services
 - (f) Pharmacist, as needed
- (2) All patients will be seen by the Transplant Surgery team, Transplant Physicians, and Transplant Coordinator throughout hospitalization.
- (3) Each team documents their assessment, findings and care plan in the progress notes in the medical record.
- (4) The Transplant Coordinator facilitates communication between all members of the team whenever they are unable to do simultaneous rounds and documents the multidisciplinary care planning in the medical record.

(5) The Transplant Coordinator facilitates discharge planning and education (see Policy #3364-140-07)

Approved by:  _____ Norma Tomlinson, RN, MSN, NE-BC Associate Vice President Associate Executive Director	 _____ Date	Review/Revision Date: 1/12/2010
 _____ Michael Rees, MD Director, Renal Transplant Program	 _____ Date	
 _____ Steven Selman, MD Administrative Director, Renal Transplant Program	 _____ Date	
<i>Review/Revision Completed By:</i> <i>Transplant Coordinator</i>		Next Review Date: 1/12/2013
Policies Superseded by This Policy:		