

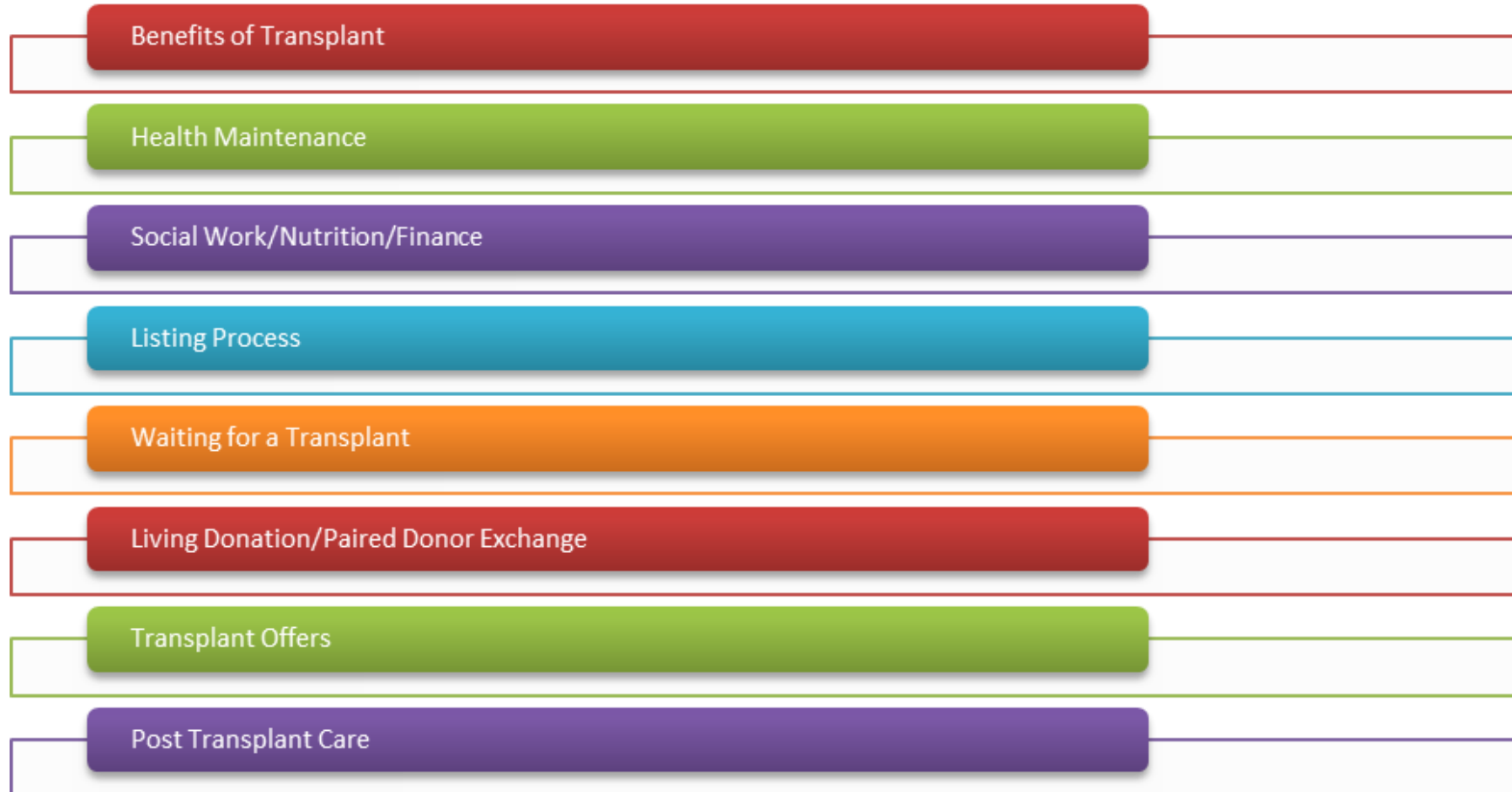
Kidney Transplant Education Session

Transplant Institute
University of Rochester Medical Center

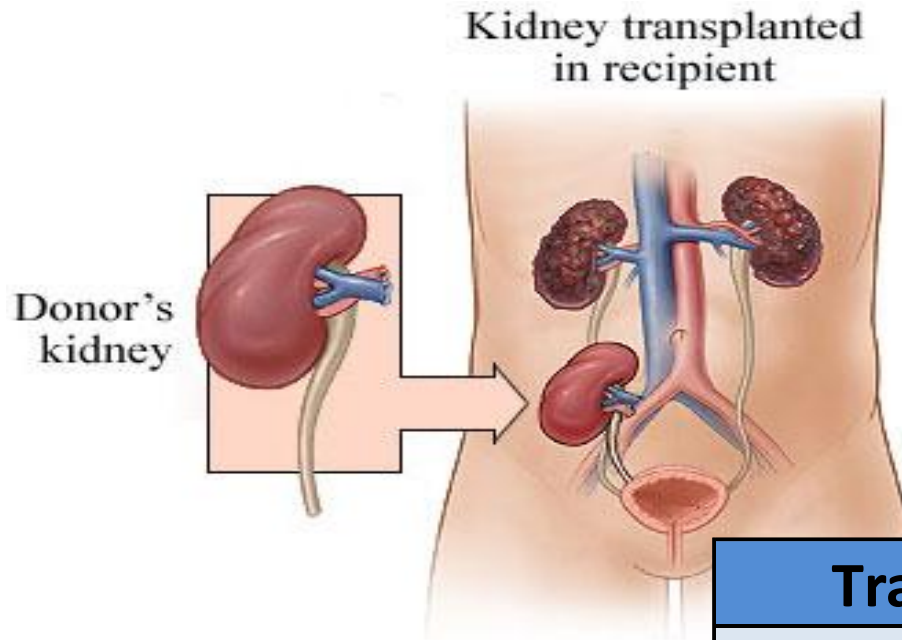
Our Surgical Transplant Team



Overview:



Benefits of Kidney Transplant:



Transplant vs. Dialysis

Better quality of life

Increased life expectancy

Less restrictive

What to Expect today

Evaluation Team Members:



Agenda for Evaluation:

- Provide education regarding transplant
- Determine if transplant is the best option for you
- Answer all questions that you may have



Medical/Psychosocial Hx



Physical Exam



Paperwork/Consents



Lab Tests/CXR/EKG



Agenda for Evaluation:

- Based on information collected, the team will determine what testing/items are needed to complete the evaluation
- You will be mailed a letter indicating what items need to be completed. A copy of the letter will also be sent to your Nephrologist, PCP, and dialysis center.
- Based on the results of the testing, additional tests or referrals may be needed

**You are NOT listed on the
transplant waitlist at the end of
your evaluation appointment**

Health Maintenance:

- **Dental**: Your dentist will need to sign an annual clearance form indicating you are free of oral infection and free of needing dental work that is a potential for causing infection.
- **PAP**: Contact your Gynecologist to keep this test up to date for sexually active females.

Vaccinations:

We recommend you receive the following vaccines:

- All age-appropriate vaccines
- Covid
- Pneumococcal
- Meningococcal vaccines- both types

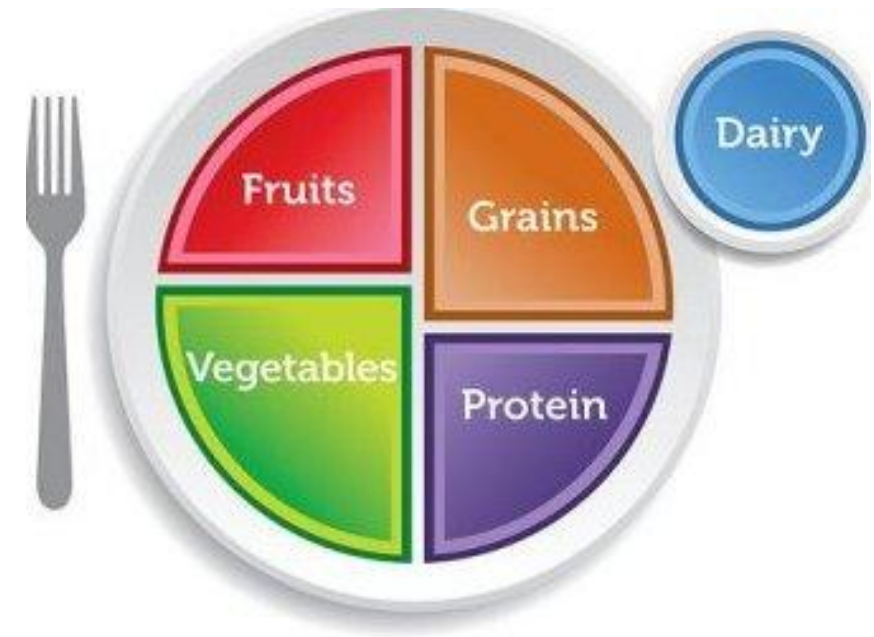
Social Work – Criteria for Transplantation:

- Solid support system. Includes support before, during and after transplant. Attend post-transplant in-hospital education, attend post-transplant clinic visits, assist with medications, help ensure medical compliance, and transportation.
- Medical compliance including treatments, appointments, medications, diet, and dialysis
- No tobacco or substance use
- Mental health issues need to be well controlled

Nutrition:

Interview will include:

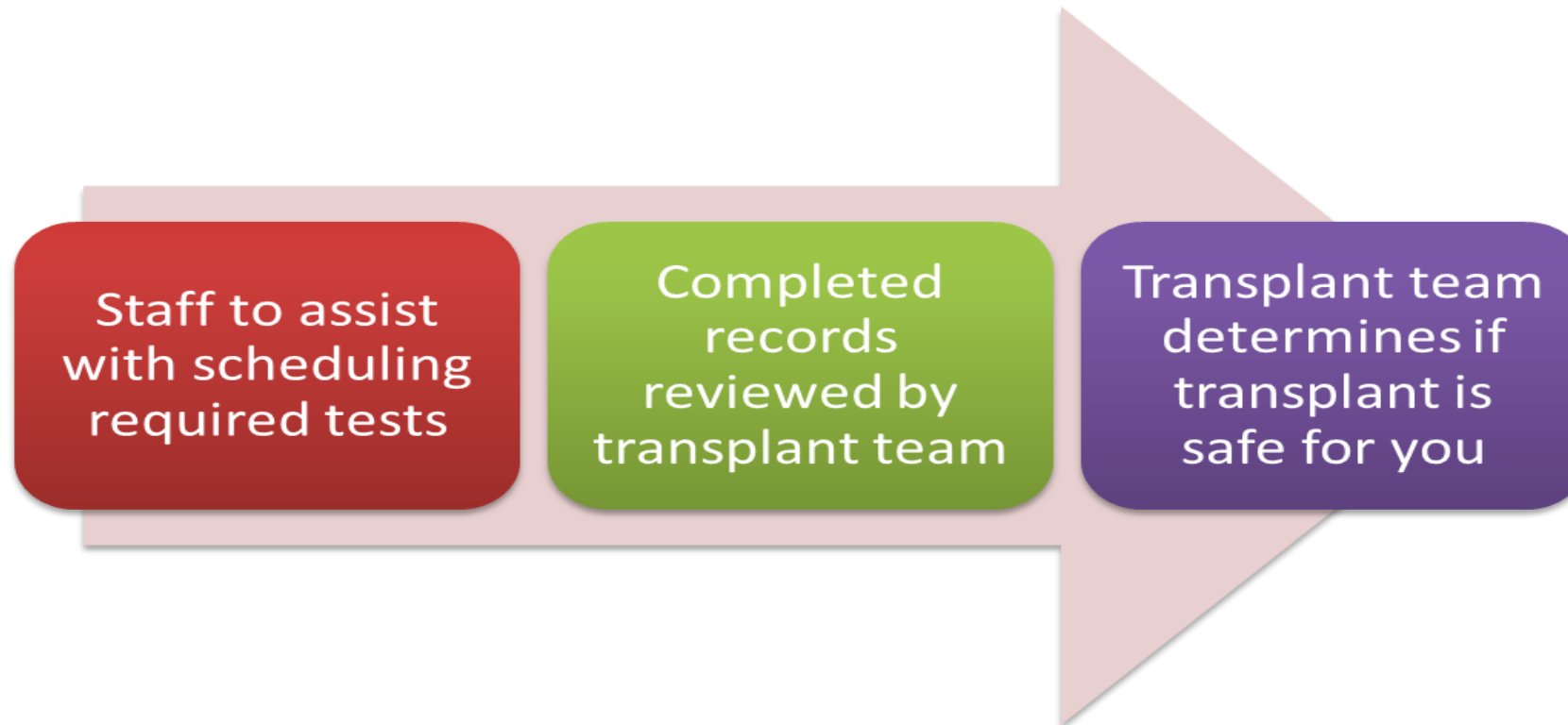
- Weight history, diet plan, eating habits, food allergies/intolerances
- Nutrition goals to stay healthy
- Weight goals
 - Gain if underweight/ weight loss if BMI >35
- Diet after transplant



Financial:

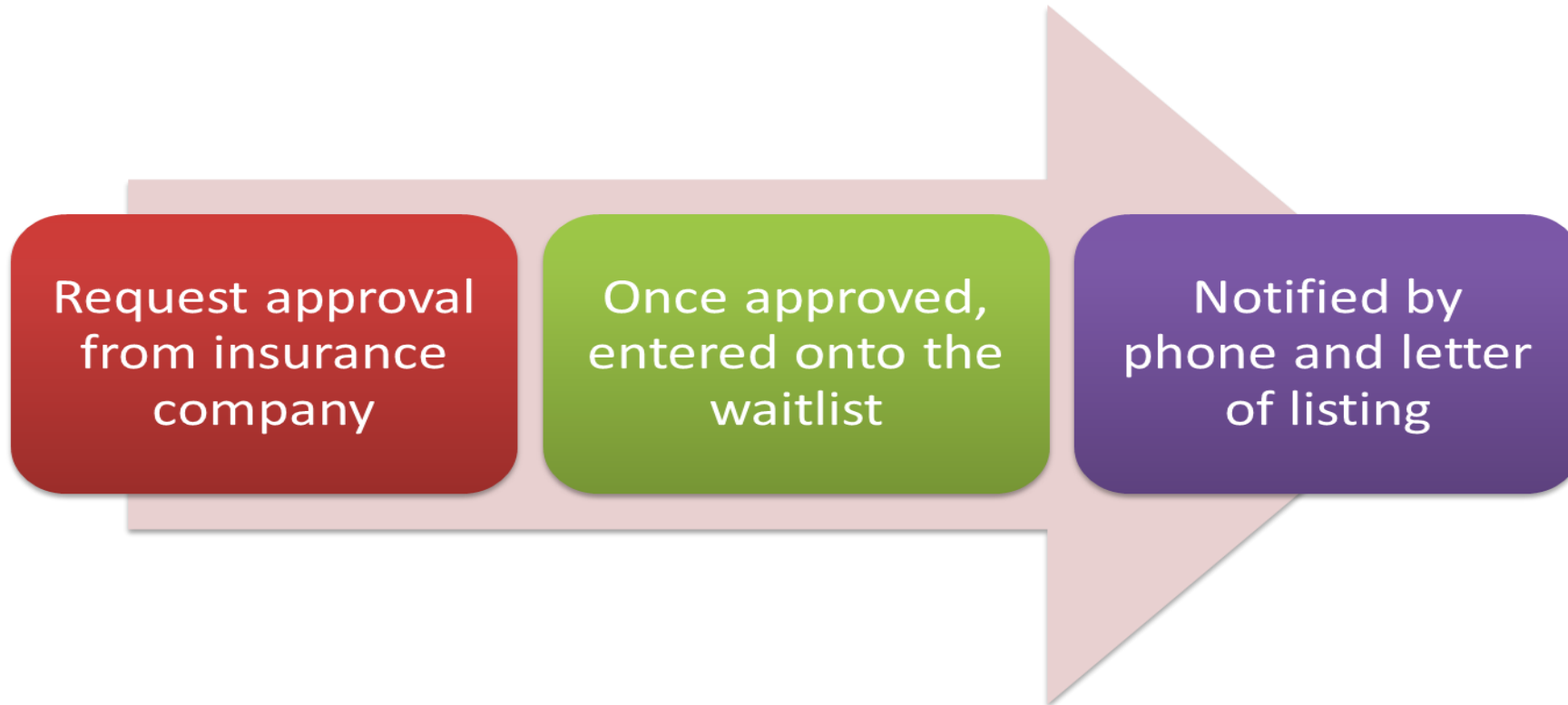
- The financial counselor (FC) will meet and discuss your insurance coverage, medication copay costs, and other potential other out of pocket costs. You will be responsible for paying your insurance premiums after transplant.
- It is important to call the FC prior to any changes or potential changes to your insurance coverage to prevent inactive status
- If your insurance becomes inactive, you will not be eligible for transplant until it is resolved

After the Evaluation/Listing Process:



All testing and other items specified at your evaluation need to be completed before initial review by the transplant team

After the Evaluation/Listing Process:



If it is determined that you are not appropriate to be placed on the transplant waitlist, you will also be notified by phone and letter explaining why

After the Evaluation/Listing Process:

- If you have not completed all the required items within one year, your evaluation may be closed and your nephrologist would need to refer you again
- Throughout the evaluation process, your RN Coordinator will be available to assist you and answer any questions

Please feel free to contact our transplant office at (585) 275-7753 with any questions that you may have

The Waiting List and Time:

- **Waiting time starts:**

- If on Dialysis - Date you started dialysis
- If not on Dialysis – Date you are listed



- **Multiple Listing/Transfer of Time:**

- If your insurance allows, you may be listed at multiple transplant centers
- You are able to transfer your wait time to another center if needed

Status on the Transplant Waitlist:

Status 1	Status 7
Active on the waitlist	Inactive on the waitlist
Can receive an organ offer any time	Remain on the waitlist but will not receive offers

You will be notified in writing and by telephone of any changes to your active status on the transplant waiting list

Two Paths To Transplant:

Type	Living Donation	Deceased Donation
Wait Time	Upon completion of donor evaluation	Variable, months to a few years
Surgery Date	Known in advance	Unknown
Average Organ Survival at 5 years	95%	90%
Efficiency	Works quicker	Potential for delayed graft function

Living Donation:

Anyone interested in living donation may contact our
transplant office:
(585) 275-7753

- ✓ The living donor will need your full name and date of birth when they call our office
- ✓ Initial step consists of basic blood work and compatibility testing

Paired Donor Exchange:

- Sometimes donors cannot donate directly to their recipient for a number of reasons:
 - Blood type incompatible
 - HLA incompatible
 - Age discrepancy
 - Size discrepancy
- Option of participation in Paired Kidney Donation (PDE)
- Voucher program
- URMCI participates in two PDE programs:
 - United Network of Organ Sharing (UNOS)
 - National Kidney Registry (NKR)

National Kidney Foundation Website Resources for Living Donation

www.kidney.org

Click on:

- I am a Patient
- Kidney Transplantation
- Information on Kidney Transplantation
- Finding a Living Donor
- How to Share Your Story
- Sample letter or social media post

Deceased Kidney Transplant Offers:

- You need to be available by phone at all times so that when an organ becomes available you can be reached
- If you do not respond in a reasonable amount of time, you may be passed over for transplant
- When you are called with an organ offer you need to be prepared to come to Strong Memorial Hospital immediately
- The On-Call Coordinator will give you specific directions on when and where to go in the hospital.
- You will be given as much information as possible about the donor/condition of the kidney in order for you to make a decision

Deceased Kidney Transplant Offers and KDPI:

- OPTN tries to match the best recipient with the best kidneys
- Donors issued a score = Kidney Donor Profile Index (KDPI)
- Score range from 0 to 100. The lower the number, the longer the kidney is predicted to last.
- The KDPI score is calculated based on facts about the donor that may affect how long the kidney will function
- We are not using kidney offers with a KDPI over 50% for pediatric patients

Donors with risk factors :

- Some donors may have had behaviors which put them at risk for Hepatitis B (HBV), Hepatitis C (HCV), and HIV
- The Public Health Service defines this as meeting any of the following criteria in the past 30 days:
 - Sex with a person known or suspected to have HIV, HBV, HCV infection
 - Man who has had sex with another man
 - Sex in exchange for money or drugs
 - Sex with a person who had sex in exchange for money or drugs
 - Drug injection for nonmedical reasons
 - Sex with a person who injected drugs for nonmedical reasons
 - Incarceration for ≥ 72 consecutive hours
 - Child breastfed by a mother with HIV infection
 - Child born to a mother with HIV, HBV, HCV infection
 - Unknown medical or social history

NAT Testing:

- All donors receive Nucleic Acid Testing (NAT Testing) which measures for any virus in the blood
- NAT testing is able to narrow the period of time that a donor may have been exposed to HIV/Hep B/Hep C
- While the testing does not eliminate the risk of exposure completely, it does reduce the risk significantly

During the Transplant/Hospitalization:

- Surgery lasts approximately four hours
- Every surgery has risks: bleeding, infection, scarring, risk of anesthesia, blood clot, stroke, death.
- These risks are low but can happen.
- The patient stays in the hospital for about 5-14 days after the surgery
 - Bladder catheter for several days
 - Dialysis catheter removed if applicable
- The new transplant patient is monitored by multiple members of the transplant team while they are in the hospital
- Each patient undergoes post-transplant teaching regarding how to take care of the kidney, nutrition, and medication

After Transplant:

- The post-transplant patient will be on multiple different medications
 - Immunosuppression Medications
 - Antifungal/Antiviral/Antibiotic
 - Blood pressure medications
 - Medication to protect your stomach
 - Pain medication
- All medications must be taken as instructed by your transplant team

Missing medications or taking them improperly can lead to rejection and loss of your transplant kidney

Immunosuppression Medications:

Tacrolimus/Prograf

- Doses are adjusted based on the level in your blood
- Must be taken twice a day at 12hr intervals
- Side Effects: hand shaking, tingling of lips, headaches, high blood pressure



Immunosuppression Medications:

Mycophenolate/Cellcept

- Taken twice a day
- Side Effects: GI upset, diarrhea, harm to a fetus



Immunosuppression Medications:

Prednisone

- Daily
- Side Effects: weight gain, facial swelling, edema, increased appetite, rise in blood sugars, osteoporosis, high blood pressure, mood swings
- Your dose will be reduced over time



After Transplant:

- Long-term side effects of immunosuppression medications
 - Infection
 - Cancer (Examples: skin, cervical, blood-PTLD)
- Infection
 - Fever in a transplant patient is considered an emergency
 - Need to contact PCP/transplant office to be seen immediately
- Cancer
 - Routine cancer screening
 - PAP if indicated (discuss with your nephrologist)
 - Yearly skin checks with dermatology

After Transplant:

- Seen by the transplant pediatric nephrologist twice a week initially after transplant
- Blood work needs to be drawn prior to clinic appointments and as needed
- Staples from the incision stay in for approximately 4 weeks after transplant
- Ureteral stent is removed by urology approximately 6 weeks after transplant

After Transplant:

- No driving until medically cleared and off pain medications
 - Approximately 4 weeks
- No heavy lifting (greater than 10 lbs) or exercise for approximately 6 weeks after transplant
- You may return back to school approximately one month after transplant

Resources:

University of Rochester Medical Center:

www.urmc.rochester.edu/surgery/transplant/procedures/kidney-transplant.aspx

United Network of Organ Sharing (UNOS):

www.unos.org

National Kidney Foundation (NKF):

www.kidney.org

National Kidney Registry (NKR):

www.kidneyregistry.org

Finger Lakes Donor Recovery Network:

www.donorrecovery.org

Questions?





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