

**Maine Medical Center
Maine Transplant Program
Policies and Procedures
Kidney Paired Donation Administration Policy**

Purpose

To describe the administrative and clinical requirements when living donor services occur at non-Maine Medical Center transplant programs.

Policy

Kidney donor and recipient incompatibility may be consequent on either preformed donor specific antibody or ABO mismatching. Approximately 35% of donor/recipient pairs are incompatible preventing conventional live donor transplantation. Such patients wait longer, experience reduced access to transplantation combined with increased risk of death on dialysis. It is the policy of the Maine Transplant Program to participate in kidney paired donation in order to optimize the possibility of transplantation for incompatible donor/recipient pairs.

Types of Kidney Paired Donors

1. Directed Compatible
2. Directed Incompatible.

Compatible Donor/Recipients

In general, transplant recipients with compatible donors are advised to proceed with a conventional live donor transplant per the Maine Transplant Program protocol.

On occasion, a compatible donor may be counseled about the potential benefits of Kidney Paired Donation for their intended recipient. The goal of such a proposal is to provide an opportunity for the recipient to explore the chance of receiving a more durable kidney or minimize adverse events. Such goals could include:

1. Obtaining a better match grade
2. Obtaining a kidney from a younger living donor
3. Obtaining a kidney with greater Glomerular Filtration Rate
4. More favorable donor/recipient serologic risk stratification

In the event that a compatible donor and recipient elect to explore Kidney Paired Donation, a decision about proceeding with conventional transplantation will be deferred for no more than 100 days.

Program Options

The MTP performs kidney paired donation:

1. As an active participant in the UNOS national KPD program
2. As an active participant in the National Kidney Registry
3. Alone utilizing internally identified donor/recipient pairs often triggered by an altruistic donor who is unwilling to donate to a recipient outside Maine.

Backup Recipients:

- Every transplant recipient who is scheduled to receive a KPD transplant, will have an identified backup candidate recipient who is ready for transplant at short notice in the event a live donor kidney is procured and the intended recipient is unavailable for transplant for any reason.

KPD Cross matching Protocol

If, at any time, the matched candidate's transplant hospital refuses a match offer due to an unacceptable positive cross match between the candidate and matched donor, then the matched candidate is ineligible for subsequent match runs. The candidate will remain ineligible until all of the following are completed:

1. The matched candidate's physician or surgeon or their designees and the histocompatibility laboratory director or the director's designee review the unacceptable antigens reported for the candidate.
2. The matched candidate's transplant hospital reports to the OPTN Contractor that the review has occurred.

Administrative Requirements

When working with external institutions, the Maine Transplant Program will maintain written evidence of a contract or agreement with another living donor transplant program which provides living donor services to the Maine Transplant Program. Such documentation will include:

- Copy of the Medicare Approval letter for the living donor transplant program.
- Written evidence of a contract/agreement with the living donor transplant program outlining the scope of services being provided by whom.
- If a contracted program is under CMS Corrective Action Plan for non-compliance in an area impacting patient care of the paired donation participant, MTP shall request and maintain documentation of the program's progress to date on the Corrective Action Plan directly from CMS.
- QAPI: The outcome of all transplant recipient's is tracked and reviewed at the monthly multidisciplinary care QAPI meeting (paired donation recipients included)
- The longitudinal experience of KPD will be recorded and tracked for periodic review on a yearly basis
- LD QAPI: The outcome of all living donors is tracked and reviewed at the bimonthly multidisciplinary LD QAPI meeting (paired donation donors included)
- The longitudinal experience of KPD will be recorded and tracked for periodic review on a yearly basis

Clinical Care of Potential Kidney Recipients of Paired Donation

- Clinical evaluation of potential kidney recipients, informed consent, and multidisciplinary care and management shall be consistent with Maine Transplant Program's Policies.
- Informed Consent will be documented using Maine Transplant Program's Kidney Paired Donation Recipient Education Form.
- Medical record documentation shall be consistent with MTP policies and procedures.
- Acceptable Cold Ischemic Time: The Maine Transplant Program is willing to receive a shipped live donor kidney as long as the expected cold ischemic time is less than 12 hours.

Children and High PRA program: CHIP

The National Kidney Registry provides the CHIP program that helps patients without donors who are either children or are disadvantaged because they are sensitized. Member centers that evaluate Altruistic donors and start have the ability to end chains at their centers and get patients transplanted who do not have a living donor. Below is the CHIP program description.

- Maine Transplant Program may enroll up to 50 candidates in the CHIP program

- CHIP candidates must be children (18 or younger) or sensitized adults
- The most likely blood types to find a CHIP match are "AB" and "A" blood types

The CHIP program is used as a last resort. The probability of a match dramatically improves when a paired donor(s) are available.

Clinical Care of Potential Living Kidney Paired Donors

- Clinical evaluation of potential kidney donors, informed consent, and multidisciplinary care and management shall be consistent with Maine Transplant Programs Policies.
- Informed consent shall take place consistent with Maine Transplant Program's Informed Consent for Living Kidney Donors Policy
- Informed Consent will be documented using Maine Transplant Program's Kidney Paired Donation Donor Education Form.
- The Maine Transplant Program will retain medical records of any living donors who organs were transplanted by The Maine Transplant Program up to the point at which donation occurs. Such documentation will include evidence of a multidisciplinary team evaluation including:
 - Complete medical evaluation
 - Complete psychosocial evaluation
 - Evidence of Independent Living Donor Advocate assessment and determination of suitability
 - Fully documented informed consent
 - Verification of donor and recipient vital data immediately prior to organ recovery
- KPD donors performed by Maine Transplant Program will receive conventional follow up care include 6, 12 and 24 month post nephrectomy visits.

Packaging of Kidney

Packaging of a living donor kidney will be performed consistent with the agreement between New England Organ Bank (NEOB) and Maine Transplant Program. NEOB shall provide staffing and supplies for packaging.

Shipping of Kidney

Shipping of a living donor kidney will be arranged by the national swap program with approval from all transplant programs involved in the exchange.

Communication

When a KPD transplant is to occur, surgeon to surgeon communication will occur after the donor procedure has ended so the allograft anatomy and any intraoperative issues can be discussed prior to allograft shipping.

References

UNOS Kidney Paired Donation Program Operational Guidelines

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