

**Maine Medical Center
Transplant Program
Policies and Procedures
Management of Medically Inactive Waitlisted Patients**

Purpose

To define the position of the program regarding the management of medically inactive, waitlisted patients.

Background

At any given time, approximately 40% of patients awaiting kidney transplantation within the United States are categorized as medically inactive (UNOS Status 7). These patients continue to accrue waiting time although they do not receive organ offers until their status is converted to medically active (UNOS Status 1). The reasons for a change in listing status can be divided into broad categories:

1. Active medical issues:
 - Acute or ongoing infection
 - Cardiovascular complications including MI, CVA, PVD
 - Malignancy
 - Other
2. Non adherence with:
 - Medications
 - Phosphorus, potassium and PTH control. The control of these parameters is important to minimize long-term osteoarticular and cardiovascular complications and serve as surrogate markers of an individual's ability to comply with post-transplant requirements
 - Fluid restriction leading to excess interdialytic weight gain and heart disease
3. Non attendance at:
 - Dialysis (including premature sign offs)
 - Scheduled transplant evaluations
4. Active psychiatric disease
5. Active substance abuse
6. Financial (i.e., lack of health insurance coverage)

Policy

1. Patients listed medically inactive will be reviewed by the transplant program periodically in order to ensure their listing status is appropriate, particularly as they approach the time they are likely to receive a kidney offer ("readiness window").
2. Patients listed medically inactive will be reactivated once their acute medical issue is resolved to the satisfaction of the transplant program.
3. The waiting time for patients with malignancy is defined in the policy "Malignancy Prior to Kidney Transplantation"
4. Patients who have been listed medically inactive for 2 or more years will be discussed at the Readiness Meeting with a view to delisting.
5. All "listing" and "delisting" decisions will be shared in writing with the patient and the primary nephrologist and UNOS Patient Notification Policies will be followed
6. In the event a patient appeals a delisting decision, a group will be convened to re-examine the case and ascertain whether there are substantive grounds for reversing the prior decision. MMC Policy "Patient Complaints and Grievances" will be followed in addressing patient concerns regarding waitlisting.

Revised Dates: 11/4/09, 7/9/12, 5/8/15, 5/3/18, 12/4/2020; 3/30/22

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