Transplant Center Tip Sheet

University of MS Medical Center



Kidney Eligibility Criteria

- Advanced chronic Kidney Disease Patients should have GFR < 25 ml/min prior to beginning evaluation
- End Stage Kidney Disease

Referral Process

UMMC accepts referrals from the dialysis social worker (IDT) on behalf of the patient's physician, from the physician directly and/or the patient.

Referrals are accepted via fax, telephone and Kidney Transplant page on UMMC website.

Once received, patients are contacted shortly and the initial evaluation is scheduled with the multidisciplinary team per the patient's schedule.

Necessary forms for a faxed referral

- Form 2728 (if the patient has started dialysis)
- History and Physical (within the last 12 months)
- Copies of insurance cards (front and back)
- Current demographic information

Referral Best Practices

- Please provide four items noted above and limit clinical information to most recent only.
- Please make sure all copies are legible.

Kidney Exclusionary Criteria

Absolute contraindications:

- Malignancy
 - -Untreated non-cutaneous
 - -Treated, with high or undetermined risk of recurrence
- Cardiac
 - -Uncorrectable severe coronary, cerebrovascular or peripheral arterial disease
 - -Chronic LV failure with EF<25%
- Pulmonary
 - -Severe COPD (e.g., FEV<1.25L)
 - -Severe pulmonary hypertension (PA pressure >60mmHg)
- Other Medical
 - -Significant active infection or chronic non-healing wound
 - -Advanced cirrhosis with portal hypertension

- Financial / Social
- -Inadequate insurance coverage
- -Inadequate post-transplant medication coverage
- (VA Rx coverage not acceptable)
- -Inability to develop and commit to an acceptable plan for post-transplant transportation and care
- -Severe psychiatric illness
- -Active tobacco smoking with diabetes, coronary artery diseases, carotid artery stenosis, peripheral arterial disease or moderate-severe chronic lung disease

Relative contraindications:

- Medical
 - -BMI >39.5
 - -Unacceptable diabetes control

BMI <35; HBA1c >9

BMI >35; HBA1c >8

- -Moderate pulmonary hypertension (RSVP 45-60mmHg)
- -PTH > 1000pg/mL
- -Presence of multiple comorbid conditions that, in combination, severely limit the benefit of kidney transplantation
- -Advanced frailty
- Infection
 - -Untreated latent TB infection
 - -HIV infection with detectable viral load

- Psychosocial
 - -Active illegal drug use within past 6 months (exception for social marijuana use)
 - -Active marijuana or alcohol abuse
 - -Non-compliance with dialysis, prescriptions, medications, appointments
 - -Inability to perform activities of daily living or need for chronic custodial care
 - -Active custody of State or Federal Corrections

Kidney Transplant Evaluation

- One or two day evaluation with the participation of the patient's dedicated support person
- Evals begin with an education class taught by a Nurse pre-kidney transplant coordinator (in person or online)
- Nephrologist evaluation
- Social worker evaluation
- Dietitian evaluation (if applicable)
- Labs
- Radiology: chest x-ray, kidney ultrasound and CT scan of the abdomen and pelvis

Additional testing requirements:

- Cardiac testing: stress test, echocardiogram
 & cardiac catheterization
- Colonoscopy
- Biopsy reports
- Vascular reports
- Mammogram and pap smear

Financial evaluation:

- Income
- Insurance
- Citizenship
- Connection to state and federal benefits
- Post-transplant medication costs
- Travel/lodging costs (if applicable)

Selection Committee

- Each patient is presented to the Selection
 Committee ~ 2 weeks after clinic visit
- Candidacy and further testing determined
- Patient has 90 days to initiate testing, they
 may take > 90 days to complete. If the
 patient has not started transplant testing in
 three months we assume they are not
 interested in transplant listing and close
 their file.
- Patient will work with coordinator to complete additional items required for listing.

Post Referral

- Patient chooses between four UMMC Transplant locations for evaluation testing; Jackson, Grenada, Biloxi and Hattiesburg.
- Patient, referring MD, and dialysis center receive follow up letter with instructions.
- Patient follows up with coordinator on next steps. (Clearance letters, pathology reports, and testing)

Patient Status Reports

UMMC sends monthly update letters to all dialysis centers regarding status on the waitlist and reminder for monthly lab samples.

UMMC will provide updates to physicians and physician practices on the status of patients referred, evaluated, waitlisted and transplanted. These reports can be individually produced upon request by referring providers.

All coordinator contact info is also listed on these reports.

Please review the reports and contact the transplant center if you notice any discrepancies.

Facility Best Practices

- Maintain a Transplant binder to include a tracking sheet to track each patient through the referral process including appointment dates and reasons for denial or hold. Create a tab for each patient to include their referral and appointment letters as well as any other pertinent information. Templates are available from Network 8 if needed.
- Ensure that you have a back-up person at each facility who is familiar with the transplant tracking process and the location of your transplant binder and can communicate with the transplant centers in your absence.

Contacts

Referral Intake Coordinators:

Brandi Garcie, RN - Central MS

bgarcie@umc.edu

Latasha Moses, RN - Central MS

Ichambers@umc.edu

Nikki Griffin, RN - Central MS

nbishop1@umc.edu

Michelle Crawford, RN - North MS

mcrawford@umc.edu

Kara Smith, RN - Gulf Coast MS

ksmith14@umc.edu

Kidney Transplant Social Workers:

Sherie Brock, LCSW

smbrock@umc.edu

rasmith@umc.edu

Rebecca Smith, LMSW

If you need more information or have questions, please contact:
Off: 601-984-5065 / Fax: 601-984-2962 / www.umc.edu

