

# Methodist Transplant Institute

## Referral Process

Referrals are accepted from a referring nephrologist or dialysis center. We also accept self-referrals and pre-emptive transplant referrals.

Dialysis centers and referring physicians are notified via fax when a referral is received. The transplant coordinator/scheduler contacts the patient to begin the evaluation process and schedule education, clinic appointment and evaluation testing. All appointment notifications are faxed to dialysis center and/or referring nephrologist.

Necessary forms for a referral:

- Copies of insurance cards and prescription drug cards
- List of medications
- Hepatitis A and B vaccination dates
- Recent history and physical
- Form 2728
- Current labs
- Demographic information
- Psychosocial evaluation
- Nutritional assessment

## Kidney Eligibility Criteria

- Decline in creatinine clearance to less than 20cc/minute
- Creatinine clearance between 20-30 with significant symptoms

## Kidney Exclusionary Criteria

### Absolute Contraindications:

- Advanced non-reconstructable vascular disease
- Chronic oxygen dependence
- Disseminated, active infections (including tuberculosis, aspergillosis)
- Residing in a nursing home or long-term acute care facility
- 75 or older with no potential living donor
- Untreated or uncontrolled psychiatric illness
- Active cancer or malignancy
- Pregnancy
- Open wounds
- Wheelchair or stretcher bound
- Insurance restrictions that prevent receiving care at our hospital or transplant center.

### Relative Contraindications:

- Active substance abuse or other high-risk behaviors that pose a risk for non-compliance
- Recently resected or treated malignancy

## Referral Best Practices:

- Only provide the requested information . The longer it takes to sort through unnecessary paperwork, the longer it takes for the patient to begin the wait list process.
- Please make sure all copies are legible.

## Evaluation Process

Education with our transplant team:

- Nurse coordinator
- Living donor team
- Social work
- Dietician
- Pharmacist
- Financial case manager
- Clinic visit with the transplant nephrologist or surgeon

## Common Testing:

- EKG
- Chest X-Ray
- Labs
- CT Scan of abdomen and pelvis
- Nuclear stress test
- ECHO
- Cardiac clearance

## Best Practices

- Maintain a transplant binder to track each patient's referral process, including a tracking sheet with appointment dates and reasons for denial or hold. Create a tab for each patient containing referral and appointment letters and other pertinent information. Templates are available from Network 8 if needed.
- Designate a back-up staff member at each facility who is familiar with the transplant tracking process.
- Keep up with monthly Blood Testing PRA. Ensure that kits are drawn and shipped on time for most recent PRA on your patients.

## Selection Committee

- Multi-disciplinary selection committee
- Possible decisions include approval for transplant listing, defer for additional tests/visits or decline for transplant listing
- Referring nephrologist or dialysis center are notified of the selection committee decision and any changes to the patient's listing status
- Begin living donor evaluation if recipient has a living donor
  - Discuss Pair Kidney Exchange options

## Annual Evaluation

- Patients must complete re-evaluation testing annually while on the transplant waitlist.
- Patient and dialysis center must notify transplant clinic if there are changes in the patient's medical status, insurance, address or phone.

## Transplant Tracking

- Our transplant program will provide patient updates throughout the evaluation process. Many of these will be sent via fax to dialysis centers.

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## Patient Status Reports

Patient Status Reports are available upon request.

## Contact Information

### Dialysis Liaison

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