Maine Medical Center
Transplant Program
Policies and Procedures
Wait List Management Policy

Purpose

To outline a uniform policy for placing transplant candidates on the transplant list, periodically reviewing the list, and removing patients from the list.

Policy

It is the policy of the Maine Transplant Program to list all appropriate candidates in a timely manner, and to ensure that candidates who are active on the transplant waiting list are prepared for transplantation.

Procedures

1. All transplant candidates and potential donors are discussed at the multidisciplinary Transplant Candidate Review (TCR) meeting.

2. A Waitlist Management meeting will be held regularly to review the status of all patients on the waiting list. The meeting will be facilitated by the Associate Medical Director or designee with participation by the Pre Transplant Coordinators. Any action items to be completed for an individual patient will be noted in the patient electronic medical record. Notes may be modified and removed as needed to represent current status of actions and accommodate available note space in the record.

3. TCR meeting minutes are recorded and patient specific information is added to the medical record.

4. Following the discussion at TCR, patients may be:
   • Acceptable candidates for transplant and will be listed Status 1 or Status 7
   • Unacceptable candidates for transplant; will be declined and not listed
   • Deferred pending completion of pre-transplant requirements; may be returned to TCR for consideration

5. The Committee Review, attendance, and decision will be documented in the patient electronic medical record. This documentation will include eligibility/suitability for transplant based on program inclusion/exclusion criteria, and any discussion details relevant to the patient’s status. If candidates are listed that do NOT meet inclusion criteria, i.e. an exception to inclusion criteria, the Committee Review note will include an explanation.

6. All acceptable candidates (see Inclusion/Exclusion Criteria) are added to the deceased donor transplant waiting list within 10 days. The patient and referring nephrologist will receive written communication regarding the program decision within 10 days of UNET listing. This communication will include the UNOS contact information.

7. All patients on the wait list (Status 1 and Status 7) will be required to complete HLA antibody testing each month. Communication will be sent monthly to dialysis centers, and to referring nephrology clinics for pre-emptive patients, regarding which patients are on the wait list and must complete this testing.
8. Listed patients are reevaluated every 12-18 months. On occasion, this evaluation may be delayed or postponed due to medical issues, inclement weather, or unforeseen transportation issues. The RN Coordinator will determine which disciplines are needed for this reevaluation based on patient needs; usually this reevaluation will include the MD, RN, and Social Worker.

9. Active (UNOS status 1) patients may have their status changed to “inactive” (UNOS status 7) in the event of an acute medical problem or testing results that may make them temporarily ineligible to receive a transplant. Inactive patients continue to accrue waiting time although they will not receive any organ offers.

10. Patients, referring physicians and dialysis centers are formally notified within 10 days of any listing status change. This notification may be by letter or phone.

11. Medically inactive (Status 7) patients are reevaluated for reactivation (and change to Status 1) once the acute event leading to the status change is resolved.

12. Patients may be removed from the waiting list for the following circumstances:
   - Patient no longer wishes to be transplanted
   - Insoluble medical/surgical/psychosocial contraindications to transplantation
   - Documented persistent non-adherence with medical regimen
   - Patient is transplanted (must be removed from the waiting list within 24 hours after anastomosis)
   - Patient death (must be removed from the waiting list within 24 hours from notification of death)
   - Patient is medically inactive for an extended period of time with no likelihood of meeting criteria
   - Failure to attend transplant reevaluation appointments (“no show/no call” x3)
   - Failure to have monthly antibody screen for 3 consecutive months
   - Relocates and fails to be listed at another transplant program within 8 months

13. All notifications of patient death received by the transplant program must be documented in the patient electronic medical record upon receiving notification and prior to removing the patient from the waiting list. This documentation will include all available details regarding the patient death, including source of notification and cause of death if available.

14. Patients who are determined to be nonadherent with reevaluation requirements and ineligible for transplantation will be removed from the waiting list following a review by the Medical Director or Associate Medical Director. This removal will be completed within 24 hours of the decision to remove the patient from the waiting list. Documentation regarding the review and delisting will be made in the patient electronic medical record.

15. Correspondence regarding de-listing is sent by registered mail to the patient and copies sent to the primary nephrologist at the dialysis unit within 10 days.
16. In instances where a recently transplanted patient is placed back on the waiting list (e.g. graft failure), documentation of the original date of removal and date of new placement on the waiting list is available in the UNET status history or via an Epic phase review.

17. If a patient is placed back on the waiting list following a recent transplantation, s/he may be eligible to receive a reinstatement of waiting time. The RN Coordinator will initiate this request in accordance with UNOS Policy guidelines and procedures.

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