**Policy: Dual Organ (Liver/Kidney) Transplant Evaluation to Listing Procedure**  
  
**Statement: 1. Activation date: 12/14/06**  
**2. Affected Department:** Emory Liverand Kidney/Pancreas Transplant Program  
**3. Vision Strategy:** Patient Care  
**4. Procedure Statement:** The Emory Transplant Center will comply with all applicable federal, state and local laws, regulations and policies regarding the management of patients referred to the transplant center for transplant evaluation.   
**5. Basis**: This procedure is necessary to ensure that effective and efficient care is provided to all patients who are referred to the Emory Transplant Center’s Liver and Kidney/Pancreas Transplant Departments for a potential dual liver and kidney transplant.   
**6. Administrative Responsibility:** Section heads, physicians, practitioners, and staff are responsible for compliance with this policy.  
  
**Scope/Procedure:**  
  
**7. Procedure:**  
  
1) The transplant hepatologist requests an evaluation of a liver transplant candidate’s renal function by the kidney transplant team to determine if the patient requires a dual liver/kidney transplant.  
2) The pre-liver transplant coordinator e-mails to the Center’s data analyst and the designated liver/kidney transplant coordinator in the pre-kidney transplant program that the patient is a possible liver/kidney transplant candidate.  
3) The designated liver pre-transplant coordinator informs the designated kidney pre-transplant coordinator of the need for a work-up for a possible liver/kidney transplantation. The liver coordinator provides the kidney coordinator with the following information, as available:

All Recipients:

Transplant plan (with the Liver Transplant Financial Coordinator)  
History and Physical  
Psychiatry consult  
Social Work consult

Nutrition consult

Vital Signs   
Chest X-Ray  
Abdominal imaging – CT or MRI of the abdomen and pelvis  
EKG  
Cardiac Testing: DSE, TTE, Exercise Echo  
Labs (CBC, Chemistry, PT, PTT, pregnancy testing, sickle cell\*\*, lipid profile, drug screen, ABO, etc.)  
Serology panel (Hepatitis B profile, HCV, CMV, VZV, HIV, EBV, HTLV1-2 and RPR)  
Copies of all patient’s insurance cards  
24 hour urine for creatinine clearance  
UA/UC - \*\*

Female recipients: (results within one year)

GYN Exam/Pap Smear\*\*   
Mammogram – over 35 years of age \*\*   
Guaiac– over 50 years of age \*\*   
Colonoscopy-over 50 years of age\*\*  
Males over 50 years of age: (results within one year)  
Prostate Exam \*\*   
Current PSA  
Guaiac\*\*   
Colonoscopy\*\*  
Diabetic Recipients:  
Carotid U/S \*\*   
MRA or CTA studies of the abdomen and pelvis \*\*  
Recent HgbA1C  
  
4) The liver/kidney pre-kidney transplant coordinator (pre-kidney coordinator) orders a nephrology and transplant surgery consultation for renal  
function evaluation in the outpatient transplant clinic to determine if the patient needs a kidney transplant. The pre-kidney transplant coordinator   
reviews testing received from the liver transplant coordinator and determines if there are any outstanding tests required for the kidney transplant   
evaluation that were not completed during the liver transplant evaluation. Upon review, the pre-kidney coordinator then orders the outstanding   
kidney transplant evaluation tests as well as HLA bloodwork.  
5) The kidney transplant coordinator forwards\* the patient’s insurance information to the designated financial coordinator to clear the patient for a   
kidney transplant evaluation.  
a. If the patient is not cleared by their insurance carrier for a kidney transplant evaluation the kidney transplant financial coordinator will inform the medical director who will assist in appealing this denial. If the result is still a denial the transplant financial coordinator will e-mail the   
pre-renal transplant and liver transplant coordinators via OTTR progress notes. The pre-liver transplant coordinator will inform the patient   
of the denial.  
b. If the patient is cleared by their insurance carrier the kidney transplant financial coordinator will forward\* the chart to the designated liver   
pre-transplant scheduler who will schedule in a timely manner the patient for nephrology consult (Appointment Type: NPE) and kidney   
transplant surgery consult (Appointment Type: CON). If there is a challenge in scheduling the appointment, the pre-transplant coordinator will contact the ordering Liver Transplant physician to assist in the process.   
6) The nephrologists and kidney transplant surgeon will evaluate the patient’s candidacy for a kidney transplant. The pre-kidney transplant   
coordinator will meet with the patient and assist them in completing their activation paperwork. The pre-kidney transplant coordinator will review   
consultations and determine the following:  
a. If the patient is deemed a candidate for transplantation, the kidney transplant coordinator will inform\* the designated pre-liver coordinator   
and order any outstanding testing for completion of evaluation.  
b. If the patient is deemed not a candidate for kidney transplantation, the kidney pre-transplant coordinator will inform\* the designated   
pre-liver transplant coordinator. The pre-liver transplant coordinator will communicate candidacy status\* to the entire liver transplant team   
and pursue listing for liver transplantation only.  
7) The kidney pre-transplant coordinator will present the patient at conference as soon as any outstanding evaluation items are completed.   
a. If the patient is approved for activation the kidney pre-transplant coordinator will inform\* the pre-liver transplant coordinator, and the liver   
listing coordinator that the patient is approved for listing. The kidney pre-coordinator will forward chart to the kidney transplant financial   
coordinator to obtain insurance approval for renal transplant, and ensure that there is HLA blood work for listing.  
b. If the patient is placed evaluation on-hold for kidney transplant, the pre-kidney transplant coordinator will assist the patient to complete   
necessary requirements.  
c. If the patient is not approved for kidney transplant, the kidney coordinator will notify\* the liver transplant coordinator. They will   
conference call the patient and provide feedback.  
8) The kidney transplant financial coordinator will notify\* the kidney transplant coordinator when prior approval has been obtained for the patient.  
The transplant coordinator will ensure that HLA blood work is on-file prior to proceeding with listing.  
  
9) The kidney transplant coordinator will notify\* the pre-liver coordinator and liver listing coordinator that the patient is ready to be listed for kidney   
transplant.  
10) The liver listing coordinator and pre-liver transplant coordinator will ensure that the patient has active MELD labs on file.   
11) The data analyst for the Emory Transplant Center will list the patient for the kidney transplant team and the liver listing coordinator will list the   
patient via UNOS. The listing person for each team will e-mail\* the kidney and liver pre-transplant coordinators and the individual responsible for   
listing for the other team that listing is completed.  
  
\* email via OTTR progress notes  
\*\* if done as a part of the evaluation   
  
Approved by: Liver Transplant Leadership Group

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Thomas G. Heffron, M.D.  
Chair, Liver Transplant Leadership Group  
Director, Liver Transplant Program  
  
Approved by: Kidney/Pancreas Transplant Leadership Group  
  
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Thomas C. Pearson, M.D., DPhil   
Chair, Renal Transplant Leadership Group  
Director, Renal Transplant Program