

**PROTOCOL TITLE:** Kidney and Pancreas Pre-transplant: Evaluation of Potential Candidates and

Living Donor Candidates following COVID19 infection

**APPLICABLE FACILITIES:**

☐EHC ☐EDH ☐EHH ☐EHI ☐EHN ☐EJCH ☐ELTAC ☐ESJH

EUH ☐EUHM ☐EUHS ☐EUOSH ☐EWWH ☐RJV-ERH ☐RJV-ESOP ☐TEC/ESA

**EFFECTIVE DATE:** 02/23/2021 **ORIGINATION DATE:** 2/10/2021

**CATEGORY:** Diagnostic /Preventive, Other

**LEVEL:** Independent

**Background:** The Coronavirus disease 2019 (COVID-19) pandemic has had an overwhelming

impact on transplantation and organ donation. There is lack of data on feasibility and safety of

kidney transplants and organ donation following COVID 19 infection. The time to recovery from

COVID 19 is highly variable (2 weeks to 3 months or longer) and dependent on age, pre-

existing Co-morbidities, severity of illness and spectrum of symptoms experienced. Amongst

those hospitalized for COVID19, re-hospitalization risk is 10% within 30days and 20% within

60 days of hospital discharge. Multiple re-hospitalizations and persistent symptoms for upto 2

months is also not uncommon.

**Purpose:** Minimize Covid-19 associated complications in recovered kidney/pancreas transplant

waitlist candidates and living donor candidates in the peri-transplant period.

**Target Population:** Kidney/pancreas waitlist candidates and Kidney Living Donor Candidates who

have had COVID 19 infection.

Patients with a recent diagnosis of COVID-19 may be considered for kidney/pancreas transplantation

and for kidney donation after diagnostic and medical assessments (see below) conducted

based on the severity of their illness as listed.

**I. Kidney and Pancreas Candidates**

**A. At Waitlist Candidacy Evaluation**

If at the time of evaluation/ office visit for waitlist evaluation it is discovered that the patient had

COVID 19 within 90 days, with residual symptoms of COVID-19 they need to undergo the

following tests prior to being transplant candidates:

- O2 saturation on Room Air at rest and ambulation > 96%

- Chest X-ray PA/Lateral

If O2 sats, CXR are abnormal additional tests (eg PFTs, CT Chest without contrast , Markers of

Coagulation and hemostatic Activation (MOCHA) panel (PT, aPTT, fibrinogen, D-dimer, antithrombin,

INR). etc.), pulmonary or hematology consult may be needed for clearance for transplant.

Final decision to proceed with transplant surgery will be made by Selection Committee after

review of all available information.

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**B. At the time of Organ Offer**

If at the time of organ offer it is discovered that the patient had COVID 19, the patient will be further

evaluated based on severity of illness (See below). Asymptomatic patients will not receive COVID 19 PCR testing with the exception of kidney/pancreas candidates.

Patients with new oxygen requirements, continued COVID19 symptoms, Positive COVID PCR at

time of presentation for transplant surgery will not be candidates for transplantation at that time

and will need to be re-evaluated for continued candidacy.

Final decision to proceed with transplant surgery will be made by Transplant Team after review of

all available information

**1. Candidates with Asymptomatic/Mild symptoms not requiring hospitalization:**

Waitlist candidates should not undergo transplant until at least 30 days after first positive test and

should be asymptomatic for 14 days prior to transplant surgery. The following tests are

recommended prior to proceeding with transplant

- Chest X ray

- O2 saturation on Room Air

- INR

Based on the test results the candidates may need additional tests (e.g. CT chest), pulmonary or

hematology consult for clearance for transplant.

**2. Candidates who required Hospitalization :**

*a) Hospitalized with Cardiopulmonary COVID 19 symptoms or needing ICU admission*

Any patient requiring an ICU admission or admitted with cardiopulmonary symptoms (Pneumonia,

Respiratory failure, arrhythmias, thromboembolic complications, strokes) due to COVID 19 will need

an in-depth evaluation prior to proceeding with transplant. These patients will need outpatient

evaluation and clearance prior to proceeding with transplant surgery.

*b) Hospitalized with Non-Cardiopulmonary COVID 19 symptoms to medical floor*

Waitlist candidates who had COVID 19 related hospitalization to the medical floor for non-

cardiopulmonary symptoms should not undergo transplant until at-least 90 days after first positive

test and should be asymptomatic for 14 days prior to transplant surgery.

These patients will need to have the following tests prior to proceeding with transplant

- Chest X ray

- O2 saturation on Room Air and ambulation >96%

- INR

Based on the test results the candidates may need additional tests, pulmonary or hematology

consult for clearance for transplant.

**II. Kidney Living Donor Candidates**

Kidney donors should have complete resolution of COVID 19 symptoms and be asymptomatic for

30 days prior to donation. Asymptomatic donor candidates will not receive COVID 19 PCR testing prior to donation.

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All donors who have had COVID 19 illness regardless of severity will undergo the following

testing as part of their donor evaluation:

-O2 Sats at RA and ambulation >96%

- CXR

- INR

If CXR and O2 sats are abnormal, pulmonary consult will be obtained and decision for additional

testing will be determined at that time.

Donors with evidence of coagulopathy may need hematology evaluation prior to transplant

Final decision on donation will be determined upon completion of evaluation by the

multidisciplinary selection Committee

**RELATED DOCUMENTS AND LINKS:**

Post Kidney Transplant Consent to Surgical or Medical Treatment

**DEFINITIONS:**

N/A

**REFERENCES AND SOURCES OF EVIDENCE:**

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from hospital: a cohort study. Lancet 2021; 397:220.

Craig-Schapiro R, Salinas T, Lubetzky M, et al. COVID-19 outcomes in patients waitlisted for kidney

transplantation and kidney transplant recipients [published online ahead of print, 2020 Oct 12]. Am J

Transplant. 2020;10.1111/ajt.16351. doi:10.1111/ajt.16351

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Uptodate articles on COVID 19

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