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| **TITLE:** Emory Transplant Center Kidney/Pancreas: Pre-Transplant Lab Draw Protocol  |
| **APPLICABLE FACILITIES:** (check all that apply)□EUH **□**EUOSH □EWWH □EUHM □EJCH □ESJH □TEC □ESA □ERH |
| **EFFECTIVE DATE:** 4/20/2022 | **ORIGINATION DATE:**  |

**SCOPE:**

This policy is necessary for the protection of patients, physicians and staff.

**PURPOSE:** The Emory Transplant Center will comply with all applicable federal, state and local laws, regulations and policies regarding the management patient’s laboratory draws and results.

**GUIDELINES:**

**a.** All patients will have laboratory testing done with each visit to the Outpatient Transplant Center.

**b.** Different appointment types will require specific laboratory testing as noted below.
**c.** Provider may add or remove additional testing as appropriate for individual patient.

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| **Phase 1: Pre-Transplant Evaluation**  | **Standard Orders**ABO RH Type (need Blood Bank Request)Transplant ABO Group and Type (ABORH)CBC (WBC, RBC, HGB, HCT, PLT) does not include differentialDifferential, AutomatedCMV Total (IgG & IgM)Comprehensive MetabolicHepatitis A Antibody (IgG & IgM)Hepatitis B (diagnostic profile)Hepatitis C AntibodyHIV AntibodyPhosphorousProtime (PT/INR) RPR (rapid plasma regain)Toxicology Drug Screen, Blood EBV antibody profile,Varicella Zoster Virus Antibody |
|  | **Urine Tests**Toxicology Drug Screen, Urine (for patients who are not currently on dialysis) |
|  | **Miscellaneous Blood**C-Peptide (*insulin dependent diabetics)*Hepatitis B DNA by PCRHemoglobin A1C (*all diabetics)*Protein Electrophoresis (SPEP)*PSA Screen (Medicare only on all men 40 years and older)*TSH (thyroid stimulating hormone)Chagas Nicotine screen (patients with diabetes, cardiac disease, pulmonary disease, vascular disease)**Miscellaneous Urine**Urine protein creatinine ratioUPEP |
|  | **HLA Orders**HLA Antibody Screen Class I and II type by low resolution by DNA |
|  | **Lupus Orders –** *On all patients with a history of Lupus*Anti-double stranded DNA AntibodyC3 ComplementC4 ComplementLupus Anticoagulant ProfileAnti-phospholipid antibody profile IgG, IgM |
|  | **Hypercoagulation Orders**Anti-cardiolipin AntibodyAnti-thrombin 3Factor 5 LeidenProtein CProtein SProthrombin gene mutation |
|  | **HIV Orders –** *On all patients with a history of HIV*CD4 count G6PDHIV Quant  |
| **Phase 2: High Priority Candidates or Waitlist Re-evaluation Candidates** | Quantiferon gold PSA (men >55 or 40-55 with first degree relative with prostate cancer)HLA Antibody Screen (this sample may be stored for future testing) |

Approved by: Kidney/Pancreas Transplant Leadership Group

**RELATED DOCUMENT(S)/LINK(S):**

**DEFINITIONS:** *(If applicable)*

**REFERENCES AND SOURCES OF EVIDENCE:**

**KEY WORDS:**

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| **REVIEW/APPROVAL SUMMARY:**  |
| **APPROVAL BODY/BODIES:**  |
| **REVIEW/REVISION DATES:**  | **APPROVAL DATE:**  |