

Clinical Process Instruction Manual

Kidney and/or Kidney-Pancreas List Exchange and Anonymous Donation Program Process Instruction

Policy:

Trillium Gift of Life Network's deceased donor kidney allocation system will support an anonymous donation or List Exchange (LE) for living donor recipient pairs ("LE donor" and "LE recipient") who are unable to participate in Paired Exchange, and are either ABO incompatible or cross-match positive. The LE recipient must be eligible to be listed on either an Ontario kidney transplant waiting list, or an Ontario kidney/pancreas transplant waiting list. Trillium Gift of Life Network and participating hospitals will support the Kidney LE Program in accordance to the *Kidney/Kidney-Pancreas List Exchange Program Policy*.

Transplant programs participating in the living donation programs are the acting source establishments for organ recovery and release of the living donor. Accordingly, they are responsible for determining medical suitability of the donor as per the *Health Canada Guidance Document*.

Following such an LE donation (which is registered upon the completion of renal recovery), the LE recipient is permitted to enter the deceased donor waiting list as a List Exchange patient, assuming the recipient remains eligible for transplantation.

A maximum of one such recipient from each kidney or kidney/pancreas transplant program's List Exchange program may be added to the deceased donor waiting list for each blood group during each calendar month.

Process:

1. The Transplant Program from which the anonymous or Living Exchange (LE) donor recipient pair is from will work up the LE donor, as per usual living donation protocol.
2. Once the Transplant Program has completed the work up, the participating Transplant Program will inform the Clinical Services Coordinator (CSC) of a potential anonymous, Kidney/Kidney-Pancreas LE Donor.
3. The Transplant Program will provide TGLN's Provincial Resource Centre (PRC) with documentation of ABO, consent and the Living Donor identification number. The CSC will document all information on the *Living Donor Allocation Checklist*. See Exhibit 1.
4. The Transplant Program will arrange for initial cross matching with HLA for the donor (this is not completed on a stat basis).

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5. HLA will contact the Transplant Program upon completion of initial cross-matching of anonymous or LE donor and potential recipients. Transplant Program will contact CSC and request allocation to be run. At this time, the CSC will run the deceased kidney allocation listing.
6. The CSC will contact the Kidney Transplant Program during business hours (Monday to Friday, 9am – 5pm) and offer the organ to the highest listed ABO identical patient among cross-match negative patients on the deceased donor kidney waiting list. The potential recipient must belong to the same transplant program as the anonymous or LE donor. The CSC may provide them the allocation ID to view the list.
7. The Kidney Transplant Program will place the chosen anonymous or LE recipient for the LE donor kidney on hold.
8. The CSC will allocate the kidney to the chosen anonymous or LE recipient.
9. The Transplant Program will arrange any additional testing (e.g. stat-matching) to confirm recipient eligibility.
10. In the event that the transplantation of the anonymous or LE donor cannot proceed with the intended recipient upon further testing, the Transplant Program will inform CSC that the recipient will be reactivated, and their placement on the waiting list will be unaffected. The anonymous or LE donor will then be allocated to the next potential recipient.
11. Upon successful completion of transplant, the Transplant Program will enter donor OR data and recipient clamp times to remove the recipient from the deceased donor waiting list.
12. The Transplant Program will inform the PRC of the outcome of the transplantation.
13. If this was a LE case, upon successful completion of renal recovery, the Transplant Program will activate the LE recipient onto the deceased kidney/kidney-pancreas donor waiting list as a LE recipient. The LE recipient will be prioritized on subsequent deceased donor allocations, in accordance with the relevant *Kidney/ Kidney-Pancreas Algorithm*.
14. In the event of any confirmed or suspected adverse events involving the LE donor/recipient, or the LE donor's recipient, the Transplant Program will provide Trillium Gift of Life Network with verbal and written notice (see *Unexpected Serious Adverse Reaction Process Instruction, CPI-9-701*).

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Records:

Record Name	Form No. (if applicable)	Record Holder	Record Location	Record Retention Time (as a minimum)
Living Donor Allocation Checklist	—	PRC	PRC	10 years

References:

- *Coordination of Organ Placement – All Organs, CPI-9-302*
- *Unexpected Serious Adverse Reaction Process Instruction, CPI-9-701*
- *Deceased Kidney/ Kidney-Pancreas Algorithm*
- *Living Donor Allocation Checklist*
- *Basic Safety Requirements for Human Cells, Tissues and Organs for Transplantation. Requirements 6.6, Guidance Document, Health Canada, July 2005.*

