Helping Your Patients Through the Transplant Referral and Evaluation Process

Transplant centers want your patients to have the best chance at getting on the kidney transplant waiting list. Transplant center staff were asked what they wished dialysis staff knew when referring and assisting a patient through the evaluation process. Review the below "tips" and share with the care team.

Not all patients are right for transplant	 The overall goal is to help, not harm the patient. Underlying health conditions, including but not limited to cardiac conditions, vascular anatomy, severe lung disease, active or recent cancers (other than skin cancer) and obesity can dramatically increase the risks of complications during and after the transplant process. For older patients, consider that the risk may outweigh the benefits. Some benefits may end after transplant such as disability due to ESRD and/or some transportation support. All scenarios should be explored by the care team. Ask questions of the transplant team if you are unsure. Many psychosocial conditions can preclude patients from transplant including lack of caregiver support for post-transplant needs, untreated mental health condition, lack of transportation to/from center, lack of adequate insurance coverage, lack of financial resources required for continued follow up pre- and post-transplant.
Valuable information that should be shared with transplant center	 Documentation of treatment compliance and the ability to manage their disease processes. Current phone numbers and demographic information. Patient primary language, literacy level. Labs: PTH and A1c if diabetic; Hepatitis B status; dates of vaccinations. Current or changes in social support, transportation, insurance, job, etc. Patient illness, hospitalizations or extended travel. Changes in dialysis modality, starting/stopping dialysis, changes in nephrology provider.
Testing that is helpful to have prior to referral	 One of the biggest delays in adding a patient to the waitlist is completion of cancer screenings (mammogram, Pap, Colonoscopy). Having these completed and up-to-date prior to referral will expedite the process. The tests must be up-to-date at the time of listing and kept up-to-date while on the waitlist. It is important that the patient knows exactly when and where the screenings were done for the most complete medical record. Ensure patient has a relationship with a primary care physician and nephrologist.

Encourage patients to have a living donor	 A living donor will likely provide the best outcome for transplant and living donor kidneys can last longer. Resources are available to help patients reach out to family and friends. There are also Living Donor Coordinators at local transplant centers. Having a living donor can control the timeline to transplant making it the fastest way to transplant.
It is critical for the patient to be engaged in the evaluation process	 Keep all appointments, if needing to cancel-give as much notice as possible. Set up voicemail on their phone, check regularly, and make sure it is not full. If a patient gets coordinators voicemail, do not hang up. Leave a message. Check and open all mail. Do not block unknown numbers. Encourage patients to use the patient portal at the transplant center (if available). Many transplant centers require a care partner to accompany patients to appointments and to be available before and after transplant. Talking to your patient about who their care partner is or could be is important.
Communicate openly with the transplant center	 Always provide the transplant center with the full picture, this will help the patient move quicker through the process. Ensure patient knows that you are referring them so they are not surprised when contacted by the transplant center. If a patient passes away, always let the transplant center know. If a patient is ambivalent towards transplant, that should be communicated with the transplant team, as transplant requires lifelong follow up and medication use.

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