

HPAP-097 Donor Summary



HPAP	097	UNOS	
Recovery OPO	PADV- Gift of Life Donor Program	Allocation Via	UPENN <input checked="" type="checkbox"/> nPOD <input type="checkbox"/>
Age (years)	54	DCD	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Race	African American	DBD	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Sex	M <input type="checkbox"/> F <input checked="" type="checkbox"/>	Admission to Cross Clamp	345 Hours 05 Mins.
ABO (Rh)	O	Cross Clamp Time	06/17/2021 01:50 EDT
BMI (Kg/m²)	29.166	Cold Ischemia Time*	9 Hours 22 Mins.
Weight (kg)	79.5		
Height (cm)	165.10		
Cause of Death	Anoxia	Preservation Solution	UW <input checked="" type="checkbox"/> HTK <input type="checkbox"/> Storage/Viaspan/SPS-1
Mechanism of Injury	Cardiovascular	Organs Recovered	Heart <input type="checkbox"/> Kidney <input checked="" type="checkbox"/> Lung <input checked="" type="checkbox"/> Pancreas <input checked="" type="checkbox"/> Liver <input checked="" type="checkbox"/> Intestine <input type="checkbox"/>
Cardiac Arrest/Downtime	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Intraoperative time lapse from liver to pancreas removal from the peritoneal cavity:	00 Hours 39 Mins.
CPR / Time	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Organs Discarded	Heart <input type="checkbox"/> Kidney <input type="checkbox"/> Lung <input type="checkbox"/> Pancreas <input type="checkbox"/> Liver <input type="checkbox"/> Intestine <input type="checkbox"/>
Total Est. Downtime	Unknown	Blood Culture	No Growth
Date /Time of Admission	06/02/2021 16:45 EDT	PHS High Risk	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
		Acute Lung Injury	Diffuse hazy appearance of the left lung.

*Cold Ischemia time is calculated from time of cross clamp to start of enzyme perfusion for islet isolation.



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Medical History:

		Duration	Medications	Compliance
Type of Diabetes	-----	-----	-----	-----
History of cancer	-----	-----	-----	-----
CAD	-----	-----	-----	-----
Hypertension	Yes	5 Years	unknown	Yes
Hyperlipidemia	-----	-----	-----	-----
Autoimmune disease	-----	-----	-----	-----
Family History	CAD <input checked="" type="checkbox"/> uncle and Mom	Diabetes <input type="checkbox"/>	Auto immune disease <input type="checkbox"/>	Others:
Surgical History:	Tonsillectomy, umbilical hernia repair, tummy tuck			
Comments:	Medical Hx: HTN, Nonischemic Cardiomyopathy, LVH, Anemia, Sick cell trait, Transverse myelitis, Vitamin D deficiency, Migraines Medication Hx: unknown HTN meds, water pill and steroid			

Hemodynamic Profile

Average BP During Hospitalization (mmHg)	114/71	
Average Low BP During Hospitalization	79/52	Duration: 1-60 min.
Average BP in OR (mmHg)	110/60	
Average Low BP in OR (mmHg)	90/40	Duration: 1 min.
Average HR in OR (bpm)	90	
ABG-pH range	7.21 – 7.48	

INTERVENTION

Blood Products/Meds Transfused Before Organ Recovery

Product	Amount (ml)	Units	Total (ml)
Fresh Frozen Plasma	-----	-----	-----
PRBCs	-----	-----	-----
Platelets	-----	-----	-----
Norepinephrine (Levophed)	-----	2-20 mcg/min started 14 days before organ recovery	
Vasopressin	-----	0.03-1.2Units/hr started 5 days before organ recovery	
Neo-Syneprine			
Epinephrine			
Phenylephrine			
Dopamine			

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Blood Products/Meds Transfused Intraoperative

Product	Amount (ml)	Units	Total (ml)
Fresh Frozen Plasma	-----	-----	-----
PRBCs	-----	-----	-----
Platelets	-----	-----	-----
Norepinephrine (Levophed)	-----	-----	-----
Vasopressin	-----	-----	-----
Neo-Syneprine (phenylephrine)	-----	100 mcg/hr	-----
Epinephrine	-----	-----	-----
Dopamine	-----	-----	-----
Heparin	-----	30,000	-----

Initial Autoantibody Screening (nPOD): ELISA

Not performed for HPAP-T2D program

GAD-65	IA-2
ND	ND

Confirmatory results: Radioimmuno Assay (RIA)

	GAD-65 (unit/ml)	IA-2 (unit/ml)	Insulin AAB (unit/ml)	ZnT8 (unit/ml)
Results	0	0	-0.004	0.008
Cut-off values	20	5	0.010	0.020

*Sample obtained at time of organ recovery.

	C-peptide (ng/ml)	Proinsulin
Results	6.68	ND

*Sample obtained at time of organ recovery.

HLA (OPO)*

Class 1	A	2	2	Class II	DR	17	13
	B	53	57		DR51	N-Negative	N-Negative
	C	04	06		DR52	52	52
	Bw4	Positive			DR53	N-Negative	N-Negative
	Bw6	Negative			DQB1	2	2
			DQA1		02	05	
			DPB1		04:01	17:01	
Comment:							

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Confirmatory HLA (UPENN)*

Not performed for HPAP-T2D program

Class 1	A			Class II	DRB1		
	B				DRB3		
	C				DRB4		
					DRB5		
					DQB1		
					DQA1		
					DPB1		
					DPA1		

*HLA typing performed using NGS

Infectious Disease Serology

Test	Result	Hemo/Plasma Dilution Status	
		Qualified	Non-Qualified
EBV IgG	Positive	✓	-
EBV IgM	Negative	✓	-
CMV	Negative	✓	-
HBcAb	Negative	✓	-
HBsAg	Negative	✓	-
HCV Ab	Negative	✓	-
HIV I/II	Negative	✓	-
Syphilis	Negative	✓	-
Procleix Ultrio	-----	-----	-
Ultrio HBV (HBV NAT)	Negative	✓	-
Ultrio HCV (HCV NAT)	Negative	✓	-
Ultrio HIV (HIV NAT)	Negative	✓	-
Toxoplasma Ab	Negative	✓	-
SARS-CoV-2	Negative	✓	-

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Laboratory Panel

	Initial	Peak	Terminal
Na (mEq/L) (135-145)	135	158	151
Creatinine (<1.5)	1.32	1.82	0.75
Glucose (mg/dL) (60-150)	249	328	299
HbA1C%	5.4	----	----
Total bilirubin (0-1.0)	0.7	1.1	0.8
SGOT (AST) (0-40)	342	435	17
SGPT (ALT) (5-35)	297	314	33
Alkaline phosphatase (45-110)	101	205	168
Serum Amylase (23-851)	29	29	19
Serum Lipase (0-80)	18	18	5
WBC (THO/uL) (4.5-11.0)	16.3	19.2	10.1
Hgb (g/dL) (12-16)	11.8	28.9	7.6
Platelets (THO/uL) (150-350)	271	284	225
INR (<2.0)	1.4	1.5	1.5

Urinalysis

	1 st	2 nd	3 rd	4 th
Glucose	Negative	Negative	Negative	Positive : 1000

Medications During Hospitalization

Steroids**	Solumedrol		
Diuretics	Lasix 40 mgs, Mannitol 50 g		
T3 Protocol	-----		
T4 Protocol*	40 mcg/hr		
Insulin**	Insulin Aspart 8 units started 6 days before organ recovery		
Antihypertensive	-----		
Vasodilators	-----		
DDAVP**	-----		
Total parenteral nutrition	-----		
Other	KEPPRA 750 mg, Piperacillin-tazobactam, levothyroxine 40mcg/hr	Specify	

*T4 protocol: Levothyroxine, (20 mcgs), Solumedrol (2 gms,) Dextrose 50%, (1 amp), Regular Insulin (20u), Vasopressin (1 unit)

Mi Z, Novitzky D, Collins JF, Cooper D KC. The optimal hormonal replacement modality selection for multiple organ procurement from brain-dead organ donors. Clinical Epidemiology 2015;7 17-27.

** Excluding T4 Protocol