

HPAP-185 Donor Summary



HPAP	185	UNOS	
Recovery OPO	Gift of Life Donor Program	Allocation Via	UPENN <input checked="" type="checkbox"/> nPOD <input type="checkbox"/>
Age (years)	21	DCD	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Race	Hispanic	DBD	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Sex	M <input checked="" type="checkbox"/> F <input type="checkbox"/>	Admission to Cross Clamp	94 Hours 30 Mins.
ABO (Rh)	O Positive	Cross Clamp Time	11/30/2024 22:00 EST
BMI (Kg/m²)	30.75	Cold Ischemia Time*	12 Hours 28 Mins.
Weight (kg)	97.2		
Height (cm)	177.8		
Cause of Death	Anoxia	Preservation Solution	UW <input checked="" type="checkbox"/> HTK <input type="checkbox"/> UW/ Belzer Cold Storage/Viaspan/SP1
Mechanism of Injury	Drug Intoxication	Organs Recovered	Heart <input checked="" 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 25 Mins.
CPR / Time	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 25 minutes	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	25 minutes	Blood Culture	NA
Date /Time of Admission	11/26/2024 23:30 EST	PHS High Risk	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
		Acute Lung Injury	Hazy bibasilar opacities and pleural effusions are noted, more prominent on the left. No pneumothorax.

*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	-----	-----	-----	-----
Hyperlipidemia	-----	-----	-----	-----
Autoimmune disease	-----	-----	-----	-----
Family History	CAD <input type="checkbox"/>	Diabetes <input type="checkbox"/>	Auto immune disease <input type="checkbox"/>	Others:
Surgical History:	None			
Comments:	Social Hx: smoked Marijuana for 5 years Alcohol Hx: 1-2 Beer daily for 3 years			

Hemodynamic Profile

Average BP During Hospitalization (mmHg)	111/54	
Average Low BP During Hospitalization	87/50	Duration: 2-30 min.
Average BP in OR (mmHg)	120/70	
Average Low BP in OR (mmHg)	90/40	Duration: 10 min.
Average HR in OR (bpm)	105	
ABG-pH range	6.67 - 7.45	

INTERVENTION

Blood Products/Meds Transfused Before Organ Recovery

Product	Amount (ml)	Units	Total (ml)
Fresh Frozen Plasma	-----	-----	-----
PRBCs	-----	-----	-----
Platelets	-----	-----	-----
Norepinephrine (Levophed)	-----	Continuous IV 20 mcg/min started 97:00 hrs. before organ recovery.	
Vasopressin	-----	Continuous IV 0.03 units/min started 85:27 hrs. before organ recovery.	
Neo-Syneprine	-----	-----	-----
Epinephrine	-----	-----	-----
Phenylephrine	-----	25 mcg/min (recorded in Echocardiogram page)	
Dopamine	-----	-----	-----



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Blood Products/Meds Transfused Intraoperative

Product	Amount (ml)	Units	Total (ml)
Fresh Frozen Plasma	-----	-----	-----
PRBCs	-----	-----	-----
Platelets	-----	-----	-----
Norepinephrine (Levophed)	-----	-----	-----
Vasopressin	-----	3 Units/min	-----
Neo-Synephrine (phenylephrine)	-----	50 mcg/min	-----
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	-0.003	-0.005
Cut-off values	20	5	0.01	0.02

*Sample obtained at time of organ recovery.

	C-peptide (ng/ml)	Proinsulin
Results	10.66	ND

*Sample obtained at time of organ recovery.

HLA (OPO)*

Class 1	A	31	68	Class II	DR	4	8
	B	35	35		DR51	N-Negative	N-Negative
	C	4	4		DR52	N-Negative	N-Negative
	Bw4	Negative			DR53	53	N-Negative
	Bw6	Positive			DQB1(DQ)	8	4
			DQA1		03	04	
			DPB1		04:02	04:02	
		DPA1	01	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	Positive	✓	-
HBcAb	Non-Reactive	✓	-
HBsAg	Non-Reactive	✓	-
HCV Ab	Non-Reactive	✓	-
HIV I/II	Non-Reactive	✓	-
Syphilis	Non-Reactive	✓	-
Procleix Ultrio	ND	-	-
Ultrio HBV	Non-Reactive	✓	-
Ultrio HCV	Non-Reactive	✓	-
Ultrio HIV	Non-Reactive	✓	-
Toxoplasma Ab	Negative	✓	-
SARS-CoV-2	Negative	✓	-



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Laboratory Panel

	Initial	Peak	Terminal
Na (mEq/L) (135-145)	136	151	141
Creatinine (<1.5)	1.42	2.15	1.08
Glucose (mg/dL) (60-150)	302	302	261
HbA1C%	6	-----	-----
Total bilirubin (0-1.0)	0.3	1.5	1.1
SGOT (AST) (0-40)	325	531	35
SGPT (ALT) (5-35)	394	651	91
Alkaline phosphatase (45-110)	126	166	113
Serum Amylase (23-851)	10	15	10
Serum Lipase (0-80)	4	6	4
WBC (THO/uL) (4.5-11.0)	22	22	9
Hgb (g/dL) (12-16)	14.7	19.3	10
Platelets (THO/uL) (150-350)	228	254	97
INR (<2.0)	1.2	1.3	1.2

Urinalysis

	1 st	2 nd	3 rd	4 th
Glucose	Positive: 50	Positive: 50	Positive: 1000	NA

Medications During Hospitalization

Steroids**	Solumedrol 1 gm		
Diuretics	Mannitol 50 gms		
T3 Protocol	-----		
T4 Protocol*	40 mcg/hr		
Insulin**	-----		
Antihypertensive	-----		
Vasodilators	-----		
DDAVP**	-----		
Total parenteral nutrition	-----		
Other	Lactated Ringers, Cefepime 2 gm, Vancomycin 2250 mg, Fentanyl 50 mcg, Hydrocortisone 50 mg,(8 doses), Ceftriaxone 1 gm(3 doses)	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