

HPAP -067 Donor Summary



HPAP	-067	UNOS	
Recovery OPO	PADV - GIFT of LIFE Donor Program	Allocation Via	UPENN <input checked="" type="checkbox"/> nPOD <input type="checkbox"/>
Age (years)	26	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	112 Hours 38 Min.
ABO (Rh)	A+ (A1 subtype)	Cross Clamp Time	08/11/2020 17:07
BMI (Kg/m²) Weight (kg) Height (cm)	34.97 96.8 166.37	Cold Ischemia Time*	16 Hours 53 Mins.
Cause of Death	Anoxia	Preservation Solution	UW <input checked="" type="checkbox"/> HTK <input type="checkbox"/>
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 7 Mins.
CPR / Time	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Greater than 5 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	Greater than 5 minutes	Blood Culture	No Growth
Date /Time of Admission	08/07/2020 00:29 EST	PHS High Risk	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
		Acute Lung Injury	Hazy bilateral perihilar opacities

*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	None	----	----	----
History of cancer	----	----	----	----
CAD	----	----		
Hypertension	----	----	----	----
Hyperlipidemia	----	----	----	----
Autoimmune disease	----	----	----	----
Family History	CAD <input type="checkbox"/>	Diabetes <input checked="" type="checkbox"/>	Auto immune disease <input type="checkbox"/>	Others:
Surgical History:	----			
Comments:	Maternal and paternal uncles had diabetes Patient had asthma, not treated with medicine Snorted Cocaine for 5 years Snorted methamphetamine for less than a year 1-2 daily drinks (beer or wine) for at least 8 years			

Hemodynamic Profile

Average BP During Hospitalization (mmHg)	140/79	
Average Low BP During Hospitalization	104/63	Duration: 5-60 min.
Average BP in OR (mmHg)	125/62	
Average Low BP in OR (mmHg)	86/50	Duration: 1 min.
Average HR in OR (bpm)	98	
ABG-pH range	7.26 - 7.4	

INTERVENTION

Blood Products/Meds Transfused Before Organ Recovery

Product	Amount (ml)	Units	Total (ml)
Fresh Frozen Plasma	----	----	----
PRBCs	----	----	----
Platelets	----	----	----
Norepinephrine (Levophed)	----	Started 69:50 hrs before organ recovery	
Vasopressin	----	----	----
Neo-Synephrine	----	----	----
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)	----	----	----
Epinephrine	----	----	----
Dopamine	----	----	----
Heparin	----	30,000	----

Initial Autoantibody Screening (nPOD): ELISA

Not performed for HPAP-T2D program

GAD-65	IA-2
Not Done	Not Done

Confirmatory results: Radioimmuno Assay (RIA)

	GAD-65 (unit/ml)	IA-2 (unit/ml)	Insulin AAB (unit/ml)	ZnT8 (unit/ml)
Results	0	0	0.002	-0.004
Cut-off values	20	5	0.01	0.02

*Sample obtained at time of organ recovery.

	C-peptide (ng/ml)	Proinsulin
Results	2.38	Not Done

*Sample obtained at time of organ recovery.

HLA (OPO)*

Class 1	A	29	68	Class II	DR	1	4
	B	44	48		DR51	N-Negative	N-Negative
	C	05	08		DR52	N-Negative	N-Negative
	Bw4	Positive			DR53	53	53
	Bw6	Positive			DQB1	8	5
			DQA1		01	03	
			DPB1		04:02	04:02	
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	Non-Reactive	✓	-
HBsAg	Non-Reactive	✓	-
HCV Ab	Non-Reactive	✓	-
HIV I/II	Non-Reactive	✓	-
Syphilis	Non-Reactive	✓	-
Procleix Ultrio	-	-	-
Ultrio HBV	Non-Reactive	✓	-
Ultrio HCV	Non-Reactive	✓	-
Ultrio HIV	Non-Reactive	✓	-
Toxoplasma Ab	Negative	✓	-
SARS-COV-02	Negative		-



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Laboratory Panel

	Initial	Peak	Terminal
Na (mEq/L) (135-145)	139	171	157
Creatinine (<1.5)	1.64	1.64	0.98
Glucose (mg/dL) (60-150)	355	355	336
HbA1C%	5.9	-	-
Total bilirubin (0-1.0)	0.4	0.6	0.6
SGOT (AST) (0-40)	272	272	24
SGPT (ALT) (5-35)	221	309	58
Alkaline phosphatase (45-110)	79	86	70
Serum Amylase (23-851)	268	495	391
Serum Lipase (0-80)	192	212	212
WBC (THO/uL) (4.5-11.0)	11.3	14.6	9.9
Hgb (g/dL) (12-16)	15.1	15.1	11.6
Platelets (THO/uL) (150-350)	287	287	128
INR (<2.0)	1.3	1.3	1.3

Urinalysis

	1 st	2 nd	3 rd	4 th
Glucose	500 A	-	-	

Medications During Hospitalization

Steroids**	3 doses of 40 mg methylprednisolone 4 days before organ recovery		
Diuretics	----		
T3 Protocol	----		
T4 Protocol*	----		
Insulin**	4-12 units of insulin-regular started 4 days before organ recovery for the duration of 31:49 hours		
Antihypertensive	----		
Vasodilators	----		
DDAVP**	2 mcg, 53:25 hrs before organ recovery		
Total parenteral nutrition	----		
Other	Albuterol, Atrovent	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