



			Ε-	
НРАР	165	UNOS		
Recovery OPO	MAOB - New England Organ Bank	Allocation Via	UPENN □	nPOD ⊠
Age (years)	44	DCD	YES □ N	0 🗵
Race	African American Ethnicity: Hispanic or Latino	DBD	YES ⊠ N	0 🗆
Sex	M ⊠ F□	Admission to Cross Clamp	112 Hour	s 42 Mins.
ABO (Rh)	O Positive	Cross Clamp Time	10/29/2023	16:42 EDT
BMI (Kg/m²)	30.932	Cold Ischemia	18 Hours	08 Mins.
Weight (kg)	100.6000	Time*	[25]	
Height (cm)	180.34			
Cause of Death	ANOXIA	Preservation Solution	UW ⊠ HTK□	
Mechanism of	CARDIOVASCULAR	Organs Recovered	Heart 🗵	Kidney □
Injury			Lung 🗵	Pancreas 🗵
			Liver ⊠	Intestine □
Cardiac	Yes ⊠	Intraoperative		
Arrest/Downtime	No □	time lapse from	00 Hours	01 Mins.
	10 Minutes	liver to pancreas		
		removal from the		
		peritoneal cavity:		
CPR / Time	Yes ⊠	Organs Discarded	Heart □	Kidney □
	No □		Lung □	Pancreas
	30 Minutes		Liver □	Intestine
			2.76.	
Total Est.	~ 40 minutes	Blood Culture		
Downtime	10 minutes downtime prior to EMS		Preliminary N	Negative
	arrival. EMS report unavailable; no estimated 30 minutes of combined		, 	_
	CPR between EMS and ER.			
Date /Time of	10/25/2023 00:00 EDT	PHS High Risk	YES □ NO ⊠	
Admission				
		Acute Lung Injury	_	worsening of right
			effusion.	mall right pleural

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



Medical History:

		Duration	Medications	Compliance	
Type of Diabetes	T2DM	diagnosed 3	Insulin 8u sq daily (sliding)	n/a	
		years ago			
History of cancer					
CAD					
Hypertension	yes	~ 2 years ago	Lasix 40mg q.d., Verapamil	UNKNOWN	
			120mg q.d. & Carvedilol		
			6.25mg BID (per medical record)		
Hyperlipidemia					
Autoimmune disease					
Family History	CAD □	Diabetes 🗆	Auto immune disease \square	Others:	
Surgical History:	foot surgery 2 months ago				
Comments:	Medical Hx: night sweats on occasion, DM, seizures due to diabetes 2 months ago, HTN				
	Medication Hx: Insulin				
	ETOH Hx: Bo	eer 3-4 drinks a co	uple times a week		

Hemodynamic Profile

Average BP During Hospitalization (mmHg)	138/78	
Average Low BP During Hospitalization	87/57	Duration: 4 – 43 min.
Average BP in OR (mmHg)	90/65	
Average Low BP in OR (mmHg)	85/55	Duration : 5 minutes
Average HR in OR (bpm)	105	
ABG-pH range	6.91 - 7.43	

INTERVENTION

Blood Products/Meds Transfused Before Organ Recovery

Product	Amount (ml)	Units	Total (ml)	
Fresh Frozen Plasma				
PRBCs				
Platelets				
Norepinephrine (Levophed)		0.05 mcg/kg/min started 84:18 before organ recovery for the duration of 43:27 hrs.		
Vasopressin		Ongoing 0.03 U/min started 38:09 before organ recovery		
Neo-Synephrine		0.5 mcg/kg/min started 40:51 before organ recovery for the duration of 33:14 hrs.		
Epinephrine		0.05 mcg/kg/min started 89:40 before organ recovery for the duration of 05:12 hrs.		
Phenylephrine				
Dopamine				



Blood Products/Meds Transfused Intraoperative

Product	Amount (ml)	Units	Total (ml)
Fresh Frozen Plasma			
PRBCs			
Platelets			
Norepinephrine (Levophed)			
Vasopressin		5.24 U	
Neo-Synephrine (phenylephrine)			1212.03 Volume(cc)
Epinephrine			
Dopamine			
Heparin		30,000	

Initial Autoantibody Screening (nPOD): ELISA

Not performed for HPAP-T2D program

GAD-65	IA-2
Not performed	Not performed

Confirmatory results: Radioimmuno Assay (RIA)

	GAD-65 (unit/ml)	IA-2 (unit/ml)	Insulin AAB (unit/ml)	ZnT8 (unit/ml)
Results	6	0	0.056	0.005
Cut-off values	20	5	0.01	0.02

^{*}Sample obtained at time of organ recovery.

	C-peptide (ng/ml)	Proinsulin	
Results	1.78	ND	

^{*}Sample obtained at time of organ recovery.

HLA (OPO)*

Class 1	Α	24	66	Class II	DR	11	13
	В	18	58	1	DR51	N-Negative	N-Negative
	С	06	07		DR52	3*02	N-Negative
	Bw4	Positive			DR53	N-Negative	N-Negative
	Bw6	Positive			DQB1	7	9
					DQA1	03	05
					DPB1	04:01	04:02
					DPA1	01	01
Comment:							



Confirmatory HLA (UPENN)*

Not performed for HPAP-T2D program

Class 1	Α		Class II	DRB1	
	В			DRB3	
	С			DRB4	
				DRB5	
				DQB1	
				DQA1	
				DPB1	
				DPA1	

^{*}HLA typing performed using NGS

Infectious Disease Serology

		Hemo/Plasma Dilution Statu		
Test	Result	Qualified	Non-Qualified	
EBV IgG	Positive	✓	-	
EBV IgM	Negative	✓	-	
CMV IgM	Positive	✓	-	
VMV IgG	Negative	✓	-	
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	Positive	✓	-	
SARS-CoV-2	Negative	1	-	



Laboratory Panel

	Initial	Peak	Terminal
Na (mEq/L) (135-145)	142	152	152
Creatinine (<1.5)	1.9	6.8	6.8
Glucose (mg/dL) (60-150)	299	364	173
HbA1C%	8.7		
Total bilirubin (0-1.0)	0.4	1.5	0.6
SGOT (AST) (0-40)	269	591	39
SGPT (ALT) (5-35)	268	445	112
Alkaline phosphatase (45-110)	79	191	167
Serum Amylase (23-851)	NA	NA	38 (10/28/23)
Serum Lipase (0-80)	95 (10/26/23)	95	8 (10/28/23)
WBC (THO/uL) (4.5-11.0)	11.7	18	13.2
Hgb (g/dL) (12-16)	11.4	11.4	9.4
Platelets (THO/uL) (150-350)	170	262	180
INR (<2.0)			

Urinalysis

	1 st	2 nd	3 rd	4 th
Glucose	Negative	Negative	Positive: 500 H	Negative

Medications During Hospitalization

Steroids**	Solumedrol 1000 mg			
Diuretics	Lasix 60-80 mg			
T3 Protocol				
T4 Protocol*	yes			
Insulin**	3-10 U100, started 79:22hrs before organ recovery			
Antihypertensive				
Vasodilators				
DDAVP**				
Total parenteral nutrition				
Other	Arginine Vasopressin, Sodium Bicarbonate 100cc/hr., Dextrose 2 gm, Calcium Gluconate 1gm, Vancomycin1250 mg q 24hrs, Zosyn 3.375gm, Amiodarone150 mg, rocuronium 50 mg, Insulin 16.46 U	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