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HPAP	088	UNOS			
Recovery OPO	FLFH - OurLegacy	Allocation Via	UPENN □ nPOD ⊠		
Age (years)	37	DCD	YES □ NO ⊠		
Race	White	DBD	YES ⊠ NO □		
Sex	M⊠ F□	Admission to Cross Clamp	102 Hours 25 Mins.		
ABO (Rh)	A1	Cross Clamp Time	03/18/2021 13:35 EST		
BMI (Kg/m²) Weight (kg) Height (cm)	32.817 109.900 183.00	Cold Ischemia Time*	20 Hours 19 Mins.		
Cause of Death	Anoxia	Preservation Solution	UW ⊠ HTK□		
Mechanism of Injury	NONE OF THE ABOVE	Organs Recovered	Heart □ Kidney ⊠ Lung □ Pancreas ⊠ Liver □ Intestine □		
Cardiac Arrest/Downtime	Yes ⊠ No □	Intraoperative time lapse from liver to pancreas removal from the peritoneal cavity:	Hours Mins.		
CPR / Time	Yes ⊠ No □	Organs Discarded	Heart		
Total Est. Downtime	5 minutes	Blood Culture	No Growth		
Date /Time of Admission	03/14/2021 07:10 EST	PHS High Risk	YES □ NO ⊠		
		Acute Lung Injury	Patchy atelectasis in right lower lobe		

<sup>\*</sup>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 March 5, 2021	Unknown pills	Yes		
History of cancer						
CAD						
Hypertension						
Hyperlipidemia						
Autoimmune disease						
Family History	CAD □	Diabetes 🛛	Auto immune disease □	Others:		
Surgical History:	None					
Comments:	Medical Hx: back herniated disc and nerve damage, Pt was getting several tooth abscesses which he would drain himself full body seizure 2 days before hospitalization, Pt had one bad leg due to nerve damage. Over the last two weeks he developed foot drop on his good leg and was using a walker. changed diet and lost 20-30 LB over the last year, pt's BP was always high at the doctor, but never officially diagnosed.  Social Hx: Smoking Hx: Cigarettes 1 pack and a half per day for 20 years,urine tox screen (+) for THC  Family Hx: Mother has diabetes					

### **Hemodynamic Profile**

Average BP During Hospitalization (mmHg)	121/82	
Average Low BP During Hospitalization	112/72	Duration: NA
Average BP in OR (mmHg)	120/80	
Average Low BP in OR (mmHg)	108/66	Duration:
Average HR in OR (bpm)	90	
ABG-pH range	7.2 – 7.51	

#### **INTERVENTION**

## **Blood Products/Meds Transfused Before Organ Recovery**

Product	Amount (ml)	Units	Total (ml)	
Fresh Frozen Plasma				
PRBCs				
Platelets				
Norepinephrine (Levophed)		3 - 8 MCG/MIN started 3 days before organ recovery for the duration of 74:10:00 hrs.		
Vasopressin		0.03 Arginine vasopressin unit/min started 3 days before organ recovery for the duration of 66:50 hrs.		
Neo-Synephrine				
Epinephrine				
Phenylephrine				
Dopamine				



#### **Blood Products/Meds Transfused Intraoperative**

Product	Amount (ml)	Units	Total (ml)
Fresh Frozen Plasma			
PRBCs			
Platelets			
Norepinephrine (Levophed)			
Vasopressin			
Neo-Synephrine (phenylephrine)			
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	0.002	-0.003
<b>Cut-off values</b>	20	5	0.010	0.020

<sup>\*</sup>Sample obtained at time of organ recovery.

	C-peptide (ng/ml)	Proinsulin
Results	0.13	ND

<sup>\*</sup>Sample obtained at time of organ recovery.

## **HLA (OPO)\***

Class 1	Α	2	32	Class II	DR	4	11
	В	35	44		DR51	N-Negative	N-Negative
	С	04	07		DR52	52	N-Negative
	Bw4	Positive			DR53	53	N-Negative
	Bw6	Positive			DQB1	7	8
					DQA1	03	05
					DPB1	02:01	04:01



### Confirmatory HLA (UPENN)\*

#### Not performed for HPAP-T2D program

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

<sup>\*</sup>HLA typing performed using NGS

### **Infectious Disease Serology**

		Hemo/Plasma	Dilution Status
Test	Result	Qualified	Non-Qualified
EBV IgG	Positive	1	-
EBV IgM	Negative	✓	-
EBNA	Positive	1	-
CMV	Positive	1	-
HBcAb	Non -Reactive	1	-
HBsAg	Negative	1	-
HBsAb	Positive	1	-
HCV Ab	Non -Reactive	1	-
HIV I/II	Not Done		
HIV Ag/Ab Combo:	Negative	1	-
Syphilis	Non -Reactive	1	-
Procleix Ultrio	Not Done		
Ultrio HBV (HBV NAT)	Not Done	1	-
Ultrio HCV (HCV NAT)	Negative	1	-
Ultrio HIV (HIV NAT)	Negative	1	-
Toxoplasma Ab	Negative	1	-
SARS-CoV-2	Negative	<b>√</b>	-



#### **Laboratory Panel**

	Initial	Peak	Terminal
Na (mEq/L) (135-145)	131	156	155
Creatinine (<1.5)	1.25	1.25	0.6
Glucose (mg/dL) (60-150)	422	422	106
HbA1C%	10.3		
Total bilirubin (0-1.0)	0.3	0.7	0.6
SGOT (AST) (0-40)	127	153	17
SGPT (ALT) (5-35)	158	198	42
Alkaline phosphatase (45-110)	86	93	82
Serum Amylase (23-851)	5		
Serum Lipase (0-80)	22	22	7
WBC (THO/uL) (4.5-11.0)	19.2	21.1	19.6
Hgb (g/dL) (12-16)	13.3	13.3	12.5
Platelets (THO/uL) (150-350)	331	331	225
INR (<2.0)	1.1	1.3	1.3

#### Urinalysis

	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>
Glucose	Positive: 3+	Negative	Negative	Positive: Trace	Negative

### **Medications During Hospitalization**

Steroids**	Solumedrol 1gm q24hr				
Diuretics	Lasix prn				
T3 Protocol					
T4 Protocol*	Yes				
Insulin**					
Antihypertensive					
Vasodilators					
DDAVP**					
Total parenteral nutrition					
Other	Vanco 1gm q12hrs, Vec , Zosyn3.375gm	Specify			
	q8hrs, Kcl, Mag sulfate, Ca gluconate ,				

<sup>\*</sup>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.

<sup>\*\*</sup> Excluding T4 Protocol