

HPAP	136	UNOS			
Recovery OPO	Jefferson Cherry Hill Hosp	Allocation Via	UPENN ⊠ nPOD □		
Age (years)	29	DCD	YES □ NO ⊠		
Race	Caucasian	DBD	YES ⊠ NO □		
Sex	M ⊠ F□	Admission to Cross Clamp	177 Hours 35 Mins.		
ABO (Rh)	A1(positive)	Cross Clamp Time	11/15/2022 09:35 EST		
BMI (Kg/m²)	27.24	Cold Ischemia	7 Hours 13 Mins.		
Weight (kg) Height (cm)	182.88 91.1	Time*			
Cause of Death	Anoxia	Preservation Solution	UW ⊠ HTK□ Belzer Cold Storage /Viaspan/SPS-1		
Mechanism of Injury	Drug Intoxication	Organs Recovered	Heart ⊠ Kidney ⊠ Lung ⊠ Pancreas ⊠ Liver ⊠ Intestine □		
Cardiac Arrest/Downtime	Yes ⊠ No □ Unknown	Intraoperative time lapse from liver to pancreas removal from the peritoneal cavity:	Hours Mins.		
CPR / Time	Yes ⊠ No □ Unknown	Organs Discarded	Heart ☐ Kidney ☐ Lung ☐ Pancreas ☐ Liver ☐ Intestine ☐		
Total Est. Downtime	Unknown	Blood Culture	NA		
Date /Time of Admission	11/08/2022 00:00 EST	PHS High Risk	YES □ NO ⊠		
		Acute Lung Injury	Interval mild improvement of bilateral perihilar and bibasilar opacities.		

<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						
History of cancer						
CAD						
Hypertension						
Hyperlipidemia						
Autoimmune disease						
Family History	CAD □	Diabetes 🗆	Auto immune disease □	Others:		
Surgical History:	Left hand tendon surgery 13 years ago					
Comments:	Medical Hx: Depression, GERD, previous overdose 2014					
	Medication Hx: Xanax (5 years), Omeprazole,10mg (5 years)					
	Social Hx:	Smoked cigare	ttes 0.5 packs a day as a teenag	ger (2 years)		
	5-7 drinks	(vodka or rum)	once a week for 1.5 years			
	Drug Hx: Polysubstance abuse (cocaine, marijuana, benzos w/ IVDA					
	Opiates in the past). Heroin, Mrth and Crack for 5 years last used 7 years					
	ago. Coca	ine, Xanax and	THC for 5 years last used 1 wee	ek ago .		

## **Hemodynamic Profile**

Average BP During Hospitalization (mmHg)	141/86	
Average Low BP During Hospitalization	108/52	Duration: 5 -110 min.
Average BP in OR (mmHg)	102/70	
Average Low BP in OR (mmHg)	40/20	Duration: 8 min.
Average HR in OR (bpm)	130	
ABG-pH range	7.22 – 7.48	

### **INTERVENTION**

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

Product	Amou nt (ml)	Units	Total (ml)	
Fresh Frozen Plasma				
PRBCs				
Platelets				
Norepinephrine (Levophed)		0.05 mcg/kg/min started 50:35 hrs. before		
		organ recovery.		
Vasopressin				
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)		300 mcg/kg/min	
Epinephrine			
Dopamine			
Heparin			

## Initial Autoantibody Screening (nPOD): ELISA

GAD-65	IA-2
NA	NA

#### **Confirmatory results: Radioimmuno Assay (RIA)**

	GAD-65 (unit/ml)	IA-2 (unit/ml)	Insulin AAB (unit/ml)	ZnT8 (unit/ml)
Results	0	0	0.001	0.002
<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	7.14	ND

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

### HLA (OPO)\*

Class 1	Α	3	32	Class II	DR	15	16
	В	65	27		DR51	51	51
	С	02	08		DR52	Negative	Negative
	Bw4	Positive			DR53	Negative	Negative
	Bw6	Positive			DQB1	5	6
					DQA1	01	01
					DPB1	04:01	04:01
					DPA1	01	01
Comment	•						



# Confirmatory HLA (UPENN)\*

Class 1	Α	03:01	32:01	Class II	DRB1	15:01	16:01
	В	14:02	27:02		DRB3		
	С	08:02	02:02		DRB4		
					DRB5	01:01	02:02
					DQB1	05:02	06:02
					DQA1	01:02	
					DPB1	04:01	
					DPA1	01:03	

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

### **Infectious Disease Serology**

		Hemo/Plasma	a Dilution Status
Test	Result	Qualified	Non-Qualified
EBV IgG	Negative	✓	-
EBV IgM	Negative	✓	-
CMV	Positive	✓	-
HBcAb	Non-Reactive	<b>√</b>	-
HBsAg	Non-Reactive	✓	-
HCV Ab	Non-Reactive	✓	-
HIV I/II	Non-Reactive	✓	-
Syphilis	Non-Reactive	✓	-
Procleix Ultrio	ND	-	-
Ultrio HBV	Non-Reactive	<b>✓</b>	-
Ultrio HCV	Non-Reactive	✓	-
Ultrio HIV	Non-Reactive	<b>✓</b>	-
Toxoplasma Ab	Negative	✓	-
SARS-CoV-2	Negative	1	-



### **Laboratory Panel**

	Initial	Peak	Terminal
Na (mEq/L) (135-145)	137	169	161
Creatinine (<1.5)	1.48	1.48	0.59
Glucose (mg/dL) (60-150)	290	290	197
HbA1C%	5.4		
Total bilirubin (0-1.0)	0.9	0.9	0.2
SGOT (AST) (0-40)	353	353	27
SGPT (ALT) (5-35)	452	452	30
Alkaline phosphatase (45-110)	76	84	56
Serum Amylase (23-851)	41	41	19
Serum Lipase (0-80)	28	28	8
WBC (THO/uL) (4.5-11.0)	10.8	20.6	18.3
Hgb (g/dL) (12-16)	13.5	15.5	11.1
Platelets (THO/uL) (150-350)	185	209	149
INR (<2.0)	1.27	1.27	1.1

### Urinalysis

	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>
Glucose	3+			150 - Abnormal

### **Medications During Hospitalization**

Steroids**					
Diuretics					
T3 Protocol					
T4 Protocol*					
Insulin**					
Antihypertensive					
Vasodilators					
DDAVP**					
Total parenteral nutrition					
Other	Precedex 0.2 mcg/kg/min, Propofol 20 mcg/kg/min, 3% HTS, Zosyn 3.375 gm,	Specify			
	Keppra 1000mg, Valproate 2000 mg,				
	Potassium Chloride 20 mEq, Magnesium				
	Sulfate 2 gm, Vancomycin 2000mg,				
	Cefazolin 1000mg, Albuterol 2.5 mg				

<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