

HPAP	158	UNOS			
Recovery OPO	GLDP	Allocation Via	UPENN ⊠ nPOD □		
Age (years)	46	DCD	YES □ NO ⊠		
Race	Hispanic	DBD	YES ⊠ NO □		
Sex	M⊠ F□	Admission to Cross Clamp	99 Hours 13 Mins.		
ABO (Rh)	O Positive	Cross Clamp Time	07/30/2023 02:07 EDT		
BMI (Kg/m²)	35.36	Cold Ischemia	08 Hours 01 Mins.		
Weight (kg)	115	Time*			
Height (cm)	180.34	Time			
Cause of Death	Anoxia	Preservation	UW ⊠ HTK□		
Cause of Death	, iiioAid	Solution	UW/Belzer Cold		
		Joiation	Storage/Viaspan/SPS-1		
Mechanism of	Drug Intoxication	Organs Recovered	Heart □ Kidney ⊠		
Injury	Drug intoxication	Organis necovered	Lung Pancreas		
, y					
O a all a a	. 57		Liver ⊠ Intestine □		
Cardiac	Yes ⊠	Intraoperative	[
Arrest/Downtime	No □	time lapse from	01 Hours 00 Mins.		
	Unknown	liver to pancreas			
		removal from the			
		peritoneal cavity:			
CPR / Time	Yes ⊠	Organs Discarded	Heart □ Kidney □		
	No □		Lung □ Pancreas □		
	Unknown		Liver □ Intestine □		
Total Est.	Extended	Blood Culture	NA		
Downtime					
Date /Time of Admission	07/25/2023 22:54 EDT	PHS High Risk	YES □ NO ⊠		
		Acute Lung Injury	Bibasilar hazy opacities		
		, J	due to airspace collapse in		
			the lower lungs.		
	1	1			

^{*}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	3 years	Insulin and Metformin	No	
			3 years unsure about the doses		
History of cancer					
CAD					
Hypertension					
Hyperlipidemia					
Autoimmune disease					
Family History	CAD □	Diabetes 🛛	Auto immune disease 🗆	Others:	
		Mother			
Surgical History:	bilateral inguinal hernia repair (2020)				
Comments:	MedicalH	x: HTN, HLD, DI	M 2 x2 years, rhabdo, PNA, obe	sity, GERD, bilateral	
	inguinal hernias, stroke (2020 - left sided weakness)				
	Social Hx: Polysubstance abuse, previous overdose, smoker. snorted				
	Cocaine for 25 years and smoked Marijuana for 30 years.				
	Toxicolog	y screen Result	s: +THC, Cocaine, Fentanyl		

Hemodynamic Profile

Average BP During Hospitalization (mmHg)	133/64	
Average Low BP During Hospitalization	108/57	Duration:15 – 180 min
Average BP in OR (mmHg)	110/72	
Average Low BP in OR (mmHg)	99/60	Duration: 60 min.
Average HR in OR (bpm)	88	
ABG-pH range	7.08 – 7.31	

INTERVENTION

Blood Products/Meds Transfused Before Organ Recovery

Product	Amount (ml)	Units	Total (ml)	
Fresh Frozen Plasma				
PRBCs				
Platelets				
Norepinephrine (Levophed)		18 – 25 mcg/min started98:30 hrs. before		
		organ recovery.		
Vasopressin		0.03 units/min started 89:37 hrs. before		
		organ recovery.		
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)		50 mcg/min	
Epinephrine			
Dopamine			
Heparin		30,000	

Initial Autoantibody Screening (nPOD): ELISA

Not performed for HPAP-T2D program

GAD-65	IA-2
GAD-65 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	0.000
Cut-off values	20	5	0.01	0.02

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

	C-peptide (ng/ml)	Proinsulin
Results	4.58	NA

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

HLA (OPO)*

Class 1	Α	1	3	Class II	DR	17	15
Cidoo I	В	60	50	Class II	DR51	51	N-Negative
	C	10	06	-	DR52	52	N-Negative
	Bw4	1		1	DR53	N-Negative	N-Negative
	Bw6	Negative		1		14-Negative	
	DWO	Positive			DQB1	2	6
					DQA1	01	05
					DPB1	04:01	04:01
					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 Status
Test	Result	Qualified	Non-Qualified
EBV IgG	Positive	1	-
EBV IgM	Negative	1	-
CMV	Positive	1	-
HBcAb	Non-Reactive	1	-
HBsAg	Non-Reactive	1	-
HCV Ab	Non-Reactive	1	-
HIV I/II	Non-Reactive	1	-
Syphilis Screening -	Cancelled	_	-
Nontreponemal (Automated)	(Gaptia ordered due to instrument error)		
Captia G Screen	Non-Reactive	✓	-
Procleix Ultrio	ND	-	-
Ultrio HBV	Non-Reactive	1	-
Ultrio HCV	Non-Reactive	1	-
Ultrio HIV	Non-Reactive	1	-
Toxoplasma Ab	Negative	√	-
SARS-CoV-2	Negative	✓	-



Laboratory Panel

	Initial	Peak	Terminal
Na (mEq/L) (135-145)	141	145	142
Creatinine (<1.5)	2.93	9.49	6.82
Glucose (mg/dL) (60-150)	396	396	295
HbA1C%	6.1		
Total bilirubin (0-1.0)	0.2	0.5	0.3
SGOT (AST) (0-40)	193	991	74
SGPT (ALT) (5-35)	131	587	247
Alkaline phosphatase (45-110)	159	262	107
Serum Amylase (23-851)	40	40	34
Serum Lipase (0-80)	25	51	51
WBC (THO/uL) (4.5-11.0)	29.7	29.7	22.6
Hgb (g/dL) (12-16)	9.6	11.5	7.4
Platelets (THO/uL) (150-350)	286	385	151
INR (<2.0)	1.2	1.2	1.1

Urinalysis

	1 st	2 nd	3 rd	4 th
Glucose	Positive: 250	Positive: 150	NA	NA

Medications During Hospitalization

Steroids**				
Diuretics				
T3 Protocol				
T4 Protocol*	40 mcg/hr			
Insulin**	Insulin Regular 4 units/hr started 92:25 hrs. before organ recovery			
Antihypertensive				
Vasodilators				
DDAVP**				
Total parenteral nutrition				
Other	Vancomycin 1000-2000 mg, Calcium	Specify		
	Gluconate 1 gm, Zosyn 4.5 gm			

^{*}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