



НРАР	140	UNOS			
Recovery OPO	PADV- Gift of life donor	Allocation Via	UPENN ⊠	**DOD [
Recovery OPO	program	Allocation via	UPENN 🗵	nPOD □	
Age (years)	29	DCD	YES □ N	0 🗵	
Race	Caucasian	DBD	YES ⊠ N	0 🗆	
Sex	M□ F⊠	Admission to	106 Hour	s 26 Mins.	
		Cross Clamp		<u> </u>	
ABO (Rh)	A (A1) Positive	Cross Clamp Time	01/10/2023	20:04 EST	
BMI (Kg/m²)	31.71	Cold Ischemia	15 Hours	37 Mins.	
Weight (kg)	94.6	Time*			
Height (cm)	172.72				
Cause of Death	Anoxia	Preservation	_	TK□	
		Solution	Storage/Viasp	an/SPS-1	
Mechanism of	Drug Intoxication	Organs Recovered	Heart \square	Kidney ⊠	
Injury			Lung 🗵	Pancreas ⊠	
			Liver 🗵	Intestine \square	
Cardiac	Yes ⊠	Intraoperative			
Arrest/Downtime	No □	time lapse from	00 Hours	15 Mins.	
	Unknown	liver to pancreas			
		removal from the			
		peritoneal cavity:			
CPR / Time	Yes ⊠	Organs Discarded	Heart \square	Kidney \square	
	No 🗆		Lung \square	Pancreas □	
	25 Min.		Liver □	Intestine \square	
	CPR/ACLS w epi x4 and narcan				
	x2, V-fib with defib x1 and additional Epi x1 to ROSC, ETI in				
	field				
Total Est.	Unknown	Blood Culture	No Growth,	day 5	
Downtime					
Date /Time of	01/06/2023 09:38 EST	PHS High Risk	YES □ NO ⊠		
Admission					
		Acute Lung Injury	Left mid to lower lung zone and		
			right midlung zone opacities representing aspiration		
			pneumonia, No sizable pleural		
			effusion or pne	·	

^{*}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:		
	Mother,	paternal				
	paternal	grandmother				
	grandfather,	and				
	grandmother	grandfather				
Surgical History:	None	Listed				
Comments:	Medical Hx: as	thma, used inha	lers PRN since childhood, allergy	to Bactrim		
	Beaten by dug	June 2022 no tr	eatment received			
	Medication Hx: albuterol inhaler since Childhood					
	Social Hx: Poly	substance abuse	e, Snorted opiates, oxycodone fo	r 10 Years, Adderall		
	used for 4 years stopped 1 year ago Smoking: smoked cigarettes ½- 1 PPD for the					
	last 10 -13 yea	rs .Alcohol: beer	1-3 drinks 3 times a week for 5	years		

Hemodynamic Profile

Average BP During Hospitalization (mmHg)	119/77	
Average Low BP During Hospitalization	99/69	Duration: 60 Min.
Average BP in OR (mmHg)	100/80	
Average Low BP in OR (mmHg)	70/40	Duration: 5 Min.
Average HR in OR (bpm)	80	
ABG-pH range	6.76 – 7.43	

INTERVENTION

Blood Products/Meds Transfused Before Organ Recovery

Product	Amount (ml)	Units	Total (ml)	
Fresh Frozen Plasma				
PRBCs				
Platelets				
Norepinephrine (Levophed)		20 mcg/min started	103:54 hrs. before organ recovery	
		6-10 mcg/min starte	ed 30:04 hrs. before organ recovery	
		for the duration of 10:27 hrs.		
Vasopressin		0.04 units/min started 102:59 hrs. before organ recovery		
-		2.4 - 0.6 units/hr. started 30:04 hrs. before organ		
		recovery for the duration of 14:56 hrs. and ongoing.		
Neo-Synephrine				
Epinephrine		6 mg/min (x6 dose	es) started 105:42 hrs. before	
		organ recovery for the duration of 1:21		
Phenylephrine		25-50 mcg/min started 20:56 hrs. before organ		
		recovery for the duration of 4:57hrs and ongoing.		
Dopamine				



Blood Products/Meds Transfused Intraoperative

Product	Amount (ml)	Units	Total (ml)
Fresh Frozen Plasma			
PRBCs			
Platelets			
Norepinephrine (Levophed)			
Vasopressin			
Neo-Synephrine (phenylephrine)		25 mcg/min	
Epinephrine			
Dopamine			
Heparin		30,000	

Initial Autoantibody Screening (nPOD): ELISA

GAD-65	IA-2
ND (due to equipment failure at the OPO	ND (due to equipment failure at the OPO)

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	-0.002
Cut-off values	20	5	0.010	0.020

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

	C-peptide (ng/ml)	Proinsulin
Results	10.4	ND

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

HLA (OPO)*

Class 1	Δ.	2	2	Class II	DD	1	11
Class 1	Α		Z	Class II	DR	1	11
	В	39	44		DR51	N-Negative	N-Negative
	С	05	12		DR52	52	N-Negative
	Bw4	positive			DR53	N-Negative	N-Negative
	Bw6	positive			DQB1	7	5
					DQA1	01	05
					DPB1	04:02	04:02
					DPA1	01	01
Comment	•						



Confirmatory HLA (UPENN)*

Class 1	Α	02:01		Class II	DRB1	01:01	11:01
	В	39:01	44:02		DRB3	02:02	
	С	05:01	12:03		DRB4		
					DRB5		
					DQB1	03:01	05:01
					DQA1	01:01	05:05
					DPB1	04:02	
					DPA1	01:03	

^{*}HLA typing performed using NGS

Infectious Disease Serology

		Hemo/Plasma	a 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	Non-Reactive	1	-
Procleix Ultrio	ND	_	-
Ultrio HBV	Non-Reactive	1	-
Ultrio HCV	Non-Reactive	1	-
Ultrio HIV	Non-Reactive	1	-
Toxoplasma Ab	Negative	1	-
SARS-CoV-2	Negative	✓	-



Laboratory Panel

	05/09/2022	Initial	Peak	Terminal
Na (mEq/L) (135-145)	138	140	153	153
Creatinine (<1.5)	0.9	1.4	1.8	0.81
Glucose (mg/dL) (60-150)	97	439	439	179
HbA1C%	4.7	5		
Total bilirubin (0-1.0)	0.3	0.1	0.9	0.7
SGOT (AST) (0-40)	13	123	345	26
SGPT (ALT) (5-35)	24	119	329	131
Alkaline phosphatase (45-110)	71	53	70	63
Serum Amylase (23-851)	NA	NA	27	25
Serum Lipase (0-80)	NA	NA	31	26
WBC (THO/uL) (4.5-11.0)	NA	12.4	32.2	9.7
Hgb (g/dL) (12-16)	NA	13	15.4	9.8
Platelets (THO/uL) (150-350)	NA	191	191	74
INR (<2.0)	NA	1.11	1.69	1.2

Urinalysis

	1 st	2 nd	3 rd	4 th
Glucose	Negative	Negative	Negative	ND

Medications During Hospitalization

Steroids**	Solumedrol 1g q6			
Diuretics	Mannitol 50 gm, Lasix 100 gms			
T3 Protocol				
T4 Protocol*	40 mcg/hr.			
Insulin**				
Antihypertensive				
Vasodilators				
DDAVP**				
Total parenteral nutrition	nutrition			
Other	Arginine vasopressin, Sodium	Specify		
	Bicarbonate 125 ml/hr. and 50 mEq,			
	Potassium Chloride 10mEq, Magnesium			
	Sulfate 2 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