Recommendations for minimum donor data entered and uploaded in OPTN KPD

The KPD UNet system has 3 different fields:

- Fields with R are required to save the page
- Fields with * are required for the donor and candidate to be eligible to participate in match run (you can save the page so watch out for this)
- Fields with neither R or * next to them are optional

Many optional fields hold information valuable for candidate hospitals to make a decision in acceptance of the matched donor. An alternative to completing the optional fields is to upload the donor medical record. Even if you enter all the fields, uploading the donor record enables the matched candidate to make a more informed decision when entering a preliminary response to the match offer. It also helps you and other centers comply with deadlines.

Helpful hints:

- A second person must verify donor ABO before the donor is eligible to participate in match runs.
- Two individuals must review candidate unacceptable antigens before the candidate is eligible (one must be from the HLA lab).
- Keep the printed donor chart to send with the packaged kidney later.

Many hospitals cannot directly upload the chart but must print, scan, and upload the scanned document.

Coordinators report it helpful for donor hospitals to scan, label, and upload Donor CTA report and HLA reports as separate documents, to help matched candidate centers more easily respond to match offers.

If you need assistance uploading donor medical records, contact UNOS Customer Service (UNet Help Desk) at 1-800-978-4334. or unethelpdesk@unos.org. Refer to OPTN Policies 13 and 14 for more detailed living donor evaluation and KPD requirements.

| Consults | s: | |
|----------|--------|--|
| | 1. | Psychosocial evaluation-including social history |
| | 2. | Independent Living Donor Advocate evaluation |
| | 3. | Surgeon evaluation |
| | 4. | Nephrologist evaluation-including physical exam, donor & family history, kidney specific history, weight in KG |
| | 5. | Dietary |
| | 6. | Pharmacy |
| | 7. | Miscellaneous consultation reports |
| Labs: | | |
| | 1. | All general lab work |
| | 2. | Transmissible disease screening |
| | 3. | Endemic transmissible disease |
| | 4. | Kidney specific tests |
| | 5. | ABO, including subtyping –two source documents |
| | 6. | KPD Histocompatibility/HLA typing (Label and upload as a separate document) |
| | 7. | Other metabolic testing |
| Radiolog | gy rep | ports: (system currently unable to upload actual images) |
| | 1. | CT/renal imaging (Label and upload as a separate document) |
| | 2. | CXR |
| | 3. | Ultrasound, if applicable |
| | 4. | Miscellaneous radiology reports |
| Cardiolo | gy: | |
| | 1. | EKG |
| | 2. | Echo, if applicable |
| | 3. | Stress test, if applicable |
| | 4. | Cardiac cath, if applicable |
| Cancer s | scree | ning: |
| | 1. | Pap smear, if applicable |
| | 2. | Mammogram, if applicable |
| | 3. | PSA, if applicable |
| | 4. | Colonoscopy with pathology, if applicable |
| Consent | :s: | |
| | 1. | Signed living donor informed consent document |
| | 2. | Signed KPD informed consent |
| | 3. | Agreement to accept shipped kidney, if not included in general KPD consent |
| | 4. | Signed KPD release of protected health information document |