Match Run Options for Waiting List Candidates and KPD Exchange-Ending Donors

Current system limitations prevent performing a match run when the living donor recovery hospital and the waiting list recipient hospital are different. Below are the different options transplant hospitals have to obtain a match run for candidates on their waiting list with a KPD exchange-ending donor from a different hospital.

Option 1: Test Donor Match Run

- 1. Log into DonorNet and start the process to add a test donor and initiate a matchrun.
- 2. Enter the living donor's information.
 - List COD as "Other: Living KPD donor."
 - Answer "No" to DCD question.
- 3. Perform the match run and view results.

Pros	Cons
The transplant hospital can add the test donor and run the match themselves.	Living donor information will be substituted for "test deceased donor."
 Can use the donor's actual name and enter the first initial of the donor's name and the original UNOS ID into the first name field. Process is fairly quick. A second Tiedi record for that donor is not created. Allocation will be based on a more accurate KDPI score for that donor. 	 Double ABO verification is not required. A few more data entry fields need to be filled out, including creatinine and diabetes history.

Option 2: Living Donor Match Run (performed by OPO or Organ Center)

To acquire a living donor match, whether performed by the local OPO or UNOS Organ center, the importing transplant center must first log into TIEDI and add the living donor into the system; this creates a second UNOS ID for the donor. The first ID having been created by the living donor recovery hospital.

• The question "Allow OPO to run match?" must be answered "Yes."

A. Local OPO:

- 1. The importing transplant center will provide the local OPO with the new, second UNOS donor ID, and other required donor information (donor height, weight, HLA, and serology results.)
 - The OPO will search for the living donor in DonorNet by the second UNOS donor ID, enter the remaining donor information, and run a kidney match.
 - The OPO will provide the match run number and should close the match run at sequence zero.
- 2. Importing transplant center will search DonorNet for the match run by the second donor ID/match ID to view the match run and choose potential candidates for crossmatching against the exchange ending donor.
 - When removing the recipient from the waiting list after transplant, use the first generated UNOS donor ID created by the recovery hospital. You are not required to remove or inactivate the second donor created.

B. UNOS Organ Center:

- 1. A completed "Living Donor Match" Request form is faxed to the UNOS Organ Center. This form is provided by the Organ Center. The second UNOS Donor ID must be listed on the form.
 - Upon receipt, the Organ Center enters the living donor information into DonorNet.
 - The Organ Center faxes the donor information back to the transplant center to confirm data entered is complete and accurate.
- 2. The center verifies the donor information is correct by signing the form and faxing back to the Organ Center. The Organ Center will initiate a living donor match run, provide the match run number to the center and close the match run at zero.
- 3. Importing transplant center will search DonorNet for the match run by the second donor ID/match ID to view the match run and choose potential candidates for crossmatching against the exchange ending donor.
 - When removing the recipient from the waiting list after transplant, use the first generated UNOS ID created by the recovery hospital. You are not required to remove or inactivate the second donor created.

Pros	Cons
 A living donor match run eliminates deceased donor allocation questions (i.e. DCD) from influencing match results. Can use the donors actual name but the UNOS ID will be different from the first record created. 	 The transplant hospital can register the donor in TIEDI, but cannot run the living donor match themselves. An existing donor gets a second donor record and two UNOS ID numbers. If the recipient is incorrectly removed from the waiting list with the 2nd living donor ID, it creates a follow up for the transplant hospital importing the donor. The process is lengthy. Living donor match runs utilizes allocation based on a donor with KDPI scores greater than 20% but less than 35%.

Updated: 11/1/2018