

AUTHORIZATION FOR RELEASE OF HEALTH INFORMATION

I authorize _____
(Name of person or facility which has information)
to release health information to:

Name of person or facility to receive health information

Specify name/title of person to receive health information, if known

Street Address, City, State, Zip Code

Fax Number (if information is to be faxed)

The purpose of this release is for (check one or more):

- ☐ Continuity of care or discharge planning
- ☐ Billing and payment of bill
- ☐ At the request of the patient/patient representative
- ☐ Other (state reason)

Please specify the health information you authorize to be released:

Type(s) of health information: _____

Date(s) of treatment: _____

The following information will not be released unless you specifically authorize it by marking the relevant box(es) below:

- ☐ Information pertaining to drug and alcohol abuse, diagnosis or treatment (42 C.F.R. §§2.34 and 2.35).
- ☐ Information pertaining to mental health diagnosis or treatment (Welfare and Institutions Code §5328, *et seq.*)
- ☐ Release of HIV/AIDS test results (Health and Safety Code §120980(g)).
- ☐ Release of genetic testing information (Health and Safety Code §124980(j)).

EXPIRATION OF AUTHORIZATION

Unless otherwise revoked, this Authorization expires _____ (insert applicable date or event). If no date is indicated, the Authorization will expire 12 months after the date of my signing this form.

Print Name

Signature (Patient, Parent, Guardian)

Date

Time

Relationship to Patient (Parent, Guardian, Conservator, Patient Representative)

Witness (only if patient unable to sign) or Interpreter

AUTHORIZATION FOR RELEASE OF HEALTH INFORMATION

**NOTICE OF PRIVACY PRACTICE
ACKNOWLEDGEMENT OF RECEIPT**

The UCSF Notice of Privacy Practice provides information about how we may use and disclose protected health information about you.

In addition to the copy we have provided you, copies of the current notice are available by accessing our website at <http://www.ucsfhealth.org> and may be obtained throughout UCSF Health System.

I acknowledge that I have received the Notice of Privacy Practice.

Signature of Patient or Patient's Representative

____ / ____ / ____
Date

Print Name

Relationship to Patient

Name of Interpreter (if applicable)

If written acknowledgement is not obtained, please check reason:

☐ Notice of Privacy Practice Given - Patient Unable to Sign

☐ Notice of Privacy Practice Given - Patient Declined to Sign

☐ Other _____

.....

Signature of UCSF Representative

____ / ____ / ____
Date

Print Name

Department

**TERMS AND CONDITIONS OF SERVICE:
ADMISSION, MEDICAL SERVICES,
AND FINANCIAL AGREEMENT (Page 1 of 3)**

1. UCSF MEDICAL CENTER: is part of the University of California and is comprised of its hospital(s) (UCSF Medical Center, UCSF Medical Center at Mt. Zion, and UCSF Benioff Children's Hospital), its hospital-based clinics, its Primary Care Network clinics, and the UCSF School of Medicine.

2. MEDICAL CONSENT: I consent to medical treatments or procedures, X-ray examinations, drawing blood for tests, medications, injections, taking of treatment related photographs, videotaping, laboratory procedures, and hospital services rendered to me under the general and special instructions of the physicians or other health care professionals assisting in my care. To facilitate my care, I consent to evaluation and examination by a physician or other health team professionals who may be physically distant from me via telehealth technologies, including but not limited to two-way video, digital images, and other telehealth technologies as determined by my providers. I also consent to my admission to the UCSF Medical Center if this is necessary for my care.

I understand that I may be receiving education and instructions about my medical condition. UCSF Medical Center uses a variety of methods and vendors for this education and instruction and I consent to receiving this instruction using those methods and vendors, including, but not limited to Oneview, EMMI, Healthwise and Healthnuts.

3. TEACHING, RESEARCH AND HEALTHCARE INSTITUTION: The University of California including UCSF Medical Center, is a teaching, research and healthcare institution. I understand that residents, interns, medical students, students of ancillary health care professions (e.g., nursing, x-ray, rehabilitation therapy), post-graduate fellows, and other trainees and visiting professors may observe, examine, treat, and participate at the request and under the supervision of the attending physician in my care as part of the University's medical education programs.

I also understand that a University institutional review board approves projects conducted by the University researchers in accordance with state and federal law. As a result, I understand that I may be contacted and asked to participate in research studies but I am under no obligation to do so. My decision whether to participate or not will not affect my ability to obtain medical care.

4. USE OF MEDICAL INFORMATION AND SPECIMENS: I understand that my medical information, photographs, and/or video in any form may be used for other UCSF Medical Center purposes, such as quality improvement, patient safety and education. I also understand that my medical information and tissue, fluids, cells and other specimens (collectively, "Specimens") that UCSF Medical Center may collect during the course of my treatment and care may be used and shared with researchers and any such use will be in accordance with state and federal law, including all laws and regulations governing patient confidentiality, in the manner outlined in the UCSF Medical Center Notice of Privacy Practice. I understand that under California law, I do not have any rights to any commercially useful products that may be developed from such research.

5. PERSONAL VALUABLES: UCSF Medical Center asks patients and families not to bring valuable items into its facilities. UCSF Medical Center shall not be liable for the loss of or damage to any money, documents, jewelry, glasses, dentures, furs, cell phones, electronic devices or other articles of unusual value and shall not be liable for loss or damage to any personal property, unless deposited in the fireproof safe maintained by UCSF. The liability for loss of any personal property deposited with UCSF Medical Center shall be no more than \$500.

6. RELEASE OF MEDICAL INFORMATION: The State of California Information Practices Act requires UCSF Medical Center to provide the following information to individuals who supply information about themselves. As a patient of UCSF Medical Center, I will be asked to submit certain personal information, such as my address and phone number, Social Security number, insurance information, medical history and treatment. The princi-

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pal purpose for requesting this information is to ensure accurate identification, continuity of medical care, and payment for such care. Under federal and state laws and regulations, UCSF Medical Center is authorized to maintain this information. As required by UCSF Medical Center, furnishing all information requested is mandatory unless otherwise noted. I understand that failure to provide such information may affect my medical care and/or insurance benefits and coverage.

UCSF Medical Center will obtain my written authorization to release information about my medical treatment, except in those circumstances when UCSF Medical Center is permitted or required by law to release information (see UCSF Medical Center's Notice of Privacy Practices for a description of the specific circumstances under which UCSF Medical Center may release this information). For example, UCSF Medical Center may release a copy of my patient record to health care providers, health plans, governmental agencies and workers' compensation carriers. Additionally, I understand that if I am diagnosed with cancer, a reportable disease in California, UCSF Medical Center is required by law to report my diagnosis to the State Department of Health Services.

7. SMOKING: Smoking is NOT allowed on the campuses of UCSF Benioff Children's Hospital, UCSF Medical Center and UCSF Medical Center at Mount Zion (herein referred to as the Medical Center). Smoking has been determined to be hazardous to your health. If you are a smoker, we advise you to stop smoking. If you have a recent history of smoking in the last year, we advise you to continue to stop smoking. Alternatives to help curb your cravings for nicotine are available. Patients are not allowed to leave the hospital to smoke. Please speak with your clinical team to learn more about these alternatives or if you have any questions concerning smoking cessation. This policy applies to patients and visitors of the Medical Center.

8. BEHAVIOR: UCSF has a zero tolerance for intimidation, violence, and discrimination in our facilities. As such, UCSF is committed to maintaining a safe workplace that is free from threats and acts of intimidation, violence, and discrimination. For the safety and security of our patients, visitors and staff, weapons, knives, alcohol, illegal drugs and other dangerous materials are not allowed in our facilities. It is the expectation of the Medical Center that you and your visitors conduct yourselves in a respectful, non-violent, non-discriminatory, and non-abusive manner and that you do not leave the hospital at any time during your stay. It is against hospital policy for you to leave your assigned unit with property belonging to the hospital (example: gowns, IV machines, oxygen tanks, etc.). You may be discharged if you leave the hospital without informing your clinical team or if you repeatedly violate the hospital's smoking policy.

I also understand that under California law I or my visitors cannot film, record, or disclose any images or sounds of our/my conversation with a UCSF employee or physician without the consent of all parties to the conversation and that violation of this law may result in criminal or civil liability. Please refer to your patient handbook for more information concerning your stay here at UCSF's hospitals and facilities.

9. FINANCIAL AGREEMENT: I understand that even if I have insurance, I may be financially responsible for some or all of my medical services. For instance, if I have a co-pay or deductible, I agree to pay the amounts I owe. If I do not have insurance that covers the service I receive, I agree to pay The Regents of the University of California for professional, hospital and clinic services, including UCSF Medical Center physician services, in accordance with the regular rates and terms of UCSF Medical Center. I also agree to pay for other professional services provided at UCSF Medical Center by other health care providers. If I am unable to pay, I understand I may qualify for public assistance, special payment arrangements and/or charity care. I also understand that when this agreement is signed by my spouse, parent or a financial guarantor, my spouse, parent or financial

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guarantor shall be jointly and individually liable with me for payment, including all collection fees (attorneys' fees, costs and collection expenses), in addition to any other amounts due. Unpaid accounts referred to outside agencies for collection bear interest at the current legal rate.

- 10. ASSIGNMENT OF BENEFITS (INCLUDING MEDICARE BENEFITS):** I authorize and direct payment to UCSF Medical Center of any insurance benefits including hospital insurance and unemployment compensation disability benefits otherwise payable to or on my behalf for UCSF Medical Center services, including emergency services, at a rate not to exceed UCSF Medical Center actual charges. I understand that I am financially responsible for charges not paid pursuant to this agreement. I further agree that any credit balance resulting from payment of insurance or other sources may be applied to any other account owed to UCSF Medical Center by me. Patients insured by Part A of the Medicare Act (as primary payer): UCSF Medical Center shall transfer title prior to use of any property (excluding fixed assets or equipment) furnished or supplied to its patient or other customer in connection with its medical services billed pursuant to Medicare Part A. Notwithstanding this title provision, patient accepts that the disposal of medical products or other supplies after use will be governed by UCSF Medical Center handling and disposal protocols.

I have read, agreed to and received a copy of this Terms and Conditions of Service.

Signature of Patient or Signature of Patient Representative

Signature of Witness (required if patient unable to sign) Relationship of Representative to Patient

Signature of Interpreter Language Used

Date of Signing

Elective Section:

Financial Responsibility Agreement by Person Other than the Patient or the Patient's Legal Representative

I agree to accept financial responsibility for services rendered to the patient and to accept the terms of the Financial Agreement (Paragraph 9) and Assignment of Benefits (including Medicare Benefits) (Paragraph 10) set forth above.

Date Financially Responsible Party Witness

PATIENT RIGHTS NOTICE: (This question only applies to inpatient admissions only)

Would you like your agent under a durable power of attorney for health care or your next of kin to receive a copy of the Patient Rights and Responsibilities Notice? If so, please ask your admitting representative or contact the Patient Relations Department at (415) 353-1936.

**INFORMED CONSENT FOR ADULT KIDNEY
TRANSPLANT RECIPIENTS****Introduction**

The UCSF Kidney Transplant Program was established in 1963. We have performed over 8000 kidney transplants. UCSF is a longtime leader in improving the way transplants are done, and making it possible for more people to receive one.

In order for you to make this decision about participating in the kidney transplant process at UCSF and having surgery to receive a new kidney, you must understand the risks and benefits. This process is known as informed consent. This consent form provides information about the kidney transplant process at UCSF and the surgery that will be discussed with you. Once all of your questions have been answered, you may sign this form showing that you are, of your own free will, choosing to participate in the kidney transplant process and become a candidate to receive a new kidney. You are free to ask any questions, change your mind, withdraw your consent at any time or opt out of the kidney transplant program at any time.

The Kidney Transplant Team

At UCSF, the care you receive will be given by a transplant team:

- Surgeons are the doctors who will put in your new kidney.
- Nephrologists, or kidney doctors, will take care of you and your new kidney after your transplant surgery.
- Transplant coordinators will be your main contact with the UCSF transplant team. They will answer your questions as you get ready for your transplant.
- Nurses will care for you in the hospital and in the clinic after your transplant.
- Social workers will focus on your non-medical needs during the transplant process, such as transportation, housing, and financial, family or community support.
- Financial counselors will help you understand your insurance plans and your financial responsibility.
- Administrative assistants will schedule your appointments, send letters and packets, and gather test results for review.
- Additional consults: you may be referred to other services for evaluation or consultation if the transplant team feels it is appropriate. Examples include a Pharmacist (for education and management of medication) or Registered Dietician (for nutritional assessment or education).

Confidentiality

UCSF complies with state and federal confidentiality laws. Except where allowed by law, communication between you and UCSF will remain confidential. This includes, but is not limited to, the potential donor. Similarly, you cannot receive medical information about the donor and his or her tests, unless the donor has given permission to share that information. However, under these laws, hospital staff who are involved in your medical care may review your medical record. They are required to maintain confidentiality according to the law and the policies of UCSF.

If you do receive a transplant, data about your case, which will include your identity, will be sent to the Organ Procurement and Transplantation Network (OPTN), the United Network for Organ Sharing (UNOS) and may be sent to other places involved in the transplant process as permitted by law.

The Evaluation Process

During your evaluation, you will meet with the kidney doctor, a transplant coordinator, a social worker and a financial counselor.

- The kidney doctor and transplant staff will discuss any medical problems that need to be evaluated before the transplant, such as heart disease, infections, bladder problems, ulcer disease or obesity.
- The social worker will meet with you to discuss transportation, housing, financial and family support needs with respect to transplant.
- A financial counselor will meet with you to assist you in understanding the covered benefits of your insurance policy. You should also contact your insurance company to make sure you understand your insurance benefits or whether you have insurance benefits related to kidney transplant.
- The transplant coordinator will arrange for a series of tests that are needed to decide on the best treatment for you.

You will have an opportunity to ask any questions. We encourage you to learn as much as possible about the transplant process before making a decision about whether you wish to agree to become a candidate for or receive a kidney transplant operation. You do not have to make a decision by the end of the evaluation session. You can let us know later.

National and Transplant Center-Specific Outcomes

During the evaluation process you will be provided with UCSF's most current outcome data as released by the Scientific Registry of Transplant Recipients (SRTR). The document provided to you will include UCSF's current 1-year post-transplant patient survival rate and 1-year post-transplant kidney survival rate. The document will also explain how these rates compare to the national average. If at any time you need help interpreting the report, please let your transplant coordinator know. You can visit the following websites for further information:

Scientific Registry for Transplant Recipients (SRTR) www.ustransplant.org
Organ Procurement and Transplantation Network (OPTN) www.optn.org

Special Programs

UCSF offers special kidney transplant programs such as: alternative living donor, extended criteria donor and high risk donor programs. These options will be discussed with you during your evaluation appointment.

After the Evaluation

About four weeks after your evaluation visit you will receive a letter that will tell you your blood type, whether you are considered to be a candidate for a transplant, and any tests that must be completed with your local physician.

Selection Criteria and Suitability for Transplant

Although a kidney transplant may be appropriate for many people with end stage kidney (renal) disease, there are certain conditions that may affect your eligibility for a transplant. Your suitability is determined by your current health condition, past medical history, psychosocial history, laboratory results, diagnostic data and financial status. Each patient's suitability for transplantation is discussed in our kidney transplant selection conference. UCSF's Kidney Transplant Program has established specific selection criteria. This list was included in the informational packet sent to you before your evaluation and is also available to you upon request.

Selection Conference

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After all the details of your case are reviewed by the consulting transplant physician and nurse, your case is presented in detail at our selection conference. Transplant surgeons, kidney specialists, transplant coordinators, social workers and financial counselors are present and have input about your case. If more tests are needed to assess your health, they may be recommended.

The conference may decide that a kidney transplant is too risky for you and may lead to worse health than remaining on dialysis. These types of decisions are discussed with your own physician who will then discuss the decision with you. If the conference recommends that you not receive a kidney transplant, we can answer any questions you may have about this decision.

Post Transplant Regimen

After transplant, you will be asked to return to the transplant clinic frequently for lab tests, chest x-rays, clinic visits, and other diagnostic procedures to monitor how well your transplant is working. Please notify the UCSF transplant team now, or when you become aware of any problems you may have that would prevent you from keeping your appointments or taking medication.

Support Issues

It is essential that you are prepared for your post operative needs before you are called for your transplant. You will need to identify a support person(s) that will help you accurately follow your post-operative care program by supervising your medication, exercise program, diet and hygiene in the first weeks of your recovery after surgery. Your support person(s) will also need to provide transportation and accompany you to your laboratory and doctor appointments.

Financial Responsibilities

Your medical care after your transplant is very expensive; consequently, you must keep current with your insurance, what it covers, how it works, and your responsibilities. If, for example, your insurance requires authorization for you to come to clinic appointments, you must get the authorization from your primary care provider. Medications after transplant are not free and you will need to make arrangements to make sure they are available. You will need to keep your financial counselor and social worker informed about the progress of obtaining funds and about any changes in your insurance coverage.

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The Surgical Procedure

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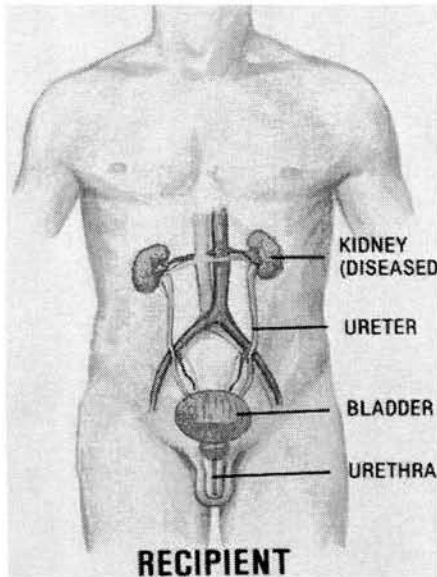
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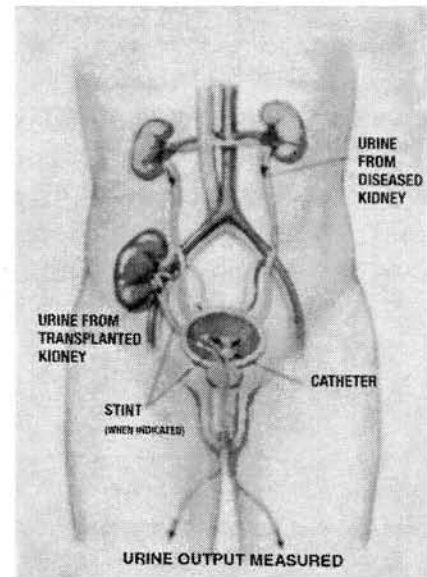
Surgery – What to Expect

Most people have two kidneys. They are in the back underneath your rib cage (see diagram on the left). They remove waste products, fluids, help produce blood cells and control your blood pressure. We do not usually remove your original kidneys during a transplant. If they must be removed, we will discuss this when we meet with you individually.



After your kidneys remove waste products and fluids, you end up with urine that must leave your body.

The ureter transports the urine from the kidney to the bladder. The bladder sits in your pelvic region and inflates like a balloon. When there is enough urine in your bladder, you feel pressure in your pelvic region to empty it.



Your new kidney will be placed in the front, lower pelvic region, usually on the right side near the appendix (**see diagram on the right**).

Sometimes the new kidney might be placed on the left side. The donor provides the kidney, the artery and vein that bring blood to and from the kidney, and the ureter, which transports the urine to the bladder.

After the transplant, you will wake up with an 8-inch, crescent moon-shaped incision in your pelvic region and a bladder catheter in place to measure how much urine your new kidney is making.

Surgical Risks

General Anesthesia

The transplant surgery will be done under general anesthesia. There are a number of known possible risks with any surgery done under general anesthesia. An anesthesiologist will explain these to you and you will need to sign a separate consent for anesthesia.

Blood Transfusions and Risk Involved with use of Blood or Blood Products

Bleeding during or after surgery may require blood transfusions or blood products that can contain bacteria and viruses that can cause infection. You will be asked to sign a separate consent form at the time of surgery regarding transfusion risk.

Potential Surgical Complications

There are risks in all surgeries. Many complications are minor and get better on their own. In some cases, the complications are serious enough to cause death or to require another surgery or medical procedure.

Blood vessel clotting (thrombosis) occurs in a small percentage of kidney transplants. This is a clot that develops in one of the major blood vessels that goes to your kidney. Clotting can cause failure of the kidney transplant and most patients who develop a clot in the kidney will require another kidney transplant.

Some patients experience urinary or bladder complications such as leaks and narrowing (strictures). If this happens, tubes may need to be placed through the skin to aid in the healing process. In some cases surgery is necessary to correct the urinary and bladder leaks. Poor healing of the incision can lead to a bulging or hernia. More surgery may be needed to repair this.

Fluid can sometimes collect around the kidney, which can lead to problems with kidney function, or pressure in the area of the kidney. This problem, known as a lymphocele, may require additional surgery to repair.

Rarely, damage to nerves may occur. This can happen from direct contact within the abdomen or from pressure or positioning of the arms, legs or back during the surgery. Nerve damage can cause numbness, weakness, paralysis and/or pain. In most cases, these symptoms are temporary, but in rare cases they can last for extended periods or even become permanent.

Other rare, but possible, complications include: injury to structures in the abdomen, pressure sores on the skin due to positioning, burns caused by the use of electrical equipment during surgery, damage to arteries and veins, pneumonia, heart attack, stroke, and permanent scarring at the site of the abdominal incision.

The doctors and nurses will watch you very closely after surgery. They will look for bleeding or wound healing problems, poor blood circulation to the kidney, and urine flow problems. If a problem develops, you may need to return to surgery.

Many patients ask whether they can die from a kidney transplant. The answer is yes. A kidney transplant is a surgical procedure, and sometimes complications develop. Most deaths, however, are caused by other medical problems, such as heart disease, diabetes and high blood pressure. The risk of dying from the surgery itself is low and happens in less than 1% of cases.

Medical Risks

Rejection - As a transplant recipient it is crucial that you take your anti-rejection medication and keep your medical appointments to decrease the risk of rejection. The risk of rejection never goes away. The signs and symptoms of potential rejection will be discussed with you while you are in the hospital.

Infections, High Blood Pressure, Diabetes, and High Cholesterol - The anti-rejection medicines sometimes can cause infections, high blood pressure, diabetes, high cholesterol or cancer. Patients commonly ask, "Well, I already have high blood pressure, diabetes, and high cholesterol. What does this mean for me?" It may mean that your medications will be changed. Diabetics who have not taken insulin before may need to do so after a transplant.

Opportunistic infections – These types of infections take advantage of weakened immune systems. Infections from bacteria, viruses, or fungi, are all possible after transplant. Specific viruses that transplant patients are more at risk to get include cytomegalovirus virus, Epstein-Barr virus, and polyoma BK virus.

- Cytomegalovirus (CMV) is a virus most adults have been exposed to in their lifetime. It is a virus which can present as an infection. A mild form could include fatigue. A serious form could cause severe illness and affect the kidney.
- Epstein - Barr virus (EBV) is a virus most adults have been exposed to in their lifetime. It can cause fever, sore throat or lymph node swelling in the neck. On rare occasions, high amounts of EBV in the body can lead to a type of lymphoma.
- Polyoma BK Virus can be present in the urine, blood or kidney after transplant. Most people are exposed to this virus during childhood but never feel sick. The virus may damage the transplanted kidney.

Cancer - Transplant patients probably are most concerned about the cancer risk. Your risk will be about 5% higher than that of the normal population. The two most common types of cancers that occur are lymphoma and skin cancer.

Sleepy Kidney - Sometimes a kidney doesn't work right away once it is transplanted. This is known as a "sleepy kidney" and it happens in 2 out of 10 transplants. It happens because the new kidney is outside the body for a period of time after it is removed from the donor. If your new kidney doesn't work right away, you may need dialysis during the time that the new kidney is "sleepy." This does not mean the new kidney is failing. It nearly always "wakes up." The time it takes to begin working may be as short as a couple of days, or could be as long as 6 weeks.

Recurrence of Original Kidney Disease - Some kidney diseases can reoccur in the new kidney. If that is a concern for you, we will discuss it when we meet individually.

Organ Donor Risk Factors There are several organ donor risk factors that could affect the success of your kidney transplant. These risks include, but are not limited to; the medical and social history of the donor; the age of the donor; the condition of the kidney used; or the possibility that you could be at risk of contracting HIV, hepatitis B virus (HBV), hepatitis C virus (HCV) or malaria if the donor is infected but the infection is not detectable at the time of donation. All donors are screened to prevent transmitting an infectious disease or cancer. These screening tests are not perfect, and on rare occasions, an infection or cancer can be passed on to the recipient.

When the time comes for you to receive an organ offer, the transplant team will discuss the possible risks associated with transplantation of that particular organ.

Psychosocial Risks

A serious illness can create many personal and family stresses. After your transplant, there will be different types of adjustments. You and your family can expect some ups and downs related to your physical condition as well as emotional reactions to this new phase in your life. Some possible side effects are depression, post traumatic stress disorder, generalized anxiety, anxiety regarding dependence on others and feelings of guilt. It is important that you notify your transplant team if you feel you may be experiencing any psychological side effects.

Financial Risks

After transplantation, some people lose eligibility for disability-based insurances like Medi-Care and Medi-Cal. Additionally, it is possible that future attempts to obtain medical, disability and life insurance may be jeopardized. If you think you are going to lose your insurance, talk with either the financial counselor or transplant social worker about what other coverage may be available. Do not wait to call until you have no insurance. You must plan ahead.

Transplantation by a Transplant Center Not Approved by CMS (Medicare)

If your transplant is not provided in a Medicare-approved transplant center, it could affect your ability to have your immunosuppressive drugs paid for under Medicare Part B. UCSF is a Medicare-approved transplant center. If at any time we lose our Medicare approval, we will notify you at least 30 days in advance and provide assistance if you choose to transfer to the waiting list of another Medicare-approved transplant center without losing the time you have accrued on the waiting list.

Benefits of Having a Kidney Transplant

A transplant is a good option for most patients.

- One reason is that transplantation may increase your lifespan. Studies have shown that patients who are carefully selected for transplant have an improved lifespan compared with patients who continue on dialysis.
- With hemodialysis and peritoneal dialysis, wastes are removed only during treatment. A transplanted kidney works 24 hours a day, 7 days a week, so waste products and fluids are continuously removed from your body.
- Another reason is because a transplant can improve your quality of life. For most patients, that means freedom to do things they enjoy, and the ability to return to work. This freedom comes with a responsibility though – to take medications as directed, maintain a healthy lifestyle, attend clinic appointments, and have all blood work completed.

Alternative Treatments

Kidney transplant may not be the right option for every patient. If the doctors who complete your evaluation feel that it is too dangerous for you to have a transplant, we will let you know, and you will continue on dialysis. If you feel that you do not want to take the risks of the transplant surgery or the anti-rejection medicines, you can continue with dialysis as you are doing now. If you are uncertain about the transplant option, it is also okay to go on the waiting list now, but change your mind later and be removed from the list.

Right to Refuse Transplantation

All transplant candidates have the right to withdraw his or her consent for transplantation at any time during the process.

Whom Do I Call if I Have Any Questions or Problems?

Please take your time to make your decision. Discuss it with your family and friends. Feel free to ask us questions also. For questions about the program, contact your pre-transplant coordinator at (415) 353-1551.

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Signatures

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I, the undersigned, have been informed about the UCSF Kidney Transplant Program purpose, procedures, possible benefits, risks and alternatives. I have received a copy of this consent document. I have been given the opportunity to ask questions and I have been told I can ask questions in the future. All of my questions have been answered to my satisfaction. I voluntarily:

agree _____ or do not agree _____ (initial appropriately) to participate in this program.

I am free to withdraw from the program at any time without need to justify my decision. I understand that I have the right to withdraw my consent at any time during this process. A withdrawal will not in any way affect my future treatment or treatment of my relative, friend or partner on the waiting list.

Printed Name of Patient

Signature of Patient

Date

Printed Name of Witness

Signature of Witness

Date

Questions & Answers
for **Transplant**
Candidates about
Multiple Listing and
Waiting Time Transfer



What are the OPTN and UNOS?

The Organ Procurement and Transplantation Network (OPTN) links all of the professionals involved in the nation's organ donation and transplantation system. The OPTN also strives to make more organs available and increase patient access for transplants. The United Network for Organ Sharing (UNOS) is a non-profit organization that operates the OPTN under a contract from the federal government.

The OPTN and UNOS continuously review new advances and research and use this information to improve organ transplant policies to best serve patients needing transplants. All transplant programs and organ procurement organizations are members of the OPTN and agree to follow its policies.

How am I listed for a transplant?

If you have a condition leading to organ failure, your doctor may recommend you for an organ transplant. To become a transplant candidate, you must be evaluated and accepted by a transplant hospital. It is up to each center to decide whether or not it will accept someone as a transplant candidate.

How am I considered for organs from deceased donors?

You are considered for available organs based on a combination of medical facts entered into a computerized matching program. These factors include blood and tissue type, medical urgency, body size, distance between the donor and transplant hospital and time spent waiting for a transplant.

The distance between the donor and transplant hospital is important because the less time the organ must be preserved outside the donor's body, the better the chance that it will function when transplanted. There are three levels considered:

- **local.** This is usually the area served by the local organ procurement organization (OPO) where the donation occurs. There are 58 OPOs nationwide. These areas are often statewide but can be smaller (such as a large city or part of a state) or larger (a multi-state area). Your transplant center can tell you what your local area is.
- **region or zone.** If there are no suitable local matches, organs are offered to patients at transplant centers in a wider area. Kidneys, livers, pancreases and intestinal organs are first offered within one of 11 regions of the United States. Heart and lung offers are considered for candidates within 500 miles of the donor site, then 1,000 miles, then 1,500 miles.
- **nationwide.** If there are no matches in the local area or region, organs will be offered to anyone in the United States who is a potential match.

What is multiple listing?

Multiple listing involves registering at two or more transplant centers.

Since candidates at centers local to the donor hospital are usually considered ahead of those who are more distant, multiple listing may increase your chances of receiving a local organ offer.

Could multiple listing shorten my waiting time for a transplant?

Some studies suggest multiple listing can shorten the average waiting times of kidney transplant candidates by several months. This does not guarantee that every multiple-listed patient will have a shorter waiting time.

Many factors affect how long you might wait for a transplant. Of course, not enough organs are donated each year to meet everyone's needs. Everyone in the transplant community shares the goal of increasing organ donation to save and enhance more lives.

Other waiting time factors include how urgent the patient is and how closely the donor and candidate match on body size and blood type. Some kidney and pancreas candidates have a "highly sensitized" immune system because of earlier transplants, pregnancy or multiple blood transfusions. Highly sensitized patients will only be good matches for a limited number of organ offers, so they often wait longer than non-sensitized candidates.

Are there any restrictions?

OPTN policy allows multiple listing. It will still be up to the individual center to decide whether to accept you as a candidate. You probably would not benefit from listing at multiple centers in the same local allocation area (which is usually the OPO). This is because waiting time priority is first calculated among candidates at all hospitals within the local donation area, not for each hospital individually.

Some transplant programs may not accept multiple-listed patients. Others may set their own requirements for multiple-listed candidates. If you are considering multiple listing, you should ask the transplant team how they handle such requests.

What is involved in multiple listing?

As with any transplant listing, you must be considered and accepted by a transplant center. This involves completing an evaluation and agreeing to meet any conditions set by the program (for example, ability to come to the hospital within a certain time if you are called for an organ offer).

You might check with your insurance provider to see if they will reimburse the cost of additional evaluations. You should also consider other costs associated with listing that insurance may not cover. For example, you may need to pay for travel and lodging if the center is further from your home. You should also find out whether your post-transplant medical care will be provided at the center

or can be transferred to a facility closer to your home. In addition, you would need to maintain current lab results and contact information for each transplant program where you list. Each program will need current information should they receive an organ offer for you. Through the OPTN database your center can know if you are multiple-listed but may not know the other hospital(s) where you are listed.

If I list at more than one center, how is my waiting time considered?

As soon as a center accepts you as a transplant candidate, your “waiting time” begins. Depending on the organ you need, waiting time may be a factor in matching you for an organ offer. Waiting time is a more important factor for certain organ types such as kidney and pancreas. It is less of a factor with heart, liver, and intestinal organs. For these organs more priority is given for factors such as medical urgency.

If you are a lung transplant candidate age 12 or older, waiting time will not be used at all in matching you with organ offers. Lung transplant priority is given for a combination of medical urgency and expected post-transplant survival. Waiting time is a factor for lung transplant candidates age 11 and younger.

The longest amount of time you have waited at any center is called your *primary waiting time*. If you list at multiple centers, your waiting time at each center will start from the date that center listed you. OPTN policy allows you to transfer your primary waiting time to another center where you are listed, or switch time waited at different programs. (For example, if you have waited 9 months at Center A and 6 months at Center B, you could switch your time to have 6 months at Center A and 9 months at Center B.)

You are not allowed to add up or split your total waiting time among multiple centers. (Again, assume you have waited 9 months at Center A and 6 months at Center B. You could not assume you have 15 total months of waiting time and assign 5 months to Center A and 10 months to Center B.)

Any request to transfer or switch waiting time must be approved by the transplant center(s) involved. Most transplant programs require a written request to swap or transfer waiting time, which will then be considered by the transplant team.

If I do not multiple-list but transfer my care to another hospital, what happens?

If you want to end your listing at one program and transfer to another, your primary waiting time can be transferred as long as you coordinate with both programs. The new transplant program will probably ask you to request in writing to transfer the waiting time. Keep in mind that if you end your listing at one program *before* another program formally accepts you, *you may risk losing all previous waiting time*.

Sometimes a transplant program may inactivate for a period of time (for example, to replace a key member of the transplant team who leaves) or close its operations. If this happens, the OPTN requires that the program contact you and provide for your continuing care. If the inactivation is short-term you may choose to remain listed until the program becomes active again, but you will not receive organ offers during that time. If the program closes, the staff will work with you to arrange care at another center without loss of your primary waiting time.

Where can I get additional information?

You should first contact the staff of the transplant program where you are listed or want to be listed. They will have the most specific information about how they handle requests for multiple listing and/or waiting time transfer. They will also make any needed arrangements with UNOS.

UNOS maintains a web site, Transplant Living, which contains extensive information for transplant candidates and recipients as well as their family members. The address is **www.transplantliving.org**. You may also wish to visit the OPTN web site at **www.optn.org**.

UNOS also maintains a toll-free phone information line for transplant candidates, recipients and family members. The number for Patient Services is 1-888-894-6361.

*The UNOS mission is to advance organ availability and transplantation
by uniting and supporting its communities for the benefit of patients
through education, technology and policy development.*



P.O. Box 2484, Richmond, VA 23218

www.unos.org

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Note to transplant candidates/family members:

In accordance with OPTN Policy 3.2.3, your transplant center is required to provide you with written information about multiple listing and transfer of waiting time. Your signature below confirms that your center provided you this booklet. Your center will keep this form on file to document compliance with this policy.

I have received the booklet Questions and Answers for Transplant Candidates and Families about Multiple Listing and Waiting Time Transfer.

Signature of Transplant Candidate/Family Member

Printed Name of Transplant Candidate

Date Received

Signature of Transplant Center Staff Member Providing Booklet