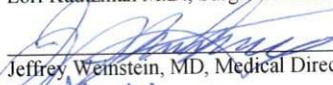
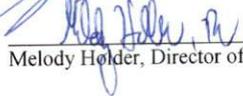


 The Transplant Institute METHODIST DALLAS Methodist Dallas Medical Center	Title: Vitamin A Repletion Protocol	Effective Date: 03/2025
	Section: Liver	
Approved by:  _____ Lori Kautzman M.D., Surgical Director		Revision Date(s):
 _____ Jeffrey Weinstein, MD, Medical Director Liver Transplant		Next review Date: 03/2028
 _____ Melody Holder, Director of Transplant Clinical Operations		

Purpose: To ensure uniform management of vitamin A deficiency prior to liver transplantation

Policy:

Goal: 0.3-1.2 mg/L (30 mcg/dL)

- Level < 0.3 mg/L (30 mcg/dL): 10,000 units daily and consider re-checking level in 4 weeks
 - If still < 0.3 mg/L (30 mcg/dL): increase to 20,000 units daily
 - Consider addition of zinc 50 mg daily

Note: risk of significant toxicity with level >1.2 mg/L (>120 mcg/dL)

References:

1. Lai JC, Tandon P, Bernal W, Tapper EB, Ekong U, Dasarathy S, Carey EJ. Malnutrition, Frailty, and Sarcopenia in Patients With Cirrhosis: 2021 Practice Guidance by the American Association for the Study of Liver Diseases. *Hepatology*. 2021 Sep;74(3):1611-1644. doi: 10.1002/hep.32049. Erratum in: *Hepatology*. 2021 Dec;74(6):3563. doi: 10.1002/hep.32224.
2. Koop AH, Mousa OY, Pham LE, Corral-Hurtado JE, Pungpapong S, Keaveny AP. An Argument for Vitamin D, A, and Zinc Monitoring in Cirrhosis. *Ann Hepatol*. 2018 Oct 16;17(6):920-932. doi: 10.5604/01.3001.0012.7192.