

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

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

**Policy:**

Goal (25-OH vitamin D level): > 30 ng/mL

- Level < 20 ng/mL: ergocalciferol 50,000 units once weekly and consider repeating level in 8 weeks
  - If level still < 20 ng/mL: continue ergocalciferol 50,000 units once weekly
  - If level ≥ 20 ng/mL: stop ergocalciferol 50,000 units once weekly and transition to maintenance therapy of cholecalciferol 2,000 units daily
- Level ≥ 20-30 ng/mL: cholecalciferol 2,000 units daily, may consider repeating level in 8 weeks to monitor for toxicity

Note: risk of significant toxicity with level >100 ng/mL

**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.