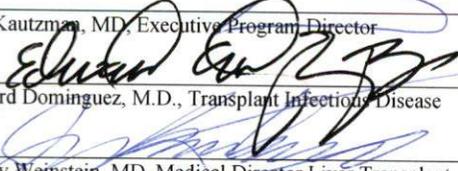


 The Transplant Institute METHODIST DALLAS Methodist Dallas Medical Center	Title: Management of HIV Positive Recipients	Effective Date: 06/29/2017
	Section: Liver and Kidney	
Approved by: <hr/> Lori Kautzman, MD, Executive Program Director  Edward Dominguez, M.D., Transplant Infectious Disease <hr/> Jeffrey Weinstein, MD, Medical Director Liver Transplant <hr/> Jose Castillo-Lugo, MD, Medical Director Kidney Transplant		Revision Date(s): 07/23/2019; 3/22/2022; 04/01/2025 Next review Date: 04/2028

Purpose: To ensure timely and uniform evaluation and monitoring of potential HIV positive transplant recipients

Policy: Criteria for Transplant:

Kidney: CD4 > 200 and HIV RNA < 50 x 4 months

Liver: CD4 > 100 and HIV RNA < 50 x 4 months

Procedure:

Pre Transplant Evaluation and Monitoring

- Transplant Infectious Disease (ID) to see the patient during initial evaluation and then every six months at a minimum until time of transplant
- CD4 count every 3-4 months
- HIV RNA PCR Quant every 3-4 months

Transplant Event

CD4 count (pre-op)

HIV RNA PCR Quant (pre-op)

Transplant ID consult

Post -Transplant Monitoring

Transplant ID follow up monthly x 3, then every 6 months until 2 years post-transplant then annually thereafter

CD4 count every 6 months- may be available from primary HIV provider

HIV RNA PCR Quant every 6 months - may be available from primary HIV provider

References:

1. Durand CM et al; HOPE in Action Investigators. HOPE in Action: A Prospective Multicenter Pilot Study of Liver Transplantation from Donors with HIV to Recipients with HIV. Am J Transplant. 2021 Nov 6. doi: 10.1111/ajt.16886. Epub ahead of print. PMID: 34741800