## **Organ Donors and Recipients**

### **Organ Donors**

- 1. When testing of organ donors is done postmortem. This blood can often be hemolyzed (ruptured red blood cells). Hemolysis of the blood adversely effects the HBsAg test which can give false positive test results.
  - a. Investigation with the next of kin should not be undertaken if the only lab present is a single positive HBsAg test. Instead, contact the patient's primary care provider (if known) to assess risk factors and hepatitis status prior to death.
  - b. NAT (DNA) testing and anti-HB core total testing should agree with the HBsAg result before doing a contact investigation for a deceased person. Generally, all donation centers will perform HBsAg, anti-HBC and HBV DNA testing.
  - c. If a center performs HBsAg testing only and is confirmed via neutralization an investigation will need to be done and contacts followed.
- 2. If no contact information is given with the reported labs or, for the next of kin, the event can be sent to the disease registrar for closure.

#### **Organ Recipients**

- 1. Transplant candidates and recipients are screened pre and post-transplant according the recommendations laid out in guidance #2.
  - a. Rigorous screening processes are in place for organ and tissue recipients
  - b. Most recipients will receive pre-transplantation vaccination to reduce the risk of HBV
  - c. Recipients consent is obtained prior to transplants
- 2. LHD roles:
  - a. If the recipient was not previously positive for either HBV or HCV a new investigation will need to occur
    - i. This should start with the provider and ruling out that the transplanted tissue or organ was the transmission risk unless already known prior to transplant.

CDC and HRSA will often be notified first if a transplant transmitted infection occurs.

#### **Guidance:**

- Solid Organ Transplantation and the Probability of Transmitting HIV, HBV, or HCV: A Systematic Review to Support an Evidence-based Guideline April 14, 2010 <a href="https://stacks.cdc.gov/view/cdc/12164/">https://stacks.cdc.gov/view/cdc/12164/</a>
- 2. PHS Guideline for Reducing Human Immunodeficiency Virus, Hepatitis B Virus, and Hepatitis C Virus Transmission Through Organ Transplantation- <a href="https://www.cdc.gov/transplantsafety/hc-providers/guidelines.html">https://www.cdc.gov/transplantsafety/hc-providers/guidelines.html</a>
- 3. CDC Transplant Safety; https://www.cdc.gov/transplantsafety/index.html

# **Transplant Centers in NC**

| NCMH - <u>University of North</u><br><u>Carolina Hospitals</u> | Chapel Hill,<br>NC   | Heart, Heart-Lung, Kidney,<br>Liver, Lung, Pancreas            | 888-263-5293 |
|--|----------------------|--|--------------|
| NCCM - <u>Carolinas Medical</u><br><u>Center</u>               | Charlotte, NC        | Heart, Kidney, Liver, Pancreas                                 | 800-562-5752 |
| NCDU - <u>Duke University</u><br><u>Hospital</u>               | Durham, NC           | Heart, Heart-Lung, Intestine,<br>Kidney, Liver, Lung, Pancreas | 800-249-5864 |
| NCEC - <u>Vidant Medical Center</u>                            | Greenville, NC       | Kidney, Pancreas   | 252-847-4100 |
| NCBG - <u>Wake Forest Baptist</u><br><u>Medical Center</u>     | Winston<br>Salem, NC | Heart, Kidney, Pancreas  | 336-716-2011 |