

# Frequently Asked Questions

## **Are you still accepting faxed referrals?**

No. As of April 1, 2021, we are only accepting online referrals.

## **Do the referral exclusion criteria apply to patients who are currently listed?**

No, these criteria apply only to newly received referrals.

## **Do we need to re-refer patients who are already listed or listed as inactive?**

No, there is no need to re-refer these patients.

## **If I submit a referral without a login, how can I get updates on the patient referral status?**

Please email [kidneyreferral@ucsf.edu](mailto:kidneyreferral@ucsf.edu) or call us at (415) 502-4819. However, we strongly encourage creating a login, as it will allow you to track your referrals on demand and access future updates and features.

## **If my office uses EPIC, do we still need to upload records?**

No, but please ensure the records are available through Care Everywhere. We may reach out to you for records that are not accessible.

## **What about patients who do not have access to a computer or the internet? How can they be successful transplant candidates?**

A strong support system is important in all stages of the transplant process. We encourage patients to reach out to their support network for help, including family, friends or their dialysis providers. If your center has a high volume of these patients, please reach out to us at [kidneyreferral@ucsf.edu](mailto:kidneyreferral@ucsf.edu), so we can arrange for an iPad at your facility.

## **What is the best time to refer a patient after they start dialysis?**

We encourage referral as soon as possible. Even if a patient is not close to being eligible for an organ offer, connecting with the transplant program can help them navigate a potentially stressful time and be better prepared for what's ahead.

## **What is the process for living donors? Should the patient be listed before the donor applies?**

Living donors can apply at any time; the potential recipient does not need to be listed. When living donors apply, they should include the name of the intended recipient, so we can link them appropriately when the time comes.

## **If a living donor ends up with end-stage renal disease (ESRD), what is the wait time for them to get transplanted?**

Living donors who develop ESRD receive waitlist priority after pediatrics and before highly sensitized patients, and can draw offers very quickly once they are listed.

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## **How will the waitlist look different than it is now?**

It's hard to predict the exact impact of our process improvements and allocation changes. We think that as we carry this work forward and get deeper into waitlist management process improvements, our waitlist will shrink, we will be able to do more transplants, and a greater proportion of our patients will be ready to receive organ offers at any given time.

## **Will the referral portal be updated with our current waitlist patients?**

Currently we are not able to offer this option, but are exploring tools for this purpose. In the meantime, please email [kidneywaitlist@ucsf.edu](mailto:kidneywaitlist@ucsf.edu) or call us at (415) 353-1117 for updates on your waitlisted patients.

## **If a referral is submitted for a patient with a body mass index (BMI) over 40, will they be placed in the pre-listing phase?**

Referrals will be declined for patients with a BMI over 40. If a patient has a BMI under 40 but does not meet BMI criteria for listing based on their comorbidities, they have an opportunity to be pre-listed and meet their individual goal.

## **If a patient is referred at the age of 69 and meets referral criteria, but turns 70 six months later, will their referral be declined or deemed eligible for living donor transplant only?**

Referrals are evaluated based on age at time of referral; a patient turning 70 during their evaluation process will not automatically disqualify them.

## **Are the contact emails secure? Should I encrypt my messages?**

All communications containing personal health information (PHI) must be encrypted, and messages received from us containing PHI will be encrypted. General questions that are not patient-specific and do not contain PHI do not need to be encrypted.

## **If another provider at my facility submits a referral, can I check on its status?**

You cannot check the status of referrals placed by other individuals with separate logins. If you would like to create a shared account for your facility, please reach out to us, and we can assist you.

## **Will the dialysis units still receive quarterly updates on our patients?**

Yes, you will continue to receive these updates. We are also currently working on ways to improve this process and make it easier.

## **Will there be someone assigned to provide outreach?**

Yes. We are looking forward to heading back out for in-person visits to our referring community as soon as COVID-19 restrictions allow.

## **What are the restrictions for patients using marijuana as part of treatment or recreationally?**

Marijuana use is legal in California and does not exclude a patient as a transplant candidate. Abuse of any substance, however, may exclude a patient. We also ask that cannabinoids be ingested and not smoked/ inhaled.

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## **Can a person who has had COVID-19 still get a transplant?**

Yes. A history of COVID-19 infection does not exclude a patient as a transplant candidate. They will need to have recovered and be appropriate candidates otherwise.

## **How does a patient accumulate time on the deceased donor waitlist?**

Candidates are granted wait time points based on waiting time (backdated to their chronic dialysis start date), and may accrue additional points based on their level of sensitization and other factors. Donor kidneys are matched with candidates based on how well that kidney is expected to function in a particular recipient, and the expected survival benefit. You can find more information about the kidney waitlist at [www.unos.org](http://www.unos.org).

## **Can you explain the recent allocation changes and how long patients can expect to wait?**

Kidneys are now allocated based on a 250-nautical-mile circle with the donor hospital at its center. So far, these changes appear to have expanded the donor pool for our patients to now include organs from areas we did not previously have access to. We do not know what the long-term effects on wait time will be at this time, but do not expect significant changes.

## **What is the average wait time to receive a kidney transplant?**

It varies by blood group. ABO O and B: 9 years, ABO A: 6-7 years, ABO AB: 4 years. Patients in all blood groups can shorten their time to transplant by finding a living donor.