

ASSESSMENT FOR TRANSPLANTATION

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Assessment for a multivisceral/intestinal transplant requires a multidisciplinary approach, including: /uni25CF transplant surgeons; /uni25CF intestinal failure physicians; /uni25CF transplant anaesthetists; /uni25CF hepatologists; /uni25CF psychiatrists and/or psychologists; /uni25CF radiologists; /uni25CF infectious disease physicians; /uni25CF transplant specialist nurses; /uni25CF dieticians. Assessment of venous access and the degree of liver fibrosis is critical. Patients on PN for a substantial time or who have - ultra-short gut are at high risk of developing IFALD. They will need a liver biopsy as part of the assessment process. Detailed venous mapping is essential in all candidates. Appropriate assessment of the cardiovascular and respi - ratory systems is necessary . Upper and lower gastrointestinal endoscopies may be necessary . Cross-sectional imaging of the abdomen to assess the - abdominal anatomy is central to operative planning. Significant renal impairment may result in the need to con - sider inclusion of a kidney a t the time of transplant. Patients should ha ve anaesthetic and psychiatric assessment and dietetic review .

2 are evaluated for the possibility of simultaneous renal transplantation

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