

UCMC Solid Organ Transplant

Donor Cultures - Treatment Guidelines

| Donor Culture | Treatment for Recipient | Consult Txp ID Attending |
|--|---|---|
| Urine | Yes (kidney) Maybe if MRSA (all organs) | Yes, if any positive (kidney only) Yes, for MRSA positive (all organs) |
| Sputum | Maybe if MRSA (all organs) | Yes, for MRSA positive (all organs) |
| Blood <i>(assume positive since usually lack follow up cultures; except Coag neg staph)</i> | Yes, except coag neg staph (all organs) | Yes, for all positives except coag neg staph (all organs) |
| Syphilis | Yes (all organs) Bicillin 2.4 million units weekly x 3* | No, not necessary (all organs) |
| Toxoplasma Donor IgG+ | Yes (all organs) 1 st line: Bactrim SS 1 tablet PO daily Alternative: Atovaquone 1500 mg PO daily Duration: same as PJP prophylaxis (refer to organ specific prophylaxis guidelines) | No, not necessary (all organs) |

*Outpatients: administer in transplant clinic as follows:

1. Place new order in Epic clinic visit encounter as clinic-administered med when patient arrives
2. Contact inpatient transplant clinical pharmacist to coordinate dispensing from Central Pharmacy and sent to tube #805
3. Warm to room temperature before administration to lessen the pain associated with injection
4. Administer by deep IM injection at a slow, steady rate in the dorsogluteal region (upper outer quadrant of the buttock) or the ventrogluteal region. Max volume 2mL per injection site. Recommend to use of 21G (or larger) 1" or 1.5" needles and inject slowly to prevent blockage within needle. 21G 1" needles available from 8CCP