## Pre-op Checklist for PEDIATRIC Kidney **Transplant Patients** ■ STAT lab work is ordered ON ARRIVAL TO UNIT and done. CMP, CBC with Diff, PT, PTT, INR, Type and Cross, cadaveric cross match send to HLA lab STAT, and final Flow Study needs to be negative Once on Peds Unit \*\*Patient may go into a semi-private room if that's the only room available, however must be in a private (terminally clean room) after surgery. Notify Transplant Surgery & Pediatric Nephrology Attending as soon as the patient arrives to unit. ☐ Check for consents Surgical and Anesthesia Keep patient NPO Check Allergies; Specifically ask about rabbit allergies. Ht and Wt and VS on admission. (Standing Scale) insert IV lock Hibiclens **shower** and shampoo Follow-up that the STAT CXR, and the EKG are ordered and done in a timely matter (Ordered on discretion of Transplant Surgeon and Pediatric Nephrologist On all transplant admits, please obtain blood glucose at bedside upon arrival, then q6h for patient with history of diabetes and all others q8h and PRN **FOR Peritoneal Dialysis Patients**: Send peritoneal fluid for a cell count & leave patient dry (empty) before sending the patient to the OR Patient Teaching - Review Post-op course with the patient; spirometer exercises Foley catheter Pain control (PCA instructions ■ Protective precautions Transplant Diary & Bill of Rights Review plan of care with patients parent or guardian Follow-up that pre-op meds Methylprednisone 15 mg/kg or max of 500mg in NS over 15 mins on call Thymoglobulin 1.5 mg /kg in 500 ml NS with .2 micron filter on call, should be sent to the OR Antibiotic (sent to OR) Add Transplant \*\*\*\*Have room terminally cleaned after patient sent. Updated 11/19