## STAMP guideline version 5.0 - 07feb2014

# Scandiatransplant Acceptable Mismatch Program (STAMP) and

## Local Acceptable Mismatch Program (LAMP)

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#### **STAMP**

## 1. General STAMP guidelines

#### **Purpose**

To increase the likelihood of offering a suitable kidney graft to highly immunized (HI) recipients, thus reducing their time on the waiting list.

#### Success criteria

- Reduced waiting time for highly immunized patients.
- Acceptable frequency of when a shipped kidney is not transplanted to the indicated STAMP patient (< 10 %?).
- Survival of grafts comparable to graft survival in PRA-negative patients.

#### Acceptance criteria

- 1. On waiting list > 1 year (Not necessary for paediatric patients)
- 2. HI status PRA ≥ 80% reactivity based on CDC and/or solid phase assay
  - 2.1 Must be identified in two consecutive samples over a period of more than 3 months (calculated from last tested sample)
  - 2.2 With proven reactivity against HLA class I or II antigens OR both HLA class I and II antigens.
- 3. The last tested sample drawn less than 3 months before acceptance

#### **Recipient HLA typing**

Recipient HLA-antigens must be assigned at split level, by serology or molecular typing.

#### Recipient acceptable HLA-antigens

Definition of acceptable HLA-mismatches is performed by laboratory at recipient center. Acceptable mismatches may be HLA-A, -B, -Cw, -DR, -DQ antigens.

Acceptable mismatches may include repeated mismatches from previous transplantations. Definition of acceptable mismatches may be based on CDC and/or solid phase assays.

#### Wait listing and matching:

Recipients own antigens and the defined acceptable mismatches are treated like. Recipients in the program must be regularly screened at least every 3 months; PRA reactivity must be re-evaluated at least once a year.

Once accepted, patients will stay included even if PRA drops below 80%.

For each donor search, a special search among AM-recipients based on split level HLA typing is performed. Exchange obligation is marked when the donor only has HLA-A,-B, -Cw-, DR, -DQ antigen specified in the recipient as own or acceptable.

Exchange priority will follow Scandiatransplant rules and placed as priority number 2: Patient with STAMP-status when all donor HLA-A, -B, -Cw, -DR, -DQ antigens are either shared with the recipient or are among those defined as acceptable. Return obligation as for other exchange rules.

Exchanged organ may be used for other local recipient if the indicated STAMP patient for any reason not can be transplanted.

Only the centers joining STAMP have an obligation to exchange kidneys to a STAMP recipient.

#### Re-evaluation by the steering committee

- A STAMP patient not transplanted with a shipped kidney because of a positive cross-match should be temporarily withdrawn from STAMP, re-evaluated and eventually re-admitted.
- When removing defined antibodies and adding them as acceptable mismatches the
  patient must be re-evaluated by the committee. The responsible laboratory is
  obliged to inform the committee in such cases. Re-evaluation is not needed when
  adding new antibodies and removing them as acceptable mismatches.

#### **Event reporting**

Recipient centers must notify Scandiatransplant if the kidney is transplanted to somebody else than the indicated STAMP patient.

Recipient center must give detailed follow-up information on performed transplantations.

#### Steering committee:

Application: SCTP UK

A steering committee (SC) for the project must be appointed by the board of Scandiatransplant.

SC shall be composed by one tissue-typer from each of the countries Denmark, Finland, Norway and Sweden together with two representatives from the Nordic Kidney Group. Proposals of STAMP candidates from individual centers must be evaluated and accepted by the tissue typers in the SC.

SC must keep updated on all effects of the program, including:

- Number of exchanged organs.
- Changes in waiting time for STAMP recipients and for other waiting patients.
- Changed reactivity in individual waiting recipients
- Positive cross matches at donor center.
- Fate of performed transplants.

SC may decide to withdraw STAMP-status if antibody reactivity changes.

SC must give yearly status reports to Scandiatransplant.

## 2. Finding the menu for entering STAMP-data

MAIN MENU		
1. Organ Transplantation 2. Nordic Living Kidney Donor Follow-up 3. Nordic Liver Transplantation Registry 4. Nordic Thorax Transplantation Registry 5. Heart/Lung rotation list 6. Waiting list reports 7. Quality Control 8. Liver rotation list 9. Special reports 10. Exit		
Enter your choice: 1		

Menu: SCTP UK

<Rep>

#### ORGAN TRANSPLANTATION

#### Recipient And Waiting List System

- Organ Donor System
- 3. Transplantation And Follow Up

- 4. Search 5. Reports 6. Previous Menu

Enter your choice: 1

#### RECIPIENT SYSTEM

- 1. Registration Of New Patient

# 2. Updating Of Waiting List Data 3. Antibody Screen Test 4. STAMP - Acceptable Mismatches Programm 5. Withdrawal From Waiting List

- 6. Previous Menu

Enter your choice: 4

Application: SCTP\_UK Menu: RECIPIENT <Rep>

#### STAMP - Acceptable Mismatches Programme

#### 1. STAMP/LAMP pre transplantation

- Patients being prepared for STAMP/LAMP
   Patients ready to go on STAMP
- 4. Patients on STAMP
- 5. Patients temporarily off STAMP
- 6. Patients on LAMP (local programme)
- 7. Patients permanently withdrawn from STAMP 8. STAMP patients with PRA older than 3 months
- 9. HI immunized KI patients with no STAMP record 10. STAMP reports

Enter your choice: 1

application: SCTP\_UK Menu: STAMP <OSC><DBG> <Rep>

## 3. Selection of patients

#### 3.1 Potential candidates

Potential candidates are found by entering the list from the menu entrance "HI immunized KI patients with no STAMP record". This list contains patients that have been highly immunized for more than a year and highly immunized pediatric patients.

From the list, select local patients who fulfill the rest of the STAMP acceptance criteria:

- PRA ≥ 80% must be identified in two consecutive samples over a period of more than 3 months (calculated from last tested sample).
- With proven reactivity against HLA class I or II antigens OR both HLA class I and II antigens.
- The last tested sample drawn less than 3 months before acceptance.

#### 3.2 Good candidates?

Evaluate if these potential STAMP eligible patients may have difficulties in getting kidneys from local donors.

- Good candidates usually have a reason for immunization (previous transplants, pregnancies, or blood transfusions).
- Good candidates usually have both CDC and solid phase reactivity (although both do not have to fulfill HI criteria).
- Good candidates usually have high level reactivity in antibody testing.
- Good candidates occasionally have a history of positive cross matches.

#### 3.3 Consult clinician

Consult clinician about the need for STAMP or any other type of prioritizing. Consider both STAMP and LAMP and decide together which one is better for particular patient.

## 4. STAMP pre transplantation

## 4.1 Query

Any patient with a treatment record, meaning that they are actively on a waiting list with urgency, can be looked up.

T = Transplantable

NT = Temporarily not transplantable

WU = Temporarily withdrawn until specified date

If you are unable to query the patients, it means;

That the individual has not been notified to the waiting list yet – OR-

the person has never been entered into the system - OR -

you are using a wrong Scandia-/Person-number.

	CTIVE ICCEPTIBLE VICUITORES DESCRIVE 0004
	STAMP - ACCEPTABLE MISMATCHES PROGRAMME 9201
Scandia Number	Pers Num <u>1111111</u> <u>1111</u> Sex AB0
Surname Tx Center Curr wait list Date of wl entry Narr eq ser HLA	First name Country Wl status Wait for tx number Dial/Tr cn
Most recent PRA 1	
Methods of determ Acc. mismatches	Sign up Status
Comments STAMP check Date/User of Firs	Event log Calc. frequencyPerm. withdrawal et Reg/Last Change
Enter a query; pre	ss F12 to execute, F4 to cancel.
Count: *0	ENTER QUERY <replace></replace>

Register query information and press <F12>

## 4.2 Registration of relevant HLA antibodies

Press <F7> followed by <Page up> and it will be possible to enter menus for viewing, checking and updating registered HLA antibodies.

- Include all antibodies that are positive according to local rules (eg. all with Luminex MFI level > 1000)
- If allele specific antibodies are detected, consider adding them at serological level if the allele is not extremely rare. Remember that you do not know ethnical background of potential donor beforehand!

Save your input by pressing <F10>
Go back by pressing <F4>

## 4.3 Entering STAMP data in pre transplantation

#### 4.3.1 Date of acceptance

First enter "Date of accept" and press <F10>

	STAMP - ACCEPTABLE MISMATCHES PROGRAMME 920:	1
Scandia Number	<u>126645</u> Pers Num <u>210563</u> <u>1111</u> Sex <u>M Male</u> ABO <u>AB</u>	_
		- <u>1</u> - - -
Date of accept Methods of determ Acc. mismatches Comments Event log Date/User of Firs		

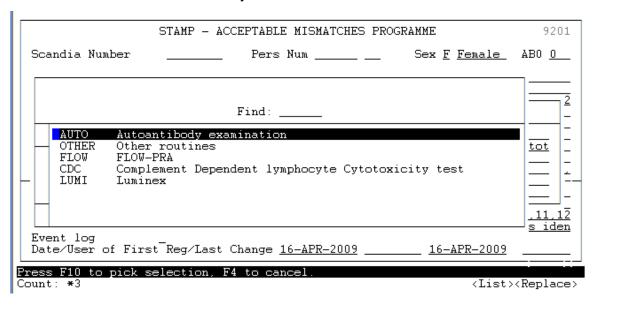
FRM-40400: Transaction complete -- 1 records posted and committed.

Count: \*0

Replace>

#### 4.3.2 Methods of determination

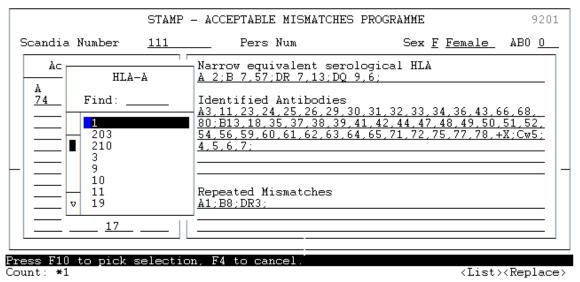
Go to "Methods of determ" and get a POP-UP window using <F7> Press <F5> to select one to many values from the list.



Save your input by pressing <F10> Go back by pressing <F4>

#### 4.3.3. Acceptable mismatches

Go to "Acc mismatches" and get a POP-UP window using <F7> Press <F5> to select one to many values from the list.



Save your input by pressing <F10>

How to select antigens to be listed as acceptable mismatches (AMM)

- All antigens that the patient has no antibodies against could usually be added to the AMM list. These may also include possible previous mismatches.
  - o If you add DR17 remember to add DR3 also.
  - o If you add both Cw9 and Cw10 add Cw3 also.
  - Other broad serological level antigens may be added if all splits are on the AMM list, but usually are not necessary since laboratories type these at split level.
- Own known antigens should not be added to the AMM list. Add most likely own (according to haplotype analysis) C/DQ antigens to the AMM list if these are not typed and reported.
- Do not add antigens that are strongly linked with other antigens that patient have antibodies against, if particular antigens are not analyzed from donors (DRB3-5 and all allele specific antibodies).
- DP-antigens are neither added to the AMM list nor analyzed from donor. Therefore consider LAMP or other options for patients with multiple strong DP antibodies

Go back by pressing <F4>

#### 4.3.4 Comments

Write all relevant information to comments field. At least the following information should be added:

- List of all detected DRB3-5 antibodies.
- List of all detected allele specific antibodies that are not added at serological level to the antibody list.
- List of all antigens that are not included to antibody or the AMM list, for instance due to strong linkage to detected allele specific or DRB3-5 antibodies.
- Other relevant explanations for NO in STAMP check field "All HLA checked".

Save your input by pressing <F10>

	STAMP - ACCEPTABLE MISMATCHES PROGRAMME 9201
Scandia Number	<u>126645</u> Pers Num <u>210563 1111</u> Sex <u>M Male</u> ABO <u>AB</u>
Repea mismatches Most recent PRA 1	<u>A 1,2;B 5,7;DR 1,2;DQ 4,9;</u>
Comments Event log	

Count: \*1 <Replace>

#### TIP!

You can always start entering data on the patient— leave the patient— and then return to enter more data. You do not have to have all data ready at once, when you start work-up on a possible STAMP-patient.

## 5. Patients being prepared for STAMP

In the Menu "Patients being prepared for STAMP" you can always see the patient records you are finalizing data on.

A - A - A - A - A - A - A - A - A - A -		peing prepared for STAMP		9202
Cnt Scandia P	ersonnumber W.s.	Name	Status date	Days
CP 3737 CP 11634 CP 4743 ML 411	210563	test person, test person	04-NOV-2008 26-JAN-2009 12-AUG-2008 13-AUG-2008 10-SEP-2008 06-NOV-2008	83 0 167 166 138 81

#### TIPI

Here you can place the cursor on the patient you want to work on and get to the data by pressing <F7>

## 6. Quality check of STAMP data

When all data have been entered on the patient a quality check must be performed.

Go to 'STAMP check' and press <F7>.

	STAMP - ACCEPTABLE MISMA	ATCHES PROGRAMME	9201
Scandia Number	Pers Num <u>ı</u>	Sex <u>F</u> <u>Fe</u>	male ABO <u>O</u>
Narr eq ser HLA Repea mismatches	UP         Control           KI Kidney         Widney           01-MAR-2002         Dr           A 28,29;B 62,27;DR 1,4;I	DQ 5,3;	tx number 1
Most recent PRA 1 Most recent PRA 2 Identif antib	03-NOV-2010 I% 96 09-AUG-2010 I% 92 A1,11,2,23,24,25,3,31,32	II%0 II%51 	18,27,38,40,41
Methods of determ Acc. mismatches Comments	14-JAN-2010 Sign up		
Date/User of Firs	Event log _ Calc. f t Reg/Last Change <u>14-JAN</u> -	-2010 UPVT	
ST	AMP - ACCEPTABLE MISMATCH	ES PROGRAMME	<replace></replace>
Scandia Number	Pers Num	Sex <u>F</u> <u>Female</u>	AB0 <u>A</u>
Surname			
aurname	First	name	
Jurname	First STAMP Quality Cont	<del></del>	
Wait time > 1 yr o HI PRA >= 80% at p Most recent PRA < HI >= x2 > 3 month A,B,Cw,DR,DQ split Acc. mm. splits Id. antib. splits	STAMP Quality Control or child Age: 57 yearsent 3 months 02-6	rol  Bars Wait time: 34 mon HI Highly immuni OCT-2013 1 months 13 d les over 34 months 2 d A 1,31; B 51,8; DR 13, Cw ied antibodies are spl	zed <u>Yes</u> ays <u>Yes</u> !3; <u>No</u> *3; <u>No</u> its <u>Yes</u> HLA <u>Yes</u>

By doing this all STAMP acceptance criteria, as described in the STAMP manual are checked and it will give you an indication of the quality of the registered data. Yes/No statement to the right defines for each criteria if it passes the quality check or not.

The STAMP check is a quality control and is meant as a help, it does not inflict with the activation of patients to STAMP. If you have an explanation of why a criteria is not fulfilled, please enter a message to the STAMP committee, in the field for comments.

If any other field is NO you should reanalyze your data input and correct if possible. If this is not possible you should not activate patient for consideration for STAMP without proper explanation in comments field.

Check and calculations are done on all the following variables:

#### 6.1 Wait time > 1 yr or child

Count: \*0

The total waiting time on kidney waiting list and present age on the patient is calculated. Total waiting time on kidney waiting list must be more than one year. (Excepted are children they do not have to wait one year before acceptance).

<Replace>

#### 6.2 HI PRA >= 80% at present

Defines if the patient is highly immunized (PRA ≥ 80%) in last registered antibody screen test

#### 6.3 Most recent PRA < 3 months

Checks if the last registered antibody screen test is done within the last 3 months

#### 6.4 HI >= x2 > 3 months

Identifies if highly immunized test result is identified in two consecutive samples over a period of more than 3 months.

#### 6.5 A,B,Cw,DR,DQ splits

A check is done weather the recipient HLA-antigens are assigned at split level. A '\*' in front of an allele indicates that the assigned HLA type contains a broad type which is serological typed. A '!' in front of an allele indicates that the problematic broad type is genomic typed.

Result of the QC check may be No, if so check carefully that the reason for NO is something you have intended.

#### 6.6 Acc. mm. splits

Checks if all acceptable mismatches are registered as splits

Result of the QC check May be No, if so check carefully that the reason for NO is something you have intended.

#### 6.7 Id. antib. splits

Checks if all identified antibodies are registered as splits

Result of the QC check may be No, if so check carefully that the reason for NO is something you have intended.

#### 6.8 Patient DQ in Acc. mm.

Checks if patients own DQ is entered as acceptable mismatch.

#### 6.9 No identif. AB in Acc. mm.

Compares one to one if any identified antibodies by mistake are given as acceptable mismatches.

#### 6.10 Consistent Sero/Geno HLA

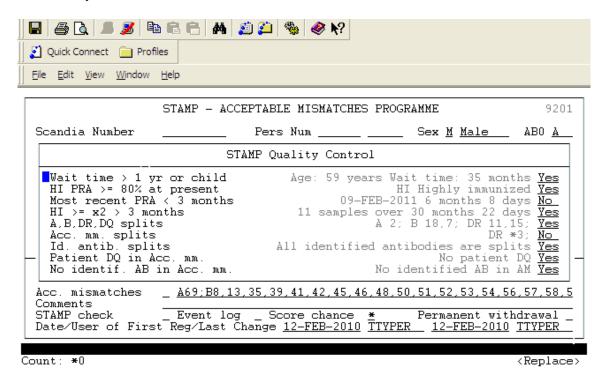
Compares the patient's own serological and genomic HLA as it is registered in the database

#### 6.11 All HLA checked

Listing all antigens not given as own HLA antigens, acceptable mismatches or identified antibodies.

Result of the QC Check may be No. If so, check carefully that you have mentioned not to include some antigens and that you have explained reasons not to include some antigens (for instance if antigens are left out due to linkage or if these are considered as "grey zone").

#### 6.12 An example of a STAMP record check;



To the right it is stated if every single criteria is accepted or not. The conclusion of this check is that:

- a new sample needs to be antibody screen tested (and the result entered into Scandiatransplant)
- a broad type DR3 is given as an acceptable mismatch this indicates that it is necessary also to

check if DR17 and DR18 are given as acceptable mismatches.

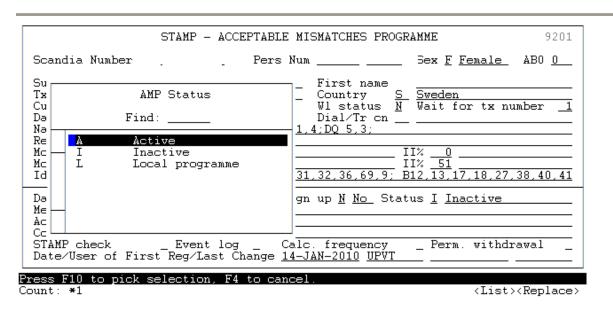
## 7. Patients ready to go on STAMP

When you have done the quality check and you believe that sufficient data has been entered you have to change "Status" from I = Inactive to A = Active.

Go to the field 'Status'

	STAMP - ACCEPTABLE MISMATCHES PROGRAMME	9201
Scandia Number	Pers Num . Sex <u>F</u> <u>Female</u> AB	0 <u>0</u>
Surname Tx Center Curr wait list Date of wl entry Narr eq ser HLA Repea mismatches Mcst recent PRA 1 Mcst recent PRA 2 Identif antib		
		1 _
Count: *1	<pre></pre>	

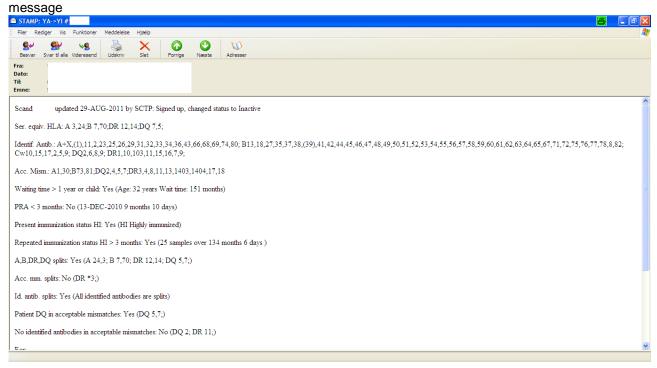
Press <F5> and chose 'Active' by pressing <Enter>. Save by pressing <F10>.



You will then get a note, that an email has been send to the STAMP committee – Please acknowledge the message by pressing <ENTER>. An Email has now been send to the committee and they will then go through the patient to see if the person is valid for the program.

The results of the STAMP quality check will automatically be included in this message.

#### Example of an email



You will now be able to find the STAMP record on the patient by entering the menu "Patients ready to go on STAMP"

#### NOTE

When at least two of the Committee members has accepted the candidate, the "Sign up" will be altered by Scandiatransplant from N = No to Y = Yes, this will make the patient active on STAMP. You will be contacted if patient is not OK according to the steering group evaluation.

#### 8. Patients on STAMP

In the Menu "Patients on STAMP" all the patients accepted on STAMP is displayed together with the number of days they have been waiting on the program.

S C A N D I A T R A N S P L A N T Patients on STAMP		9202
Cnt Scandia Personnumber W.s. Name	Status date	Days
AR 8428	19-SEP-2008 07-NOV-2008 26-JAN-2009 10-NOV-2008 17-NOV-2008 17-DEC-2008	129 80 0 77 70 40

## 9. Quality control of antibody screening

Patients on STAMP must be HLA antibody screen tested at least every 3 months. To ensure that all active STAMP patients complies with this rule go to the menu 'STAMP patients with PRA older than 3 months'.

STAMP - Acceptable Mismatches Programme	
1. STAMP pre transplantation 2. Patients being prepared for STAMP 3. Patients ready to go on STAMP 4. Patients on STAMP 5. Patients temporarily off STAMP 6. STAMP patients with PRA older than 3 months 7. STAMP reports 8. Edit STAMP Committee Members 9. Edit STAMP Committee Email Messages 10. Previous Menu	
Enter your choice: 6	
Application: SCTP_UK Menu: STAMP v ^ <0SC> <dbg< th=""><th>&gt;</th></dbg<>	>

S C A N D I A T R A N S P L A N STAMP patients with PRA older than 3: http://www.scandiatransplant.org/man/9	months
Cnt Scandia Personnumber Name	Im AB-date Mon Day
GO 13 OS 11 OS 12	HI 20-APR-2011 5 0 I 30-MAY-2011 3 23 I 23-MAY-2011 3 0
Pres [F7] to query and edit patient on POP UP *	current line

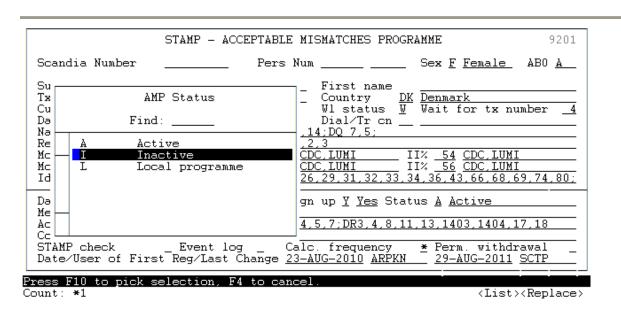
By entering this menu you get a display of patients missing the regular antibody screen test. To the right is a count of days since last registered screen test.

Immunization status of STAMP listed patients must be screened at least every 3
months, and antibody specifications must be re-evaluated at least yearly. However,
it is recommended to perform the AMM list re-evaluation immediately when you
notice significant changes in patient's immunization status, although the patient may
have been previously evaluated less than a year ago.

- Add all new antibodies into the detected antibodies list and remove the same antigens from the AMM list. This does not necessitate steering group re-evaluation.
  - If the new antibody is allele specific, add it to antibody list at serological level if
    it is nor extremely rare and remove the antigen from the AMM list.
    Information of very rare new allele specific antibody could be only added to
    the comments field without changing the AMM list.
  - If the new antibody is DRB3-5, add this information to comments field and remove all strongly associated antigens from the AMM list.
  - If detected new antibody is DP antibody and you think it is relevant, consider changing the patient's status form STAMP to LAMP
- If your patient's immunization status has improved, you may consider register
  previously detected antibodies as allowable antibodies and adding them into the
  AMM list.
  - o Change the patient's status from A to I
  - After all modifications to the antibody and the AMM lists, write the information of all changes into comments field
  - Finally change the status back to A
  - Case will be re-evaluated by the steering group.

## 10. Patients temporary off STAMP

After acceptance to STAMP, the center responsible for the patient, has the possibility to remove the patient temporary from the program (for instance after a positive X-match).



If you want to do so, you have to change "Status" from A = Active to I = Inactive.

When pressing <F10> to save, an email will automatically be send to the STAMP committee.

After this a pop-up appears where the cause of temporary withdrawal must be registered. Press <F5> and select cause from list of value. Press <F10> to save.

#### Note

The patient will of cause still be searchable in Kidney-search only the STAMP exchange obligation will be suppressed.

In the menu "Patients temporarily off STAMP" a list of patients temporarily of STAMP are displayed.

S C A N D I A T R A N S P L A N T Patients temporarily off STAMP		9202
Cnt Scandia Personnumber W.s. Name	Status date	Days
AR   3	01-SEP-2008 12-SEP-2008 26-JAN-2009 17-NOV-2008 28-OCT-2008	

\* POP UP \*
Count: \*5 < Replace>

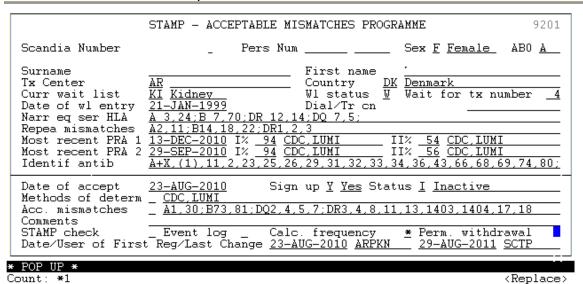
Perform thorough re-evaluation of the case and change the antibody/ the AMM list accordingly

Write the information of all changes and your opinion of the reason for positive cross match into comments field.

Finally change the status from I = Inactive to A = Active and the patient will be reevaluated by the steering group.

## 11. Patients permanent off STAMP

Patients no longer eligible for STAMP, must be permanently withdrawn from STAMP. Go to 'Perm. Withdrawal' and press <F7>.



Press <F5> and select cause from list of value. Press <F10> to save.

		STAMP - ACC	EPTABLE MISMA	TCHES PROGRA	AMME		92	01
Scandia N	umber		Pers Num		Sex <u>F</u> <u>I</u>	<u>Female</u>	AB0 <u>A</u>	_
			Withdrawal c	ause				
			Find:	_				
PRNOCR In preparation, does not meet STAMP criteria  EVNOCR Reevaluated, does not meet STAMP criteria  NOTACC Not accepted on STAMP NOPRA PRA not provided according to rules  XMATCH Persistent positive cross match NOMMHL HLA antibodies / acceptable mismatches cannot be provided  OT Other cause								
STAMP checkEvent log Calc. frequency <u>*</u> Perm. withdrawal Date/User of First Reg/Last Change <u>23-AUG-2010</u> <u>29-AUG-2011 SCTP</u>								
	o pick s	election, F4	to cancel.			·T :	.D 1	
Count: *0						ice>		

## 12. STAMP reports

If you want to gain insight into STAMP history and activities you can do so by entering the menu "STAMP reports".

## 12.1 Patient History Report

Here it's possible to enter a query on a patient no longer on STAMP and see historically data.

STAMP - PATIENT HISTORY REPORT		9301		
Scandia Number Person Number	Sex <u>M Male</u> 1	ABO <u>O</u>		
Surname First name				
Country	Waiting list s	tatus _		
STAMP notific. <u>17-MAR-2009</u>				
Narrow eq ser HLA A 2.11;B 18.35;DR 1.14;DQ 5.5; Repea mismatches Identif antib A1.23,24,25,29,32,43; B13,27,37,38,44,45,47,49,51,52,53,57 <f2>: view events, Ctr-P: print report, <f7>: display report</f7></f2>				
Count: ¥1	.1	Doplace)		

When you have a STAMP-patient on screen you can press <Ctrl-p> to print or <F7> to display the data on the screen.

A typical printout will look like this

SCANDIATRANSPLANT stamp\_details

Report produced: 20-SEP-2011 09:34 requested by user: CP\_USER Page 1

\*------<sup>\*</sup> | STAMP history | \*

Scandianumber: 123
Person number: 123456
Gender: M Male
Name: Test
Country: N Norway
Tx-Center: OS Oslo

Dialysis/Treatment center: 02 Sykehus

Waiting list: KI Kidney

Date of entry on waiting list: 21-JUN-2005

Waiting list status:

Waiting for tx number: 2 Blood group: 0

Narrow HLA: A 2,11;B 18,35;DR 1,14;DQ 5,5; Repeated mismatches: A19,28;B5,7,12;DR4,7

Antibody Screen Test:

07-APR-2009 I% 80 II% 80 10-FEB-2009 I% 80 II% 80

Identified antibodies:

A1,23,24,25,29,32,43;B13,27,37,38,44,45,47,49,51,52,53,57,58,59,63,76,77,78;DQ2,4,7,8,9;

DR10,11,12,13,15,16,4,7,8,9;

Date of entry on STAMP: 11-MAR-2009
Date of acceptance on STAMP: 17-MAR-2009

Signed up: Y Yes

STAMP status: A Active

Determination methods: OTHER

Acceptable mismatches:

A3,26,30,31,33,34,66,68,69;B7,8,39,41,42,46,48,50,54,55,56,60,61,64,65,67,71,73,75,81;DQ5;DR103

Comments:

STAMP events: N:I:11-MAR-2009:LEIVOS,N:A:11-MAR-2009:LEIVOS,Y:A:17-MAR-2009:SCTP

Waiting time > 1 year or child Yes Age: 72 years Wait time: 74 months Most recent PRA < 3 months No 07-APR-2009 29 months 26 days

HI PRA >= 80% at present Yes HI Highly immunized

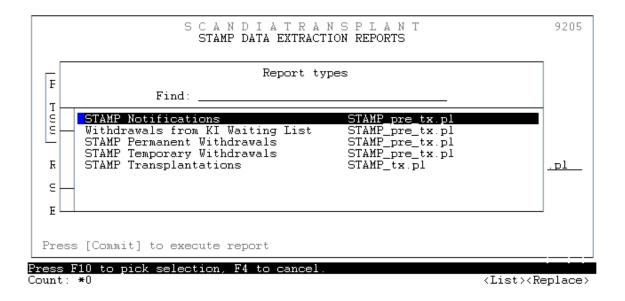
HI >= x2 > 3 months Yes 5 samples over 20 months 0 days A,B,DR,DQ splits Yes A 11,2; B 18,35; DR 1,14; DQ 5,5; Acc. mm. splits Yes All acc. mismatches are splits Yes All identified antibodies are splits

Patient DQ in Acc. mm. Yes DQ 5,5;

No identif. AB in Acc. mm. Yes No identified AB in AM

## 12.2 Summary Reports

In the menu "Summary Reports" you can press <F5> to get at list of possible choices of reports



#### 12.2.1 STAMP Notifications (Name of excel file: STAMP\_pre\_tx\_not.xls)

If you choose this report you will get all patients with a STAMP record. In other words the report will contain patients that are: Preparing to go on STAMP, active/inactive on STAMP, transplanted and permanently withdrawn.

- **12.2.2 Withdrawals from KI Waiting List (Name of excel file: STAMP\_pre\_tx\_wtd.xls)** Consist of all patients with a STAMP record that have been withdrawn from the main kidney waiting list.
- **12.2.3 STAMP Permanent Withdrawals (Name of excel file: STAMP\_pre\_tx\_pwd.xls)** This extraction contains patients permanent withdrawn from STAMP together with cause and date.
- **12.2.4 STAMP Temporary Withdrawals (Name of excel file: STAMP\_pre\_tx\_twd.xls)** If you choose this report you will get a list patients that have been temporary off STAMP along with cause and date.

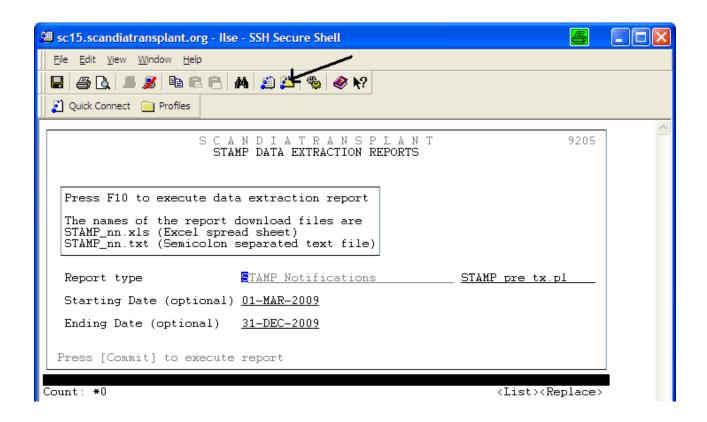
#### 12.2.3 STAMP Transplantations (Name of excel file: STAMP\_tx.xls)

If you choose this report you will get a list of patients transplanted while they we signed up on STAMP waiting list.

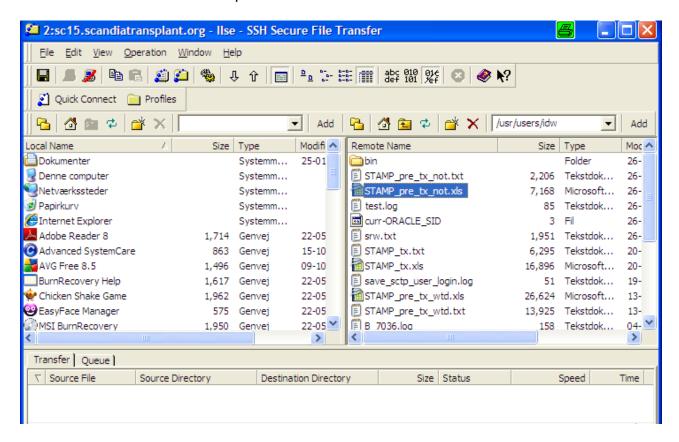
It is possible to do the search for a specific period just enter starting and/or ending date.

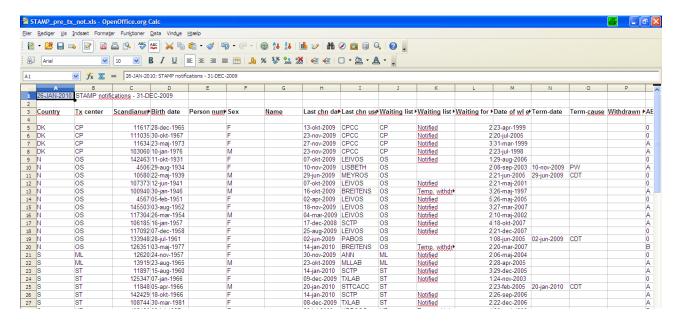
Commit the extraction by pressing <F10>

You find the extracted excel file by pressing the icon marked with an arrow on the next picture (New File Transfer Window)



#### Find the file and click on it to open the excel file





Now it is possible to work as you like with the extracted data

#### LAMP

#### 13. Introduction

#### **Purpose**

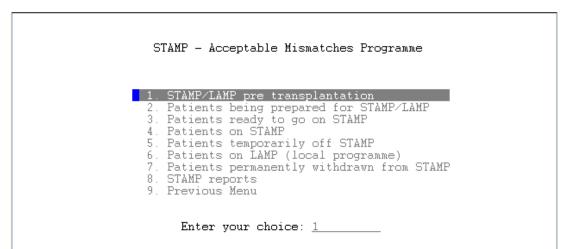
This program is a local alternative for patients that do not meet STAMP criteria. At recipient search the patients are matched the same way as STAMP patients, due to defined acceptable mismatches. The program does not result in any exchange obligations between centers.

#### Acceptance criteria

Each center defines the acceptance criteria themselves and there is no approval for inclusion to the program from the committee. Patients can both go directly on LAMP and no matter their STAMP status be 'transferred' to LAMP.

# 14. Menus for entering LAMP-data and LAMP pre transplantation information

You use the same menus, facilities and screens as described for STAMP patients.



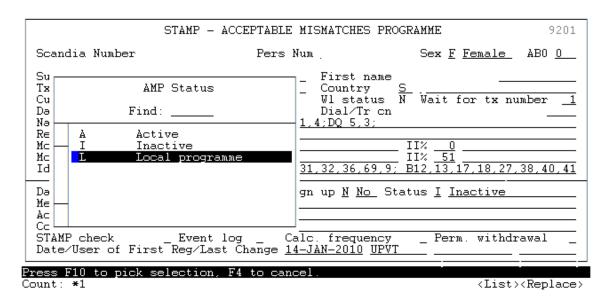
Methods of determination, acceptable mismatches and comments are registered the same way as for STAMP patients.

## 15. Patients ready to go on LAMP

When you have done the quality check and you believe that sufficient data has been entered you have to change "Status" from I = Inactive to L = Local program. Go to the field 'Status'

Scandia Number         Pers Num         Sex F Female         ABO 0           Surname         First name         Country         Sweden			
Tx Center         UP         Country         S Sweden           Curr wait list         KI Kidney         W1 status         N Wait for tx number 1           Date of w1 entry         01-MAR-2002         Dial/Tr cn			
Date of accept 14-JAN-2010 Sign up N No Status I Inactive  Methods of determ			

Press <F5> and chose 'Local programme', then press <Enter>. Save by pressing <F10>.



The patient is now on LAMP

**Please note** that no matter what STAMP status a patient has it can always become a LAMP patient.

#### 16. Patients on LAMP

In the Menu "Patients on LAMP (local program) all the patients included on LAMP are displayed together with the number of days they have been waiting on LAMP (and STAMP).

STAMP - Acceptable Mismatches Programme	
1. STAMP/LAMP pre transplantation 2. Patients being prepared for STAMP/LAMP 3. Patients ready to go on STAMP 4. Patients on STAMP 5. Patients temporarily off STAMP 6. Patients temporarily off STAMP 7. Patients on LAMP (local programme) 7. Patients permanently withdrawn from STAMP 8. STAMP reports 9. Previous Menu	
Enter your choice: 6	
Application: SCTP_UK Menu: STAMP v ^	<rep></rep>

## 17. Recipient search result LAMP

In the search selection screen a new line has been added
If a match is found for a LAMP patient it will appear on the search result list (marked with an L to the far left) depending on search selections.

KIDNEY WAITING LIST SURVEY Page 4/6 25					
ABO Compat.: All <u>1253</u>	Own226	Ex. Obliga	tion	<u>0</u>	
No.	Sel - -	Waiting Time in Months:		411 319	Sel - - - -
Age in 0 - 15 <u>2</u> Years: 16 - 19 <u>2</u> 20 - 39 <u>192</u> 40 - 59 617	Sel - - -	CMV:	Positive Negative		Sel - -
40 - 59 <u>617</u> 60 - * <u>440</u>	_	HCV_Ab: HCV_Ag: HBs_Ag:	Positive Positive Positive	3	Sel - - -
Count: *0					<replace></replace>

#### 18. Printout off STAMP and LAMP information

When you have a STAMP/LAMP-patient on screen you can press <Ctrl-p> to print or display the data.

STAMP - ACCEPTABLE MISMATCHES PROGRAMME 92				
Scandia Number	<u>126645</u> Pers Nu	m <u>210563 1111</u> Sex <u>M Male</u> ABO <u>AB</u>		
Narr eq ser HLA   Repea mismatches   Most recent PRA 1	test person AR Aarhus KI Kidney 01-JAN-2006 A 1,2;B 5,7;DR 1,2;D 01-JAN-2008 I% 55 A 26-JAN-2007 I% 100 C A3,+X;Cw4,5;DQ1,+X;D	W1 status       N       Wait for tx number       1         Dial/Tr cn       AC       Aarhus         Q 4,9;       UTO       II%       89       BLOCK         DC       II%		
	<u>26-JAN-2009</u> Sig	n up <u>Y Yes</u> Status <u>A Active</u>		
Metho Acc. Comme Event Date/	STAMP RE	PORT display report, <f4>: cancel.  TP</f4>		

Count: \*0 <Replace>

#### A typical printout will look like this

**SCANDIATRANSPLANT** stamp details Report produced: 18-MAR-2009 13:50 requested by user: SCTP Page 1 STAMP details

Scandianumber: 126645 Person number:210563-1111 Gender: M Male

Name: test person, test person

Country: **DK Denmark** Tx-Center: AR Aarhus Dialysis/Treatment center: AC Aarhus

Waiting list: KI Kidney

Date of entry on waiting list: 01-JAN-2006

Waiting list status: N Notified

Waiting for tx number: 1 Blood group: AB

Narrow HLA: A 1,2;B 5,7;DR 1,2;DQ 4,9;

Repeated mismatches:

Antibody Screen Test: 01-JAN-2008 I% 55 AUTO II% 89 BLOCK

26-JAN-2007 I% 100 CDC II%

Identified antibodies: A3,+X;Cw4,5;DQ1,+X;DR10

Date of acceptance on STAMP: 26-JAN-2009

Signed up: Y Yes STAMP status: A Active

Determination methods: CDC,FLOW

Acceptable mismatches: A3,11;B703,21;DQ4,9;DR9,13 Comments: this is freetext for additional comment STAMP events: Y:A:26-FEB-2009:SCTP,N:I:26-JAN-2009:SCTP,

N:A:26-JAN-2009:SCTP,Y:A:26-JAN-2009:SCTP,

Y:I:26-JAN-2009:SCTP

First registered: 26-JAN-2009 SCTP Last changed: 26-JAN-2009 SCTP

## 19. Calculated frequency for PRA and transplantability

A donor pool, based on 1000 recently HLA typed deceased donors registered in Scandiatransplant, has been made. The pool forms the basis of the following calculations.

## 19.1 Frequency calculated combined PRA

On the basis of the summary of registered identified antibodies on a specific patient it is possible to make a percentage calculation of a combined PRA class I and II.

This feature is accessible from two places:

1. From the STAMP entry

Count: \*1

710: (Re)calculate PRA

Count: \*1

```
STAMP - ACCEPTABLE MISMATCHES PROGRAMME
                                                                                             9201
                                                                      Sex <u>F</u> <u>Female</u>
  Scandia Number
                                         Pers Num
                                                                                         AB0
  Surname
                                                    First name
  Tx Center
                                                    Country
                                                                  SF Finland
                                                    Wl status \overline{N} Wait for tx number Dial/Tr cn \overline{AA} HYKS SISATAUTIKLINIKKA
  Curr wait list
  Date of wl entry
  Narr eg ser HLA
                        A3;B12,15,47;DR
23-FEB-2011 I%
03-NOV-2010 I%
  Prev mismatches
                                                                    II% <u>100 LUMI</u>
II% <u>100 LUMI</u>
                                                LUMI
LUMI
  Most recent PRA 1
  Most recent PRA 2
                                             98
                            11,25,26
                                                          33,34,36,43,66,68,69
  Identif antib
                                              30,31,32,
                         16-DEC-2010
                                              Sign up Y Yes Status A Active
  Date of accept
  Methods of determ
                           LUMI
                          A23; B13, 18, 37,
                                             38,39,40,41,42,46,47,48,54,55,57,58,59,61
  Acc. mismatches
  Comments
  STAMP check
                           Event log
                                              Perm. withdrawal
                                              Calculated PRA
  Calc. frequency
  Date/User of First Reg/Last Change 15-DEC-2010 1197ER
                                                                         <mark>16-DEC-2010 TTYPER</mark>
* POP UP *
```

Press >F7< if the PRA has been calculated before it is possible to view the result, if you wish to recalculate press >F10<.

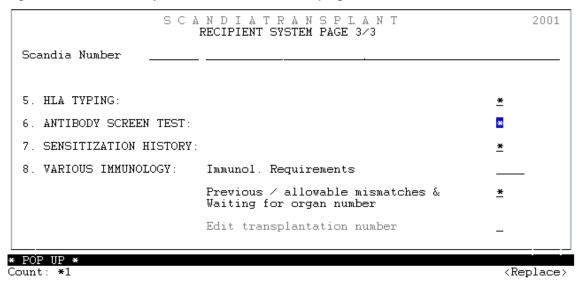
```
STAMP - ACCEPTABLE MISMATCHES PROGRAMME
                                                                               9201
Scandia Number
                                  Pers Num
                                                           Sex F Female
Surname
                                           First name
Tx Center
                                                       SF Finland
                                           Country
                                           Curr wait list
Date of wl entry
Narr eq ser HLA
                        24;B 27,
                                40:Cw 1
                                        ; DR
Prev mismatches
                   <u>A3;B12,15,47;DR2</u>
Most recent PRA 1
Most recent PRA 2
                   23-FEB-2011
03-NOV-2010
                                        LUM3
                                                        II% <u>100 LUM</u>]
II% <u>100 LUM</u>]
                                Ι%
                                     98
                                I%
Identif antib
                                                33,34,36,43,66,68,69
                                                                       74,80;
Date of accept
                                                                    ve
Methods of deter
                   Calculated combined PRA
Acc. mismatches
                                                                    5,57,58,59,61,
                   25-FEB-2014
                                                              99%
Comments
STAMP check
Calc. frequency
                                      Calculated PRA
Date/User of First Reg/Last Change 16-DEC-2010 TTYPER
                                                            16-DEC-2010 TTYPER
```

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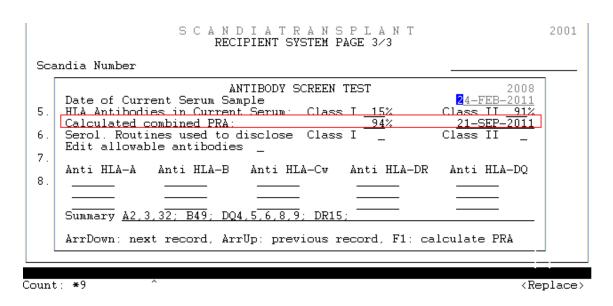
<Replace>

<Replace>

2. From the menu 'Updating Of Waiting List Data', make a query on the specific patient and go into the 'Antibody screen test' menu on page 3/3 with <F7>.



Press >F1< and a combined PRA value, containing class I and II antibodies, will be calculated and saved. Recalculating can be made by pressing >F1< again. The last date of calculation together with the PRA value will always be displayed.



## 19.2 Frequency calculated transplantability

In STAMP it is possible to get

- a 'frequency calculated transplantability' based on patient's own tissue type
- a 'frequency calculated transplantability with acceptable mismatches' based on patient's own tissue type and acceptable mismatches.

The calculation is based on the HLA tissue types and AB0 blood types represented in the donor pool.

Place the cursor in the field 'Calc. frequency' and press >F7< to get a pop up.

	STAMP - ACCEPTABLE MISMATCHES PROGRAMME 9201			
Scandia Number	Pers Num Sex <u>F Female</u> ABO <u>A</u>			
	A 3,24;B 7,70;DR 12,14;DQ 7,5; A2,11;B14,18,22;DR1,2,3 13-DEC-2010 I% 94 CDC,LUMI II% 54 CDC,LUMI			
Date of accept         23-AUG-2010         Sign up Y Yes Status A Active           Methods of determ         CDC, LUMI           Acc. mismatches         A30; B73, 81; DQ2, 4, 5, 7; DR3, 4, 8, 11, 13, 1403, 1404, 17, 18           Comments         Comments           STAMP check         Event log         Calc. frequency         Perm. withdrawal           Date/User of First Reg/Last Change         23-AUG-2010 ARPKN         25-AUG-2010 ARPKN				
* POP UP * Count: *1	(Replace)			

By pressing >F10< you get the calculated match frequency among the 1000 donor types with and without acceptable mismatches.

	STAMP - ACCEPTABLE MISMATCH	HES PROGRAMME 9201
Scandia Number	Pers Num	Sex <u>M Male</u> AB0 <u>A</u>
Narr eq ser HLA Repea mismatches Most recent PRA 1 Most recent PRA 2	<u>A 2,28;B 27,37;DR 10,11;DQ</u> <u>A3;B8,15;DR2,4,6</u> <u>20-JAN-2011</u> I% <u>97</u> 21-OCT-2010 I% 99	try S Sweden tatus N Wait for tx number 3 /Tr cn 7.5;  Calculated Frequency
Methods of determ	CDC,FLOW	Without STAMP 0.0% With STAMP 0.1% - Last calculated 23-AUG-2011  Press F10 to (re)calculate
STAMP check	Event log Calc. fred t Reg/Last Change <u>11-FEB-20</u> :	quency _ Perm. withdrawal _ 10 JLR _ 11-MAR-2010 JLR _
RM-40400: Transact	ion complete 1 records po	osted and committed.