



## News from Scandiatransplant office

May 2026

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*Update*  
6<sup>th</sup> of May 2026

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### Purpose

By this information letter, we wish to communicate to you about status and progress related to the database, collaboration with groups related to Scandiatransplant and on-going working projects.

We hope that you will read it and share the information with whom it might concern.

Do not hesitate to contact us for further information, ideas and problems at [help@scandiatransplant.org](mailto:help@scandiatransplant.org)

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## Updates to Deceased Donor

### Pancreatic islet under "Not procured organs"

Pancreatic islet has been added to the organ list under "Not procured organs," making it possible to register specific reasons for non-procurement.

### Specification of non-procurement of Pancreatic islet

This addition reflects the need to distinguish between reasons for declining pancreatic islets and those for the whole pancreas.

OT: Other organs	Pediatric w/	GO: Göteborg	A	215804	49	170.00	50.1
Not procured organ							
Organ type	Cause code	Resp. doctor	Remarks				
1	PI: Pancreatic Islet						
2	PA: Pancreas						
3	LR: Right Lung						
4	LL: Left Lung						
5	LI: Liver						
6	KR: Right Kidney						
7	KL: Left Kidney						
8	HE: Heart						

Exchange summary  
Liver, heart and lung urgent waiting list: 3 ABO acceptable (0 identical) out of 4

### Travel history

New fields for documenting the donor's travel history, residency and origin have been added under the Medical History tab.

### New fields for travel history

Past/Present Drug Abuse

Diseases/Abuses

Recent travel history

Residence/long term stay

Country of origin

Antihypertensive

These fields have been added to support data collection and adherence with the infection guidelines.

### Vasopressors and inotropes

Additional fields for vasopressors and inotropes have been introduced, allowing registration of up to two entries for each.

### Additional fields for vasopressors and inotropes

All fields are now visible in the overview grid.

CVP

Heart rhythm

Vasopressors

Vasopressors remarks

Vasopressors remarks

Inotropes

Inotropes remarks

Inotropes remarks

Dose vasopressors

Dose vasopressors

Dose inotropes

Dose inotropes

Unit vasopressors

Unit vasopressors

Unit inotropes

Unit inotropes

## Prophylactic treatment

### Prophylactic treatment

Prophylactic treatment now has its own dedicated field, along with a corresponding free-text field to specify the treatment.

These are located within the “Infectious-disease diagnostics” section.

The screenshot shows a form titled "Infectious-disease diagnostics". It contains four fields: "Infection" (a dropdown menu), "Prophylactic treatment" (a dropdown menu with "Y: Yes" selected), "Specify treatment" (a wide text input field), and "Cultures requested" (a dropdown menu).

### General updates

#### Change to infection tables

We are introducing a visual enhancement to the Infection tables to make it easier to quickly review results.

Results will now be color-coded:

- Negative (-) displayed in green
- Doubtful (?) displayed in orange
- Positive (+) displayed in red

#### Highlighting pop-up textbox

To make it easier to identify where additional help or explanations are available, we are introducing a visual info icon for pop-up information boxes across the system.

The screenshot shows the "Deceased donor registration" form. It has a top bar with "Info", "Back", "Save", "Reset", and "Print" buttons. The form is divided into several sections. The top section contains fields for Donor number, Sex, Hospitalized in, Citizenship of, Date of birth, Person Number, Age in years at donation, Donor name, Donation aft: (with an info icon highlighted in a red box), AB0 blood group, Local ID/Temporary ID, CPR, and Rhesus D. Below this is a tabbed interface with tabs for "Basic", "Meds and labs", "Coordination", "Donation", "Files", and "Data quality". The "Basic" tab is active, showing fields for Procuring center, Responsible center, Hospital admission, Time, N/A, Detection hospital, and Hospital.

### Improved navigation in Treatment Record

To improve usability for kidney patients enrolled in multiple programs, we have introduced subtabs within the Treatment Record.

STEP, STAMP, and LAMP are now grouped under a single main tab, this provides a cleaner layout and makes it easier to navigate.

The screenshot shows the "Treatment Record" interface. It has a top bar with tabs for "Specific data", "Infection", "STEP", "LAMP", "STAMP", "Urgency & Tx center history", and "Termination". Below this is a subtabbed interface with subtabs for "STAMP", "STAMP log", "STAMP QC", and "STAMP Aux". The "STAMP" subtab is active, showing fields for Date of acceptance (24-Jun-2025), Status, Sign up, and a list of HLA markers (HLA-A, HLA-B, HLA-CW, HLA-DR, HLA-DQ, HLA-DP, HLA-DRB3/4/5) with dropdown menus for each.

**Update to quality control**

## Quality control for donors

The quality control check "Donor data check" has been updated to include all deceased donors, including those registered as "no donors".

## Update to living donor requirements

It is no longer required to specify which kidney is being donated during the initial registration of a living kidney donor.

Please note that this applies only to the initial registration. Once the donation process has been completed, it remains mandatory to register whether the left or right kidney was donated before the organ/living donor can be linked to a recipient.

## Updates to the Liver Registry

A working group under the Nordic Liver Transplant Group has conducted a revision of the Liver Registry. With this update, the first round of revisions is implemented.

**Form A - New fields**

### Updates in Form A

The following fields have been added to the Basic tab: "Medical care status (UNOS)", "Treated hypertension" and "History of TIPS".

Dialysis has been relocated from the Laboratory test tab to the Basic tab.

**Form B - New fields and relocation**

Updates in Form B

The following fields have been added to the *Operation* tab: "Arterial anastomosis", "Portal vein thrombosis", "Estimated perioperative blood loss", and "Red blood cell transfusion".

Under the *Early post-op* tab, a new auto-generated field for "Early Allograft Dysfunction (EAD)" has been introduced. To support this, new fields for ASAT and ALAT have also been added.

Pre-pathology has been moved from its own tab to the *Basic* tab.

**Form C - New fields**

Updates in Form C

New fields

The following fields have been added to the *Events* tab:

- Type of biliary strictures
- Arterial complication (including type)
- Portal complication (including type)
- Four new fields for malignancy

Data entered in any of the new malignancy fields will automatically be transferred to future follow-ups for the same recipient.

Two new fields have been added to the *Basic* tab: "Occupational status" and "Treated hypertension".

Several new fields have been added to the *laboratory test* tab: HbA1c, Total cholesterol, LDL cholesterol, and PEth.

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### Form C – relocation of fields

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#### Relocation of fields

Several fields have been relocated to different tabs and forms:

Post-pathology has been moved from Form B to Form C. The fields are only available for the first follow up after transplantation. Existing data has been transferred accordingly. If no follow up was available, a 3-month follow up was created for this purpose.

“Dialysis” has been moved from the *Laboratory test* tab to the Basic tab.

“Renal failure treatment” have been relocated from the *Events* tab to the *Basic* tab.

Basic Laboratory test Immunosuppression Events **Post-pathology**

Liver post-pathology (explanted patient liver)

Non tumoral liver status

Malign liver tumor diagnosed

Liver tumor type

Portal tumoral thrombosis

Liver tumor comments

Liver tumor number

Liver tumor diameter (largest lesion)  mm

Extraheptic growth

Vascular invasion

## STEP

### Specify HLA test sample

In the STEP tab, it will now be possible to select between available Fusion sample dates and base the match run on the chosen sample. If no date is selected, the system will continue to use the most recent sample date by default (as it does today).

This can be used if you don't run additional tests (ExPlex) each time you analyze for HLA antibodies.

### Next match run

The next STEP match run will take place August 25<sup>th</sup>, 2026.

Deadline for data entry in YASWA (new pairs and updates) is August 20<sup>th</sup>, 2026 10:00 CET

Pairs and altruistic donors must be tagged with '26: 26nd run August 2026' to be included in the match run.