University Hospitals Bristol and Weston NHS Foundation Trust

Clinical Standard Operating Procedure (SOP)

CO-ORDINATING PATIENT AND RELATED DONOR WORK-UP FOR ALLOGENEIC STEM CELL TRANSPLANT

SETTING	Stem Cell Transplant and Cellular Therapy Programme
FOR STAFF	Clinical and administrative staff working in Adult and Paediatric Stem Cell Transplant
PATIENTS	Patients referred for allogeneic stem cell transplant and their related stem cell donors

1. Indications for Practice

Every stem cell transplant must be carefully co-ordinated from time of patient referral, to time of admission.

After a patient has been referred for allogeneic stem cell transplant and a suitable donor identified (See <u>SOP 2.1, Co-Ordinating Referral for Allogeneic Stem Cell Transplant</u>), the patient and donor must undergo 'work up'. This SOP describes how to arrange the tests and assessments required.

This SOP must be read in conjunction with <u>SOP 2.15 Related Stem Cell Donor Selection</u>, <u>Counselling and Assessment</u>, which provides further details on related donor selection and workup.

2. Authorised Personnel / Training Required

The co-ordination process is undertaken by the transplant co-ordination team. In their absence it can be undertaken by any senior member of qualified nursing or medical staff.

3. Procedure

- 1. **Start work-up folders for the patient and related donor**, containing the documentation to allow for assessment and results to be recorded:
 - Contents lists for each of the Paediatric work-up folders are in SOP 2.1 Appendix 4
 - Contents list for the Adult Allo Donor Work Up folder is SOP 2.1 Appendix 5
 - Contents list for the Adult Allo Patient Work Up folder is SOP 2.1 Appendix 6
- Contact the patient and donor and send a work-up invitation letter and information booklets unless they have already visited the unit and been given the appropriate information. Templates for all work-up invitation letters can be obtained from the BMT coordinators (see 'Queries and Contact' below)
- 3. Book work-up investigations. Using the work up checklists below, arrange the following appointments over 2-3 days.



- 4. Book work-up accommodation and transport if it is needed:
 - SOP 2.10 Booking Patient and Family Donor Accommodation
 - Trustwide SOP Booking Transport
- 5. For paediatric patients, contact Ocean Unit to book in their diary. For adult patients, record times in Adult BMT Allograft Checklist spreadsheet on the SCT Coordination Shared Drive.

3.1 Patient work up

Investigations	Contact for Adults	Contact for Paediatrics	
BMT chat prior to work up			
Respiratory function (for all patients over 8 years of age)	 Respiratory function - to book contact Respiratory, Location A221 Level 2, BRI Ex: 	Respiratory function (patients over 8 years only): Level 2, Bristol Royal Infirmary (BRI) Ex: To book email (service order needs to be on Medway)	
TBI planning (If receiving TBI as part of conditioning), the patient will be consented for their test dose by the Radiology Consultant	TBI planning (if receiving TBI as part of conditioning): Level 2, Bristol Haematology and Oncology Centre (BHOC) ext	TBI planning (if receiving TBI as part of conditioning): Level 2, Bristol Haematology and Oncology Centre (BHOC) ext	
Echo & ECG	 Echo – to book contact Ex: X-Ray Dept, Location A217 Level 2, BRI Bristol Heart Institute (BHI), Location C503 ECG: Carried out on D501 during work up appointment with nurses. 	Echo: Level 3, BRHC. To book, ring ext	
Dental check	Dental check: Main Reception, Bristol Dental Hospital (BDH) Ex:	Dental check: Main Reception, Bristol Dental Hospital (BDH) Ex . To book email and	
Blood tests	Blood tests: See <u>SOP 5.11 Routine BMT Workup</u> <u>Specimens</u>	Book assessment and bloods with Ocean Unit. Email: Blood tests: See <u>SOP 5.11 Routine BMT Workup Specimens</u> Copies of the appendices are in the Ocean Unit treatment room for reference.	



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Chest X-ray (adults) Chest and wrist	Chest X-ray:	Chest & wrist X-ray:
X-ray (for children)	Level 5 BHOC – No appointment necessary. Request needs to be on ICE.	Level 3, BRHC – No appointment necessary. Can be done at the same time as Echo if patient has a request on ICE.
Height and weight	Carried out on D501 during work up appointment	Email Ocean Unit for availability and to book into their diary:
Glomerular Filtration Rate (GFR), for patients with Fanconi anaemia		See SOP 8.53 Iohexol Measurement Of Glomerular Filtration Rate Paediatric Oncology
Consultation with the CNS	Contact BMT co-ordination on ex	Discuss with CNS
Insertion of long line, if required. For paediatric patients, double lumen Hickman line preferred	PICC clinic, Level 5, BHOC	See appropriate SOP

3.2 Related donor work up

Investigations	Contact for Adults	Contact for Paediatrics
ECG (If appropriate, check with medical coordinator)	ECG: Carried out on D501 during work up appointment with nurses.	
Chest X-ray (if over 45 or significant risk factor - check with medical coordinator)	Chest X-ray: Level 5 BHOC – No appointment necessary. Request needs to be on ICE.	Chest & wrist X-ray: Level 3, BRHC – No appointment necessary. Can be done at the same time as Echo if patient has a request on ICE.
Bloods	Blood tests: See <u>SOP 5.11 Routine BMT</u> <u>Workup Specimens</u>	Email Ocean to book:
Height and weight	Carried out on D501 during work up appointment	Email Ocean to book:
Ensure donor is assessed by the medical co- ordinator or one of the consultant team if appropriate*	Carried out on D501 during work up appointment	Organise with Medical Co-Ordinator



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All donors who lack capacity to consent must be assessed by an accredited assessor and have their donation approved by the Human Tissue Authority (HTA)**	BMT Co-ordination (Contact HTA assessor to arrange time and date if sibling lacks capacity
Vein assessment at the Apheresis Unit (For adults donating Peripheral Blood Stem Cells (PBSC's)) Apheresis will advise whether they require support with vascular access via the PICC team. Please check minimum age restrictions with Apheresis Unit.	Therapeutic Apheresis Services (TAS), D702, Level 7, BHOC. Ext	
If donating PBSCs the medical co-ordinator will organise the prescription of GCSF and timing of administration. See <u>SOP 8.10 Administering GCSF To</u> <u>Related PBSC Donors</u>	Carried out on D501 during work up appointment	

* If any medical problems are identified in the work-up, the donor must be referred onto an appropriate specialist. Oversight of the donor's care must not be the responsibility of the recipient's consultant. All donors should be assigned to an appropriate member of the transplant team who will ensure they are fit to donate.

** Approval lasts for 6 months and must be completed at least 10 days prior to the recipient's admission to allow the request to be processed. For further information see SOP 2.17 Referring a Related Stem Cell Donor for Human Tissue Authority Assessment.

REFEREN	CES	None				
RELATED DOCUMEN AND PAG	NTS	 SOP 2.6 Booking an PBSC collection for Adult Patients and Adult Related Donors of Paediatric Patients SOP 2.9 Changing, Delaying or Cancelling a Stem Cell Transplant SOP 2.13 Coordinating Patient Admission to the Ward for Stem Cell Transplant Other related documents are hyperlinked within the document 				
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SAFETY		No	additional	safet	y concerns	
QUERIES AND CONTACT For particular Email:				aediatric patients		
		For adult patients: Tel: Email:				
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