

History of the ILDA Role: Including the Basics, Regulatory Oversight, and Policy

## Additional Q&A Presenter: Dianne LaPointe Rudow, ANP-BC, DNP, CCTC • Mount Sinai Hospital

- 1. How can a transplant coordinator function also as an ILDA since they are routinely involved in transplant care? Our center was told by CMS that the transplant nurse coordinator cannot serve as the ILDA as well.
  - Answer: A live donor coordinator whose role is to only care for live donors could be the person who serves as the ILDA. If they care for recipients and or take call on recipients they could not.
- 2. Should the ILDA see the patient in the pre-donation phase, donation phase, and before discharge? *Answer:* Yes, the ILDA should see the patient in all phases and/or have a telephone call. The ILDA/team need to be involved.
- 3. What type of documentation do you recommend to meet all of these requirements? A checklist with narrative, a narrative, or a combination of both? Would standardizing documentation be something for the ILDA profession to look at?
  - Answer: Type of documentation is not specified in the guidelines, as long as required components are included. Given the range in disciplinary background of ILDAs, and the associated differences in documentation style, the ILDA workgroup didn't go so far as to recommend standardization. However, we love the idea of a 'toolkit' with some different options (that meet regulatory guidelines) for programs to consider.
- 4. In the case of the nephrologist ILDA that has dialysis patients but does not do transplant and refers patients to the transplant nephrologist, is there any conflict of interest here?

  Answer: No, providing that they are not evaluating the donors of a recipient they referred.
- During the discussion of policy 14, first bullet point there was mention of not needing ILDA for a certain kind of transplant. Please Clarify.
   Answer: If a person needs a liver transplant and is getting a deceased donor transplant, but their
  - organ is suitable for someone else and it is in turn donated (this can happen in patients with Amyloid) that person is treated like a recipient not a live donor so they don't need an ILDA.
- 6. Can you provide more information on the ILDA list serv?

  Answer: The National Kidney Foundation hosts a free email listserv (email discussion group) for hospital professionals whose job description includes being a "Living Donor Advocate" to potential and actual living donors. The purpose of the listserv is to allow Living Donor Advocates an effective tool to share best practices and resources with colleagues and peers. For more information and to sign up, visit <a href="https://www.kidney.org/professionals/ProfessionalResources">www.kidney.org/professionals/ProfessionalResources</a>