

PRESS RELEASE

National Kidney Registry Passes Kidney Backup Policy

(Babylon, NY – December 20, 2017) – The National Kidney Registry Medical Board has approved a new policy which provides added assurance to kidney transplant recipients in NKR swaps. The new policy protects eligible recipients whose transplanted kidney fails within 90 days of transplant surgery. Patients who are eligible for this policy would be prioritized to receive another living donor kidney in the rare circumstance that their swap kidney fails.

“Patients and programs enter the NKR with an expectation that, while not fully predictable, all controllable variables for both donor and recipient outcomes will be carefully evaluated and critically reviewed. This policy is an effort on behalf of the Medical Board to ensure the integrity of both the complexities inherent in these exchanges and the overall KPD process to meet those expectations,” said Dr. Matthew Cooper, Chair of the NKR Surgical Committee and Director of Kidney Transplantation at MedStar Georgetown Transplant Institute.

“Though these instances are extremely rare, this policy reduces the risks outside of the control of the recipient or their doctors, such as surgical issues at the donor hospital or a transport related issue. Both donors and recipients will now feel a greater level of comfort entering the KPD process.” remarked Mikel Prieto, Member of the NKR Medical Board and Transplant Surgeon at Mayo Clinic in Rochester, MN.

Garet Hil, Founder and CEO of the National Kidney Registry commented, “By leveraging our large pool size and high volume of chain starts of the NKR we are reducing the very small risk of a bad outcome in paired exchange, further improving the attractiveness of enrolling in paired exchange, even for compatible pairs.”

About the National Kidney Registry and the Donor Care Network

The National Kidney Registry (www.kidneyregistry.org) is a nonprofit organization with the mission to save and improve the lives of people facing kidney failure by increasing the quality, speed, and number of living donor transplants.