



COVID-19 recommendation

Update, 2021-01-21

Deceased solid organ donors (incl. Langerhans islets) without known active or former COVID-19

SARS-CoV-2 PCR diagnostics must be carried out in all potential deceased organ donors using an oro-or nasopharyngeal swab. Depending on the epidemiological situation, the medical advisor of Swisstransplant can request an additional chest CT-scan to exclude COVID-19. In case of COVID-19 typical pulmonary alterations on the chest CT-scan, a SARS-CoV-2 PCR in bronchoalveolar lavage fluid can be requested by the medical advisor of Swisstransplant. If the PCR test is positive and/or the chest CT-scan is highly suspicious for COVID-19, organs and Langerhans islets cannot be allocated. SARS-CoV-2 PCR testing must be performed less than 72 hours before organ donation. If the time window exceeds 72 hours, the test has to be repeated.

2. Deceased solid organ donors (incl. Langerhans islets) with former COVID-19

Potential deceased organ donors with known former COVID-19 diagnosed more than 28 days but less than 6 months before donation are eligible for donation if the above-mentioned criteria are fulfilled (see point 1), if they did not present multiorgan failure during the former COVID-19 episode, and if they recovered clinically completely from COVID-19. Potential deceased solid organ and Langerhans islets donors with COVID-19 more than 6 months before organ donation are evaluated similar to deceased solid organ donors without known active or former COVID-19.

3. Deceased solid organ donors with active COVID-19

Potential deceased organ donors with active COVID-19 (positive PCR from oro-or nasopharyngeal swab) and suffering from a mild/asymptomatic disease are eligible for liver donation only in a live saving situation and on a national urgent status. The recipient or his/her next of kin has to be informed about the risks and benefits of accepting a liver from a donor with COVID-19 and has to provide written consent. The consent has to be attached in the SOAS prior to transplantation.

4. Living solid organ donors SARS-CoV-2

PCR diagnostics must be carried out in all living donors to exclude the possibility of COVID-19 using an oro-or nasopharyngeal swab. The PCR testing has to be performed less than 72 hours before donation. If the time window exceeds 72 hours, the test has to be repeated. Detailed medical history, exposure to persons with COVID-19 and searching for COVID-specific symptoms is mandatory prior to donation and has to be documented. Living donors with active COVID-19 or multi-organ failure during a former COVID19 episode are not eligible for donation. COVID-19 negative living donors exposed to SARS-CoV-2 may donate organs if the last exposure with a confirmed COVID-19 case was more than 14 days before donation. Living donors who have recovered from confirmed COVID-19 may donate organs at least 14 days after laboratory evidence for viral RNA clearance (by SARS-CoV-2 PCR from oro-or nasopharyngeal swabs) and at least 28 days after symptom resolution.



5. Cornea donation

Potential cornea donors must be screened by a SARS-CoV-2 PCR on an oro-or nasopharyngeal swab performed, less than 72 hours premortem or not more than 24 hours post-mortem. Patients with active COVID-19 are not eligible for cornea donation. COVID-19 negative patients exposed to SARS-CoV-2 may donate cornea if the last exposure with a confirmed COVID-19 case was more than 14 days before donation. Patients who have recovered from confirmed COVID-19 may donate cornea at least 14 days after laboratory evidence for viral RNA clearance (by SARS-CoV-2 PCR from oro-or nasopharyngeal swabs) and at least 28 days after symptom resolution.

6. Donation of tissues other than cornea

- a. In case of amniotic membrane donation for transplantation in human eye we recommend PCR diagnostics in the respiratory tract of the tissue donor using an oro-or nasopharyngeal swab not earlier than 24 hours before donation and no later than 24 hours after donation. Detailed medical history, exposure to COVID-19 infected persons and searching for COVID-specific symptoms is mandatory prior to donation and has to be documented.
- b. In case of bone graft donation from asymptomatic donors we do not recommend routine PCR diagnostics. Detailed medical history, exposure to COVID-19 infected persons and searching for COVID-specific symptoms is mandatory prior to donation and has to be documented.

Recommendation approved by Dr Cédric Hirzel, President Swisstransplant Working Group of Infectious Diseases and PD Franz Immer, Medical Director and CEO Swisstransplant