



Hello, my name is Jennifer Bland, and I am the Mayo Clinic in Rochester physician liaison for the kidney and pancreas transplant program. I am here to answer questions and to provide you with information beneficial to you and your patients.

I have included the following for your reference:

- Information about our kidney and pancreas transplant programs and physicians.
- Information about our new metabolic kidney transplant program.
- Clinical Trials reference information
- CareLink referral portal. CareLink provides easy referral submission and viewing of records, clinical notes, and test results in real-time.

Please feel free to reach out to me, Jennifer Bland

Phone: 507-266-1442

Email: bland.jennifer@mayo.edu

LinkedIn: www.linkedin.com/in/jennifer-bland-4a5a7147



KIDNEY & PANCREAS TRANSPLANT PROGRAMS

Mayo Clinic is internationally-recognized for having teams of experts who work together to provide the best possible outcome for complex patients. This means that an entire team of physicians focuses on one patient at a time. It also extends to the collaboration with local physicians and their staff who play a vital role in patients' care before and after transplantation.

Mayo Clinic's kidney and pancreas transplant programs are among the largest and most innovative in the country. Transplant teams in Arizona, Florida and Minnesota perform nearly 700 kidney transplants and 30 pancreas transplants each year while achieving excellent outcomes.

REFER A PATIENT



Jacksonville, Florida

800-634-1417



Phoenix/Scottsdale, Arizona

866-629-6362



Rochester, Minnesota

800-533-1564

Use our referring provider portal to submit referral requests and view your patients' Mayo Clinic medical records at the same time we do.

In addition, access to resources including clinical trials, CME, Grand Rounds, and scientific articles and videos are available.

[mayoclinic.org/medical-professionals](https://www.mayoclinic.org/medical-professionals)

VISIT OUR WEBSITES

[mayoclinic.org/kidney-transplant](https://www.mayoclinic.org/kidney-transplant)

[mayoclinic.org/pancreas-transplant](https://www.mayoclinic.org/pancreas-transplant)

WHY CHOOSE MAYO CLINIC FOR KIDNEY & PANCREAS TRANSPLANT

- ▶ At Mayo Clinic, patients may receive living donor transplant, using minimally-invasive laparoscopic surgery for all donors
- ▶ Mayo Clinic offers:
 - Paired donation living kidney transplantation
 - Incompatible kidney transplants (anti-HLA antibody, ABO incompatible, positive crossmatch)
 - Deceased donor kidney, pancreas and combined kidney-pancreas transplant
 - Preemptive kidney transplant, avoiding or decreasing dialysis time, when possible
- ▶ Comprehensive management of pancreas transplantation is available for patients with type 1 diabetes, including "pancreas after kidney transplant" to avoid dialysis, when possible
- ▶ Select patients with type 2 diabetes are potential candidates for simultaneous kidney-pancreas transplant or pancreas transplant after kidney transplant
- ▶ Retransplantation options, including world-class expertise in paired donation, desensitization and the use of novel new medicines
- ▶ Steroid-free immunosuppression
- ▶ Comprehensive post-transplant protocol to quickly identify problems and enable early intervention, in collaboration with local physicians

MAYO CLINIC KIDNEY & PANCREAS TRANSPLANT TEAMS

Arizona

Nephrology

Hasan Khamash, MD, *Medical Director*
Kidney Transplant

Janna L. Huskey, MD, *Medical Director*,
Pancreas Transplant

Harini Chakkerla, MD

Raymond L. Heilman, MD

Girish K. Mour, MD

Sumi Sukumaran Nair, MBBS

Surgery

Kunam Reddy, MBBS, *Surgical Director*

Paul E. Andrews, MD

Erik P. Castle, MD

Jack Harbell, MD

Winston R. Hewitt, Jr., MD

Caroline Jadowiec, MD

Amit K. Mathur, MD

Adyr Moss, MD

Andrew L. Singer, MD, PhD

Florida

Nephrology

Martin Mai, MD, *Medical Director*,
Kidney Transplant

Tambi Jarmi, MD, *Medical Director*,
Pancreas Transplant

Katherine Oshel, MD

Mary Prendergast, MD

Hani Wadei, MD

Surgery

Dana K. Perry, MD, *Surgical Director*

Justin Burns, MD

Kristopher P. Croome, MD

Shennen A. Mao, MD

C. Burcin Taner, MD

Justin Nguyen, MD

Minnesota

Nephrology

Carl Cramer, MD, *Medical Director*,
Pediatric Kidney Transplant

Yogish Kudva, MD, *Medical Director*,
Pancreas Transplant

Thomas Schwab, MD, *Medical Director*,
Adult Kidney Transplant

Minnesota

Nephrology - *continued*

Carrie A. Schinstock, MD, *Associate*
Medical Director, Adult Kidney Transplant

Hatem Amer, MD

Naim Issa, MD

Aleksandra Kukla, MD

Timothy Larson, MD

Elizabeth Lorenz, MD

Suzanne M. Norby, MD

Sandra Taler, MD

Stephen Textor, MD

Surgery

Patrick Dean, MD, *Surgical Director*

George Chow, MD

Julie Heimbach, MD

Scott Nyberg, MD, PhD

Mikel Prieto, MD

Mark Stegall, MD

Tamucin Taner, MD, PhD

LONG-TERM HOUSING

The Gabriel House of Care in Florida, Gift of Life Transplant House in Minnesota, Help in Healing Home at the Village at Mayo Clinic in Arizona are available to transplant patients looking for a home-like environment who require long-term medical care away from home.

APPOINTMENT SCHEDULING AND FOLLOW-UP COMMUNICATION

Mayo Clinic works directly with patients to schedule their appointment, and coordinates with their referring physician for follow-up regarding outcomes of their visit.

INSURANCE

Mayo Clinic has agreements with many insurance carriers, third-party administrators and employers. Our appointment office and financial teams will discuss insurance coverage with patients prior to their appointment.

mayoclinic.org/insurance

MAYO CLINIC LABORATORIES

Mayo Clinic Laboratories is the global reference laboratory of Mayo Clinic. Mayo Clinic Laboratories provides highly specialized testing and pathology consultation across all medical sub-specialties for patients around the world.

mayocliniclabs.com

CULTURALLY TAILORED CARE

The Hispanic population in the southwestern United States is among the highest in the nation. The Phoenix campus of Mayo Clinic offers the Mayo Clinic Hispanic Transplant Program, a culturally tailored approach to kidney transplantation. The initiative empowers patients throughout their transplant journey, removing misconceptions about living donation, and attaining the best outcomes achievable.

CLINICAL TRIALS

Research is an integral part of Mayo Clinic. Mayo Clinic physicians are actively engaged in a wide range of novel clinical research, offering patients promising experimental agents and devices. Mayo Clinic Investigators work together with the referring physician to optimize patient care.

www.mayo.edu/research/clinical-trials

CONTINUOUS PROFESSIONAL DEVELOPMENT

Mayo Clinic School of Continuous Professional Development offers a unique learning experience for today's health care professional. Educational activities enhance and enrich your medical knowledge and improve your service to the patient.

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Mayo Clinic offers kidney transplant

To patients with high BMI who were previously considered ineligible

As obesity has grown to affect 40% of the U.S. population and 60% of patients seeking kidney transplant, body mass index (BMI) — a traditional transplant criterion — has become a barrier. A large proportion of potential kidney transplant recipients currently have BMIs above 40.

While many transplant centers use a BMI cutoff of 35, Mayo Clinic's kidney transplant BMI cutoff is 40. However, Mayo staff encourages bariatric surgery for patients with morbid obesity to improve general health and potential post-transplant outcomes, even if they meet pre-specified BMI goals.

Two physicians at Mayo Clinic in Rochester, Minnesota, Aleksandra Kukla, M.D., a nephrologist, and Tayyab (Ty) S. Diwan, M.D., an abdominal transplant surgeon, have paved the way to transplant for patients with higher BMIs, using bariatric surgery to increase access. Outcomes are strong thus far for patients who have undergone this surgery prior to renal transplant, and mortality has not increased in patients undergoing sleeve gastrectomy in the pretransplant setting.

Drs. Diwan and Kukla and colleagues in the Endocrinology, Diabetes, Metabolism, and Nutrition's advanced weight management program developed a streamlined program for patients with obesity and renal failure. The program is staffed by a bariatric and transplant surgeon, a nephrologist, an endocrinologist, dietitians, psychologists, and transplant and bariatric nurses. The team strives to identify patients with high BMI early, offering consult on risk and treatment. This alignment of bariatric and transplant disciplines is uncommon among medical centers, says Dr. Kukla.

She explains that Mayo is uniquely suited not only to address renal failure and kidney transplant but also to provide holistic care. Strong transplant, bariatric and endocrine services are opportune for treating bariatric issues in potential kidney transplant recipients. The collaboration among these groups means that in two to three days, patients can complete all examinations and testing rather than making countless visits.

WHY OBESITY HAS BEEN AN ISSUE WITH KIDNEY TRANSPLANT

Patients with high BMIs are not typically transplanted in the U.S. because they are part of a high-risk population that experiences increased complications perioperatively.

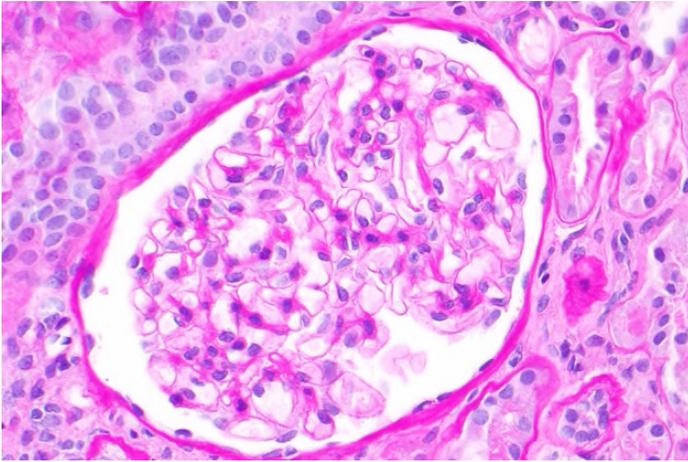
REFER A PATIENT

Jacksonville, Florida
800-634-1417

Phoenix/Scottsdale, Arizona
866-629-6362

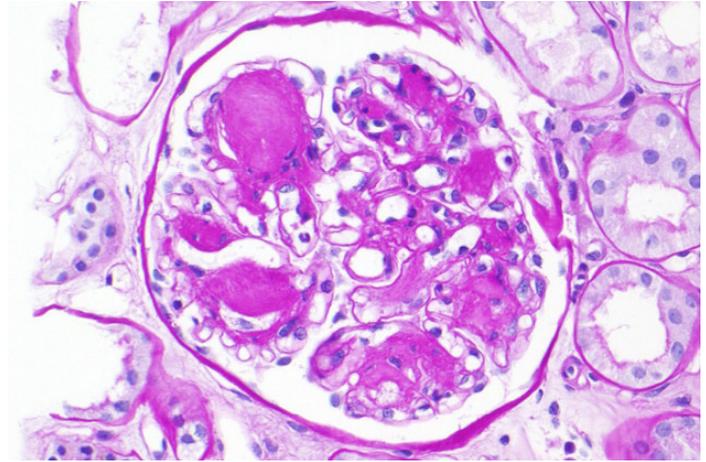
Rochester, Minnesota
800-533-1564

Or visit [MayoClinic.org/medical-professionals](https://www.mayoclinic.org/medical-professionals) to refer a patient or access resources online, including clinical trials, continuing professional education, grand rounds, and scientific articles and videos.



Normal glomerulus at time of transplant

This picture (periodic acid-Schiff stain) shows normal glomerulus at the time of the transplant.



Nodular glomerulosclerosis (diabetic) five years posttransplant

This picture (periodic acid-Schiff stain) represents what may happen to the kidney in a patient who is obese, and has diabetes, five years posttransplant. After five years, about 50% of patients with diabetes and obesity developed recurrent diabetic kidney disease in the renal allograft. Once this change develops, kidney survival is decreased and patients are at high risk of death.

Comorbidities present in patients with obesity include diabetes, hypertension, arthritis, sleep apnea, increased cancer risk and infection rates, and frailty because obesity limits activity. Dr. Diwan explains that to many physicians, at issue is transplanting organs into unhealthy environments.

Obesity and diabetes also elevate cardiac event risk. Most patients with high BMI have increased visceral fat, predisposing to metabolic derangements that elevate cardiac risk. Patients seen for potential kidney transplant are already at the highest cardiovascular risk, says Dr. Kukla, noting that she sees even young patients who have had cardiac bypass. In addition, cardiac disease is a leading cause of death for patients while on dialysis and also post-transplantation.

Moreover, both obesity and diabetes affect kidney allograft outcomes. Patients developing renal failure due to diabetes, especially those with high BMI, are at risk of diabetic kidney disease recurrence in the allograft. In a study published in the November 2020 issue of *Clinical Transplantation*, Mayo Clinic researchers demonstrated a high incidence of moderate to severe mesangial expansion, a histologic hallmark of diabetic kidney disease, at five years post-transplant, which was associated with worse patient and kidney allograft survival.

Weight loss in the dialysis setting can be difficult due to associated fatigue, creating a negative cycle of minimal activity leading to more weight gain.

A NONTRADITIONAL, INCLUSIVE APPROACH

Undaunted by BMI restrictions, Drs. Diwan and Kukla feel passionately that the medical profession needs to help patients with obesity who need kidney transplant, prompting questions of how physicians can best care for them.

“In a perfect world, there should be no BMI cutoff,” says Dr. Diwan. “If someone’s BMI is 60, bring them over.”

The traditional approach doesn’t include helping patients with factors that make them transplant ineligible. Physicians typically instruct patients with obesity and diabetes to lose weight and return when this is accomplished.

Usually, patients unable to lose sufficient weight for transplant eligibility continue dialysis and die from their disease. According to the United States Renal Data System 2018 Annual Data Report, for patients starting dialysis in 2011, adjusted five-year survival from day 1 was 52% for those on peritoneal dialysis and 42% for those on hemodialysis. Dr. Kukla indicates that patients with diabetes would fare even worse. Most patients with diabetes aren’t even able to make it to dialysis due to high cardiovascular mortality.

“Patients do better with transplant even without losing weight,” says Dr. Diwan. “But there’s a difference between better and ideal.”

Dr. Kukla agrees that if a patient is healthy enough, transplant is always the best option. Bariatric surgery intervenes for patients with obesity, decreasing weight and comorbidities so they become transplant eligible.

In a study published in *The New England Journal of Medicine* in 2007, investigators compared standard weight loss via diet and exercise alone with bariatric surgery for patients with obesity. They found bariatric surgery to be most effective, improving health status and increasing life years.

Renal transplantation plus weight loss from bariatric surgery greatly improves patients’ quality of life, says Dr. Diwan, as new mobility expands their range of experiences.

TIMING OF BARIATRIC SURGERY AND TRANSPLANT, REFERRALS

Drs. Diwan and Kukla advocate bariatric surgery first, then kidney transplant for patients with obesity. “Though you can perform bariatric surgery after transplantation or simultaneous to kidney transplant, often patients get declined because their BMIs are above 40 and they never get in the door,” says Dr. Diwan. “So our thought is to do this on the front end.”

Bariatric surgery addresses the common comorbidities previously mentioned, curing sleep apnea, treating type II diabetes and other chronic conditions and thereby decreasing transplant risk and promoting better kidney function post-surgery. If bariatric surgery allows a transplanted kidney to last an additional five years, it also impacts re-transplant need.

From a nephrologist’s viewpoint, earlier intervention for patients with obesity in the pre-dialysis setting is better, explains Dr. Kukla. Bariatric surgery facilitates kidney stabilization; some patients may not need kidney transplant for years — perhaps ever. She says many patients with diabetes have heart attacks and die far before they ever receive a transplant; thus, she encourages prompt referral.

Dr. Diwan agrees that referring patients with obesity early in the kidney disease course can present opportunities to address weight loss and help patients become transplant eligible. “We really want to be able to take care of everybody who needs a kidney transplant,” says Dr. Diwan.

FOR MORE INFORMATION

Kukla A, et al. [Mesangial expansion at 5 years predicts death and death-censored graft loss after renal transplantation](#). *Clinical Transplantation*. In press.

[The United States Renal Data System Annual Data Report 2018](#).

Sjöström L, et al. [Effects of bariatric surgery on mortality in Swedish obese subjects](#). *The New England Journal of Medicine*. 2007; 357:741.



APPOINTMENT SCHEDULING AND FOLLOW-UP COMMUNICATION

Mayo Clinic works directly with patients to schedule their appointments, and coordinates with their referring physician for follow-up regarding outcomes of their visits.

Referring provider portal

Use our referring provider portal to submit referral requests and view your patients’ Mayo Clinic medical records at the same time we do.

[MayoClinic.org/medical-professionals](https://www.mayoclinic.org/medical-professionals)

Insurance

Mayo Clinic has agreements with many insurance carriers, third-party administrators and employers. Patients should check with their insurance plans for specific coverage details before confirming an appointment with our scheduling office.

[MayoClinic.org/insurance](https://www.mayoclinic.org/insurance)

Continuous professional development

Mayo Clinic School of Continuous Professional Development offers a unique learning experience for today’s health care professional. Educational activities enhance and enrich your medical knowledge and improve your service to the patient.

ce.mayo.edu

Clinical trials

Research is an integral part of Mayo Clinic. Mayo Clinic physicians are actively engaged in a wide range of novel clinical research, offering patients promising experimental agents and devices. Mayo Clinic investigators work together with the referring physician to optimize patient care.

[mayo.edu/research/clinical-trials](https://www.mayo.edu/research/clinical-trials)

Mayo Clinic Laboratories

Mayo Clinic Laboratories (MCL) is the global reference laboratory of Mayo Clinic. MCL provides highly specialized testing and pathology consultation across all medical subspecialties for patients around the world.

[mayocliniclabs.com](https://www.mayocliniclabs.com)



INFORMATION FOR PROVIDERS

Clinical Trials Reference Information

Research is an integral part of Mayo Clinic. Mayo Clinic physicians are actively engaged in a wide range of novel clinical research, offering patients promising experimental agents and devices. Mayo Clinic investigators work together with the referring physician to optimize patient care.

A listing of clinical trials is available at clinicaltrials.mayo.edu

CANCER CLINICAL TRIALS

- As an NCI-designated Comprehensive Cancer Center, Mayo Clinic Cancer Center faculty are dedicated to improving outcomes for cancer patients through clinical trials.
- Mayo Clinic Cancer Center offers innovative, impactful, and unique cancer clinical trials from early phase I through phase III that offer new options, sometimes not available elsewhere, for patients with cancer.
- Cancer Clinical Trials – **1-855-776-0015**

NON-CANCER CLINICAL TRIALS

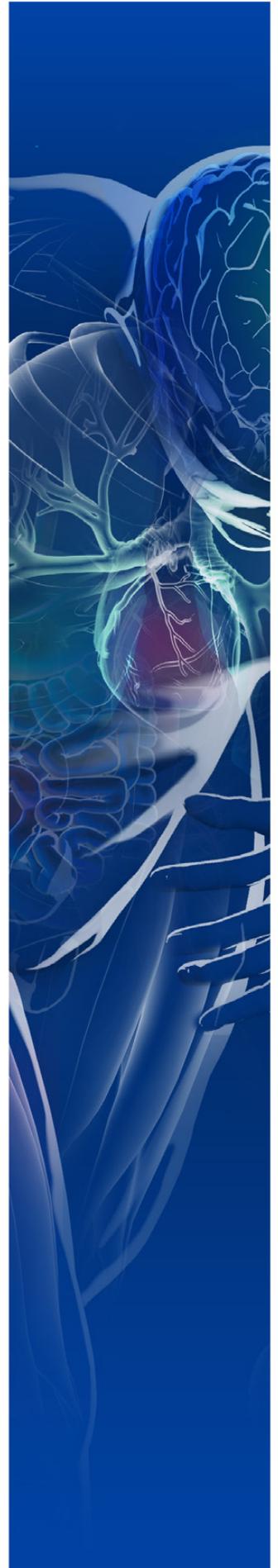
- Mayo Clinic offers an array of trials across all disciplines such as Transplant Medicine, Cardiovascular Care, Neurology, Family Medicine, GI, and all surgical disciplines.
- Contact a member of the study team listed on the clinical trial. clinicaltrials.mayo.edu

EARLY CANCER THERAPEUTICS CLINIC

The Early Cancer Therapeutics Clinic at Mayo Clinic offers patients whose cancers haven't responded to standard chemotherapy or other treatments the opportunity to join an early phase clinical trial.

The Early Cancer Therapeutics Clinic provides access to the most current phase I trials available from Mayo Clinic researchers, pharmaceutical companies and the National Cancer Institute. The clinic is available at all three Mayo Clinic campuses in Arizona, Florida and Minnesota.

Early Cancer Therapeutics Clinical Trials – **1-855-776-0015**



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Medical Professional Resources

mayoclinic.org/medical-professionals

- Online services
- Physician directories
- Physician biographies including training and areas of specialization
- Patient referrals
- Patient transports
- Insurance coverage
- Patient follow-up
- Grand Rounds videos
- Medical and surgical department descriptions
- Physician newsletters
- Continuing medical education (CME)

Additional Resources

Medical services available at Mayo Clinic

mayoclinic.org/diseases-treatments

Clinical trials at Mayo Clinic

clinicaltrials.mayo.edu

Continuous Professional Development

ce.mayo.edu

Insurance

mayoclinic.org/insurance

Referring Your Patient to Mayo Clinic



Mayo Clinic is committed to providing outstanding service to referring physicians and their patients. We respect your relationships with your patients and value the opportunity to collaborate with you on their treatment plans.

Jacksonville, Florida

800-634-1417

Phoenix/Scottsdale, Arizona

866-629-6362

Rochester, Minnesota

800-533-1564

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mayoclinic.org/medical-professionals

Referring a patient

Request an appointment

You can request an appointment through Mayo Clinic's CareLink Portal, call in or fax in your request.

Information needed for referral:

- Patient name
- Date of birth
- Reason for referral (indication, diagnosis, etc.)
- Patient insurance

Options for referral:

Mayo Clinic CareLink Portal

Mayo Clinic CareLink provides a secure web-based platform to refer a patient and view the Mayo Clinic record.

carelink.mayoclinic.org

- Request appointments 24 hours a day, seven days a week
- Upload relevant documents and images
- Review patient medical records and future appointments (with patient authorization on file)
- Receive referral summary packet in an electronic format, sent to the referring physician

Call

Jacksonville, Florida

800-634-1417

Phoenix/Scottsdale, Arizona

866-629-6362

Rochester, Minnesota

800-533-1564

Fax

Jacksonville, Florida

904-953-0575

Phoenix/Scottsdale, Arizona

480-301-4071

Rochester, Minnesota

800-321-1368

While your patient is at Mayo Clinic

While your patient is being treated at Mayo Clinic you will have access to your patient's medical records, test results and the ability to message the physician or care team through Mayo Clinic CareLink. Patient medical records will be viewable through CareLink beginning on the day of the patient's appointment, with patient authorization on file.

Once your patient is dismissed, results, notes and summary of care documents will continue to be available through CareLink.

Hospital admissions and transfers

Experienced nursing staff is available 24/7 at Mayo Clinic hospitals to coordinate direct admission, emergency department evaluation or inpatient consultation for your patients.

Arizona

Admission and Transfer Center: 480-342-1155

Florida

Admission and Transfer Center: 904-953-1111

Minnesota

Admission and Transfer Center: 507-255-2910