

1. Page 1

<u>PLEASE NOTE</u>: You will NOT be asked all of the questions in this Survey. Depending on your answers to particular questions, the survey is designed to skip over questions that are not relevant for your OPO. Therefore the numbering on the questions on the screen will not always correspond to the numbering of the questions in the PDF file you may have received. The wording is the same, just the numbering is different.

Do NOT use the "forward" and "back" buttons on your browser with this survey. It will not work well.

The initial results of this survey will be shared with the OPO Community during the AOPO Annual Meeting in Austin (2 sessions on Wednesday afternoon).



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2. Page 2	
* 1. Please enter your identifying information here: (Note: The OPO name and UNOS code are required.) Name of Person Completing Survey OPO Name (required) 4 Letter UNOS code (required) Email Address Phone Number	
* 2. Is your OPO currently screening potential donors for Strongyloides stercoralis infection? Yes No	



3. Page 3
3. For approximately how long has your OPO been screening for Strongyloides?
Less than 6 months
6 to 12 months
13 to 24 months
25 to 36 months
37 to 48 months
More than 48 months
4. What prompted the initiation of your OPO screening for Strongyloides? (Check all that apply) History of positive donor(s) from our OPO AST guidelines Recommended by a local working group/committee Information received/lecture provided at AOPO conference Other (please specify)
 5. Are you screening all potential donors or are you using a risk-based screening strategy? All donors Risk-based strategy (e.g., by age, country of origin, etc.)



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6. If you are using a risk-based screening, please provide risk factors inc	cluded in the screening criteria in
the space available.	



5. Page 5
7. Which laboratory are you using for Strongyloides donor screening?
LabCorp
ARUP
Quest Diagnostics
Other (please specify)
8. In addition to any testing performed in your laboratory, do you send samples for confirmatory testing? (Please specify where in comment box. E.g., CDC or name of reference laboratory)
Always
Sometimes
Never
Please specify:
9. Do you wait for the results of Strongyloides donor screening tests before recovery of organs from donor? Always
Sometimes
Never
10. How many donors have you screened since initiation of Strongyloides screening?

•	11. How many donors have screened positive since initiation of Strongyloides screening?
L	
C	12. Of the donors who have screened positive for Strongyloides, how many donors were also positive on confirmatory testing? Please enter N/A if confirmatory testing not performed. Please enter 0 (zero) if the answer to the previous question was zero.
* ′	13. Have organs from any of your donors who screened positive for Strongyloides been transplanted?
(Yes
(No No
(N/A - No Strongyloides positive donors



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14. From how many DONORS who screened positive for Strongyloides have organs been transplanted?
15. How many ORGANS from donors who screened positive for Strongyloides have been transplanted?
16. Which organs from donors who screened positive for Strongyloides have been transplanted? (Check all that apply)
None
Heart
Lungs
Kidneys
Liver
Pancreas
Small Intestine
Other (please specify)



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17. Did you consult a disease expert when you had a positive Strongyloides screening test?
Always
Sometimes
Never



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18. Which disease expert did you consult?	
Transplant center medical expert	
Local Health Department	
State Health Department	
UNOS	
CDC	
Other (please specify)	
19. When a donor is found to be positive, does your OPO provide recommendations on recipient management?	
Yes, we provide recommendations to the transplant center	
Yes, we provide recommendations to the transplant center No, we leave recommendations to the discretion of the recipient transplant center	



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20. If you do not screen for Strongyloides infection now, have you considered screening?	
Yes, considered screening and decided not to screen	
Yes, considered screening and have plan to start in near future	
Yes, considered screening and have not yet come to a decision	
No, have not considered screening	



10. Page 10
21. If you are considering implementation of Strongyloides screening in the future, what prompted this decision? (Check all that apply)
History of positive donor(s) from our OPO
AST guidelines
Recommended by a local working group/committee
Information received/lecture provided at AOPO conference
Other (please specify)
22. If you are considering implementation of Strongyloides screening in the future, what laboratory do you
plan to use?
LabCorp
ARUP
Quest Diagnostics
Unsure/Have not decided
Other (please specify)
23. If you are considering implementation of Strongyloides screening in the future, are you planning to screen all potential donors or using a risk-based screening strategy?
All donors
Risk-based screening



the screening criteria in the space available.	11. Page 11
the screening criteria in the space available. 25. Do transplant centers in your DSA accept organs from donors who have tested positive for Strongyloides? Yes, all transplant centers in our DSA accept all organs Yes, some translant centers in our DSA accept all organs Yes, those that accept organs, accept some organs and not others No, none of the transplant centers in our DSA accept any organs I do not know Other (please describe) 26. Please use the space below to state any hesitation with screening for Strongyloides or other	
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