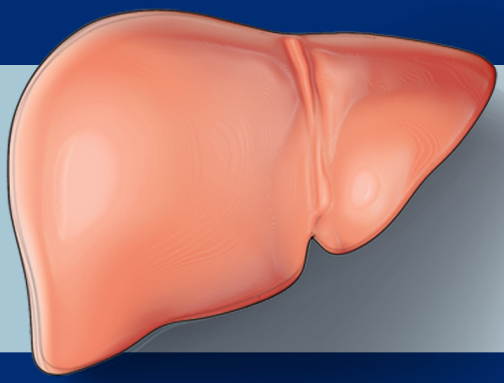
Emory Liver Transplant Program

Journey to Transplantation



AFTER YOUR TRANSPLANT

EMORY
TRANSPLANT CENTER

Making a difference in the lives
of our patients and our community.

WELCOME TO EMORY TRANSPLANT

We are happy to have you and look forward to participating in your care. If you have any questions, please ask any member of your Emory Transplant Team.

Meet Your Transplant Team

My Liver Specialist: _____

RN Transplant Coordinator: _____

LPN Transplant Coordinator: _____

POST-LIVER Transplant Secretaries: _____

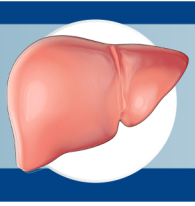
Transplant Social Workers: _____



Questions? Here's that one perfect number:

855-366-7989

For a full list of contact information, please refer to the next page.



Contacting the Transplant Team

1-855-EMORYTX (366-7989)
emoryhealthcare.org/transplant-liver
Clinic B, 6th Floor, Suite 6400



How to get in touch with the Transplant Team

The Transplant Center is open Monday through Friday from 8 AM to 5 PM. Calls received after hours will be transferred to the Clinic Operator who will page the on-call clinician or physician.

1-855-EMORYTX (366-7989)

Call this number for:

- Appointments
- Nurse Practitioner/Transplant Coordinator
- Medication Refills

Fast Track: 404-686-5720 or 800-640-9293

Monday through Friday, 7am to 7pm
Saturday, 8am to 4pm
Call this line to register your insurance information prior to a scheduled appointment.

In case of emergency, call 911.

Emory Transplant Center Website:
www.emoryhealthcare.org/transplant-liver

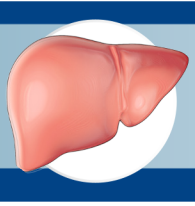
Patient Portal Website:
www.emoryhealthcare.org/patient-portal

When to Call the Transplant Team

Temperature of 100° F or greater	Feeling unusually tired
Blood Pressure greater that 160/90 for two readings in a row	Pain, tenderness or swelling in the area of the new liver
Weight gain of more than 3 pounds in a day or 5-7 pounds in a week	Increased pain, redness, or pus-like drainage at the incision
Cough, shortness of breath, sore throat, chills	Persistent headache or flu-like symptoms
Nausea, vomiting, or stomach pain	Any unexplained rash, sores, or bruising
Diarrhea	Swelling of the hands, feet, or ankles
Decreased appetite	Unable to take medications for any reason
Blood in the urine or bowel movements, painful urination	Anything that concerns you about your health

You should call the Transplant Team if you experience **any of these symptoms**, or any time anything about your health changes, even if it is not related to your transplant.

EMORY HEALTHCARE



Your Guide to Staying Healthy After Your Transplant

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Now that you have had your transplant, we encourage you to resume your normal activities as much as possible. It is important to take care of yourself so that you and your liver will remain healthy.

If you have any questions, please ask your nurse coordinator.



Your Daily Routine

Keeping a daily routine of checking vital signs and recording your weight is important. You should also develop a schedule for taking your medicines. By maintaining a plan you will be able to detect post-transplant problems early.

Use the **Daily Records** to help you keep track of your vital signs and weight. Ask your nurse coordinator for help in filling it out.

Your Daily Records



Taking Care of the Wound

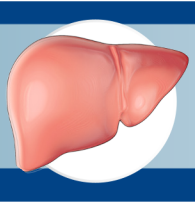
Your incision, or wound, is closed with staples. The skin is then glued together. To take care of it, you should shower with soap and water.

- Do not use tub baths, go swimming until your incision is healed (usually 1 month) and you are cleared by your physican or transplant coordinator.
- Call if there is redness, pus, pain, or the skin edges open.



Your Medicines

You may be on numerous medications after the transplant. Your nurse coordinator and pharmacist will work with you to make sure you are comfortable taking all your medicines. Do not take any new medicines without checking with someone from the Transplant Team. For a list of approved over-the-counter medicines, refer to the **Medication Guide**.



Your Guide to Staying Healthy After Your Transplant

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Routine Medical Care

Routine medical care is important for early detection and treatment of disease. The transplant team is specialized in caring for the unique health needs of transplant patients; however, you should regularly see your primary care physician for regular check-ups.



Skin care:

- Your medicines can cause changes in the skin and put you at a higher risk for skin cancer.
- Use sunscreen (SPF above 30) anytime you go outside in the sun.
- Wear a hat that will shade your face and neck.
- You should see a dermatologist within the first year and then once a year afterwards. Get lesions (skin damage) checked by a physician.



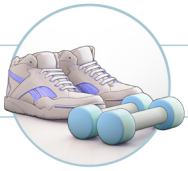
Immunizations:

- Do not get any immunizations for the first 3 months.
- Do not ever get a live virus vaccine.
- Get your flu shot every year. Do not get the inhaled flu vaccine.
- Make sure your pneumovax and tetanus shots are up to date.
- Make sure your hepatitis A and B vaccines are up to date if not done prior to transplant.



Dental Care:

- Routine Teeth cleanings are fine after 1 month. Invasive procedures (teeth pulling, crowns, root canals etc) can be done after 3 months.



Nutrition, Exercise, and Activity

In order to heal properly and stay healthy, a good diet and exercise plan is very important. You should drink at least 64 ounces of water each day. Water is the best choice. If you do not drink, then you will be dehydrated and your creatinine levels will rise. For a full list of good fluids and foods, please refer to the Nutrition Guide.

- You should walk 3 times a day. Start slowly and slowly build up.
- Do not perform twisting exercises (such as golf or tennis) for the first 3 months.
- Do not lift more than 20 pounds, until 6-8 weeks after your surgery.
- Do not garden/plant without gloves.

Do not drive for the first 3-4 weeks. You must be off of your pain medications.

You may be around pets, but do not change litter boxes or get any new birds.

EMORY HEALTHCARE

Procedures After Transplant

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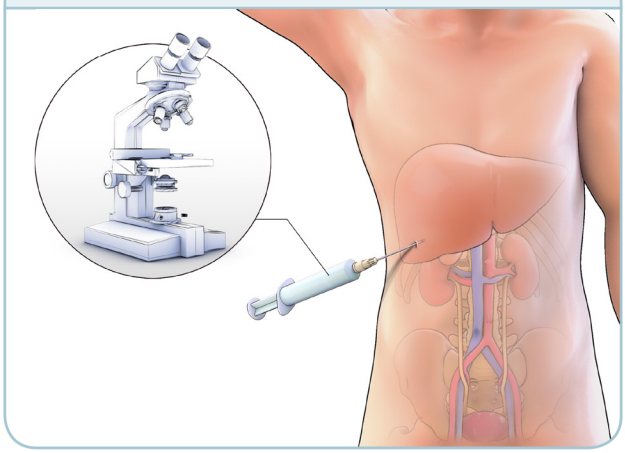
These procedures are usually only performed if there is an elevation in your liver function tests, or other labs that warrant further investigation. If you have any questions, please ask your nurse coordinator.

Liver Biopsy

Biopsies are done to tell us what the liver is doing on a cellular level. This is the only way your doctors can determine if either your liver is in rejection, or if there is some other cause for elevated liver enzymes (such as recurrence of your disease, fatty liver, or some other injury).

During a biopsy, the doctor will take a very small sample of your liver and send it to pathology to be looked at under a microscope. The biopsy will be done in Interventional Radiology in the hospital, or in the outpatient transplant clinic. You will be given either local sedation, which numbs the area that will be punctured, or IV sedation. After the biopsy, there is a 4 hour recovery period. It will take approximately 3-5 days to receive results.

Liver Biopsy



Imaging Tests

Imaging allows your healthcare team look at pictures of your liver and other surrounding organs.

Ultrasound

Ultrasound is a test that uses a hand-held device called a transducer to produce pictures of the organs and blood vessels inside your abdomen.

MRI

MRI is short for magnetic resonance imaging. It is a test that uses powerful magnets and radio waves to create pictures of the inside of the abdomen. It does not use radiation (x-rays).

ERCP

ERCP is short for endoscopic retrograde cholangio-pancreatography. This procedure looks at the bile ducts in your body to make sure that there is no infection, stone, or narrowing in them.

EUS

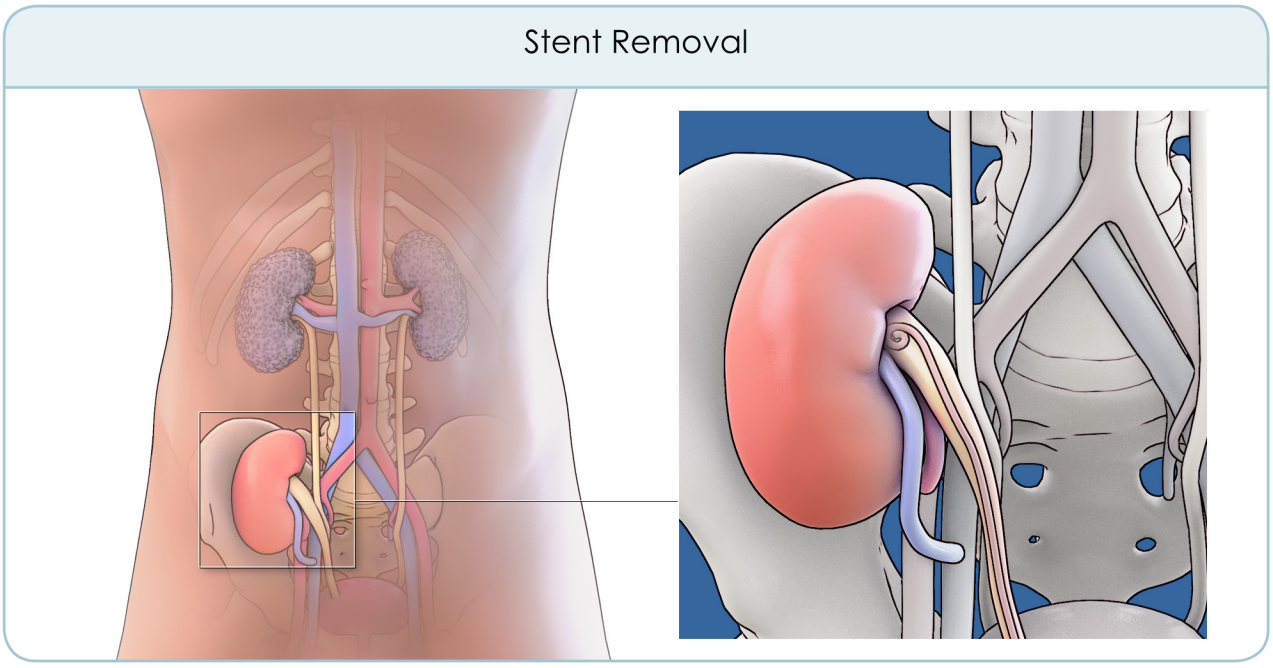
EUS is short for endoscopic ultrasound. It is a procedure that uses sound waves to obtain detailed pictures about the liver and the surrounding tissue and organs.

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Stent Removal - (Dual Liver/Kidney Transplant ONLY)

What is a ureteral stent?

Your donated kidney came with its own ureter, which is connected to your bladder. To allow this attachment site time to heal, a temporary stent was placed at this attachment site. A stent looks like a thin, hollow straw, which is curved at each end.

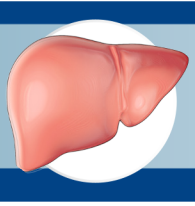


How is the stent removed?

About six weeks after your surgery, your stent will be removed by a procedure called a cystoscopy. This is a short procedure. This will be performed in the Urology Clinic by a urologist at Emory.
You will receive a letter from the department of urology with the date and time of your appointment.

Where is the Urology Clinic?

The clinic is located in the Emory Clinic Building B. You will need to go to the Endoscopy desk on the first floor.



Your Daily Records

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emoryhealthcare.org/transplant-liver
Clinic B, 6th Floor, Suite 6400

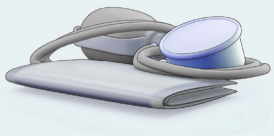
Bring these records with you when you come to the clinic.



Blood Sugar

Please contact your Transplant Coordinator if your Blood Sugar is **greater than** 250

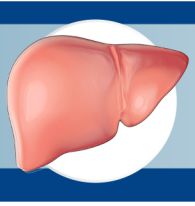
Week of: _____	Breakfast	Lunch	Dinner	Comments
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				



Blood Pressure

Please contact your Transplant Coordinator if your Blood Pressure is **higher than** 160/90 for TWO readings

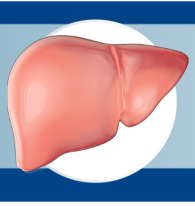
Week of: _____	Time	BP Reading	Heart Rate	Comments
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				



Your Daily Records

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Date	Weight Call if weight change is more than 3 pounds in one day.	Temperature Call if temperature more than 100°F	Blood Pressure Call if BP is more than 160/90.	Blood Sugar



Frequently Asked Questions

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Q: Do I still need a primary care doctor?
A: YES! Please keep or establish a primary care doctor for non-liver related issues.

Q: Does my hepatologist treat all my medical issues?
A: No, your hepatologist is your liver/transplant specialist. Please make sure you have a primary care provider for all other issues such has sinus infections, common colds, UTI's.



Q: I've been having back pain. Is this normal?
A: Yes, This is normal after transplant. Your back muscles are overcompensating for your weakened abdominal muscles. This will get better in time.

Q: My hair is thinning. Is this normal?
A: Yes. This is a common side effect of anti-rejections medications, specifically Prograf. You can take over the counter Biotin to help with the symptoms.

Q: Should I hold my anti-rejection meds before labs or all of my medicines?
A: The only thing you MUST HOLD is your anti-rejection meds, but you can hold all of your meds until after labs if you choose.



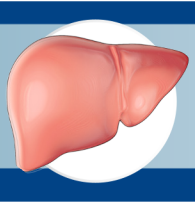
Q: What if I accidently took my Prograf before labs?
A: You still need your labs done, but let your coordinator know that your Prograf level will not be accurate.

Q: Who do I call for medication refills?
A: Please call the prescription team 855-366-7989, let the call center agent know you need the prescription team.

Q: When can I have dental work done?
A: Routine Teeth cleanings are fine after 1 month. Invasive procedures (teeth pulling, crowns, root canals etc) can be done after 3 months.

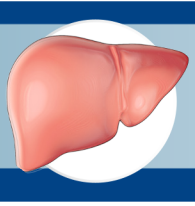


Q: Do I need antibiotics before I go to the dentist?
A: You do not need antibiotics because you're a transplant patient, however, if it's the normal practice or protocol of your dentist to administer antibiotics then it is safe for you to receive them.



Questions/Notes:

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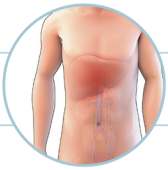


Understanding Possible Complications After Transplant

1-855-EMORYTX (366-7989)
emoryhealthcare.org/transplant-liver
Clinic B, 6th Floor, Suite 6400

People who receive a transplant may develop complications after their surgery. Your nurse coordinator and transplant team will help you understand the warning signs of possible complications, discuss your care, and recommend further treatment when necessary. This handout will list and explain the different complications.

If you have any questions, please ask your nurse coordinator.



Rejection

Rejection occurs when your immune system recognizes the transplanted liver as foreign and attacks it. **You may feel good and have no symptoms, yet still be experiencing rejection**. An increase in your liver enzymes may be warnings of rejection. Most rejection episodes can be treated successfully with medication, especially if detected early.

The only way to know whether you have rejection is through a **liver biopsy**. To learn more about a biopsy, refer to the "Procedures after Transplant" section.



Infection

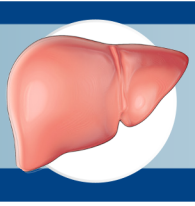
The immunosuppresant medicines you are taking decrease the risk of rejection; however, they also increase your risk of infection. The risk is highest during the first few weeks after your transplant.

Signs of infection include:

- Fever, chills, sore throat
- Nausea, vomiting, diarrhea
- Wound redness, swelling, or pus
- Pain or burning with urination

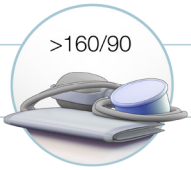
How to avoid infection:

- Wash your hands frequently
- Avoid contact with people who have infections like colds or the flu
- Clean cuts and scrapes with soap and water
- Avoid sharing utensils or drinking from the same container



Understanding Possible Complications After Transplant

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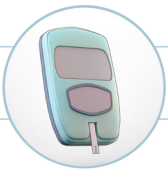


High Blood Pressure

Your blood pressure measures how much force your heart uses to pump blood to your body. Some immunosuppressants can raise blood pressure; therefore, some people must take additional medications to control their blood pressure. Notify the team if your blood pressure goes above 160/90 for two readings in a row.

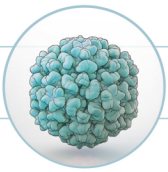
Helpful Hint

Blood pressure and diabetes can be managed and treated by healthy eating. Refer to the **Nutrition Guide** for some helpful tips!



Post-Transplant Diabetes

Diabetes is an increased level of sugar in your blood. Some immunosuppressant medications can also increase the chance of getting diabetes. Signs of diabetes include excessive thirst, frequent urination, blurred vision, drowsiness or confusion. Notify the transplant team if you notice any of these signs.



Viral Infections

There are two common types of viruses that are checked for during your blood tests. These are the *Cytomegalovirus* (CMV) and the *Polyoma BK virus*. These are common viruses that people are exposed to.

The CMV virus causes flu-like symptoms, such as fever, body aches and decreased appetite. It can also lead to more serious infections involving your stomach, lungs (pneumonia), eyes, and nervous system. The immunosuppresant medicine you take gives you a higher risk of getting infected with CMV. If you or the donor has CMV antibodies, you will get antiviral medicine after transplant.

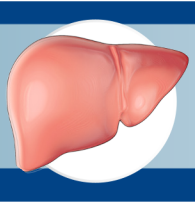
The BK virus has non-specific symptoms. Because of this, the lab tests and blood work will let your Transplant Team know if you have the virus.

Notes: _____

_____

_____

_____



Medications After Transplant

1-855-EMORYTX (366-7989)
emoryhealthcare.org/transplant-liver
Clinic B, 6th Floor, Suite 6400

One of the most important aspects of your life after transplant is the medication routine that you must follow. You must take your transplant medicine to keep your new organ healthy. You will have to take medications called immunosuppressants or anti-rejection medications. These medicines prevent your body from rejecting your transplant and are very important. You will need to take them for as long as you have your transplanted organ.



About Your Medicines

You will be given different types of medicince after your transplant. These medicines will work together to keep you and your new organ healthy. You should learn why you are taking each medication and its side effects. Refer to your medication sheet to help you learn about your medications.

You should take only the medications on your medication sheet. All other medications taken before the transplant should be set aside or disposed of.



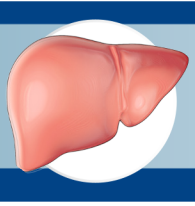
Where to Get Your Medicines

After your transplant surgery, your transplant coordinator will work with you to order your transplant medications before you are discharged home. Your transplant medications are very expensive. Their cost can be as high as $5000 per month. You may be eligible for assistance programs if you qualify.

How to refill your medicines:



- Call for refills SEVEN days prior to running out.
- You should have refills on your medication that were delivered to the hospital. Call the number on the medicine bottle and tell them you need your next month's supply. They will set up delivery to your home.
- If you want to use a local pharmacy, need to use mail order, or need a new prescription, call the medication nurses at 1-855-366-7989 .



Medications After Transplant

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Tips for Taking Your Medications

- Take your medication exactly as prescribed every day. One of the main causes of transplant failure is missing doses of medications.
- **If you do miss a dose and it is within 4 hours of the scheduled time, take the medications.** If it is more than 4 hours after the scheduled time, skip the dose and take it at the next scheduled time. Do not double dose. If you miss more than 1 dose, call your transplant coordinator for instructions.



For example, if you are supposed to take your medicine at 8 AM but forget, you have until Noon to take your medicine. If you have an afternoon appointment, you have to take your morning dose.

- Be consistent!!! Take medications at the same time and the same way each and every day.

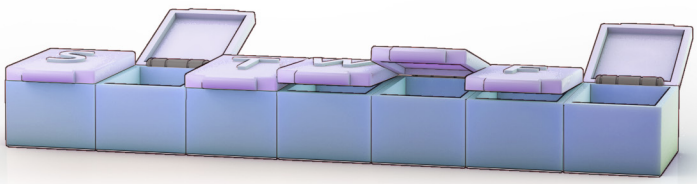


- **Do not adjust your immunosuppression medications yourself.** This could result in rejection and loss of your transplant.
- Notify the transplant team if you experience any side effects. Often we can take steps to limit any side-effects you may have.
- If you are sick or nauseated and cannot take your medications, call your transplant coordinator or physician immediately. You may need to be admitted to the hospital to receive your immunosuppression through the vein.
- Talk with the transplant team before starting or stopping any medications. Many drugs can interact and influence your immunosuppressants and your new transplanted organ.

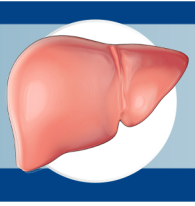


- **Do not under any circumstances take herbal or alternative medications.**
- Only take over-the counter medications listed on the over-the counter list. **Never take aspirin, Motrin, Advil, ibuprofen, Aleve, or nonsteroidal anti-inflammatory drugs (NSAIDs) unless approved by your transplant physician.**
- Bring a list of medications with current dose and frequency each time you see a health care professional.
- Talk to the transplant team before you receive any immunizations/vaccinations.

- Store your medications in a safe and dry place away from heat and light. Avoid storing medications in bathrooms and above sinks since moisture can harm medications. Keep medications out of reach of children.



EMORY HEALTHCARE



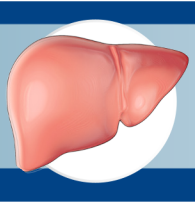
Over the Counter (OTC) Medicines After Transplant

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emoryhealthcare.org/transplant-liver
Clinic B, 6th Floor, Suite 6400

The following OTC medications have been approved by the transplant teams for use except where specified. Follow directions from the transplant team and read the label carefully. Avoid combination products when possible. Generic medications may be used; brand names are provided as a reference only and are not meant to be product/brand endorsement. Call your post-transplant coordinator first if you have any questions.

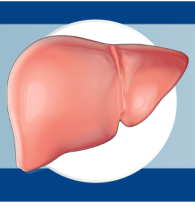
Indication	Brand Name	Generic Name	Precautions
Anti-histamine/ allergy	Coricidan, Chlor-Trimeton Benadryl Claritin Zyrtec	Chlorpheneramine Diphenhydramine Loratadine Cetirizine	*Drowsiness*
Expectorant	Robitussin, Mucinex	Guaifenesin	
Cough suppressant	Delsym, Robitussin cough	Dextromethorphan	*Irritablity*
Nasal congestion	Afrin Nasal Spray	Oxymetazoline	*Limit use to 3 days; nasal irritation, rebound congestion, high blood pressure*
Fever/pain/headache	Tylenol	Acetaminophen	*No more than 2000mg in 24 hrs*
Sore throat	Cepacol lozenges	Benzocaine/menthol	*Mouth irritation*
Diarrhea	Call your coordinator	Call your coordinator	*Call your coordinator*
Constipation	Colace	Docusate sodium	*Stool softener*
	Dulcolax Senokot Fibercon Miralax	Bisacodyl Sennosides Polycarbophil Polyethylene glycol 3350	*Laxative; diarrhea*
Gas	Gas-X	Simethicone	
Indigestion/ heart burn	Pepcid Zantac Mylanta, Maalox Tums Gaviscon	Famotidine Ranititidine Aluminum/magnesium hydroxide Calcium carbonate Aluminum hydroxide/ magnesium carbonate	*Contact medical team if symptoms require regular use more than 2 weeks* *Use with caution if renal failure; Space at least 1 hour apart from mycophenolate (CellCept)*
Hemorrhoids	Anusol, Tucks Anusol, HC Cream Preparation H	Pramoxine Hydrocortisone cream Mineral oil, petrolatum, phenylephrine, and shark liver oil	*Burning, stinging, irritation*

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Questions/Notes:

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emoryhealthcare.org/transplant-liver
Clinic B, 6th Floor, Suite 6400

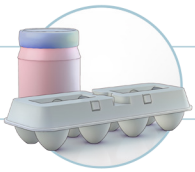


Understanding Your Nutrition After Transplant

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After your transplant, it is important to have healthy eating habits and a regular exercise program. The transplant diet will help you manage or prevent side effects of your new medicine. Following these tips will also help you heal properly from surgery and promote long-term health.

Your diet plan will depend on factors such as your blood pressure, weight, blood sugar and blood fats level as well as other conditions you may have. Your dietitian will help you with any questions you have about your diet. The following sections cover different diet instructions that you may need to follow as part of your nutrition regimen. Your dietitian will be able to instruct you on which of these instructions you need to follow as well as answer any questions you may have about your diet.



Protein

It is important for you to eat an adequate amount of high quality protein every day. Your protein needs depend on your height & weight as well as other factors such as your nutrition status.

During the **first month after transplant**, you need to pay special attention to eating a high protein diet to prevent muscle break-down and to provide the building blocks to help you heal from surgery.

In the **long term**, you'll need to reduce your protein intake to a more moderate amount to maintain health and wellness.

Recommended protein sources

- Lean meat/poultry/fish
- Low fat & fat-free dairy products
- Nuts & nut butters
- Cooked dried beans



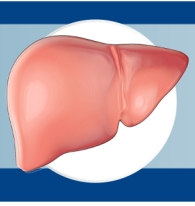
Fluids

You need to drink plenty of fluids after your transplant to **prevent dehydration**. For most people, this means drinking at least eight 8 oz. glasses per day. Your Emory cup holds 4 cups of fluid. (1 measuring cup= 8 oz.)



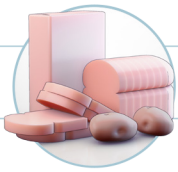
Water is the best choice. Other good fluid choices are:

- Non-fat or 1% milk
- Sodium-free seltzer water; flavored or plain
- Sugar-free lemonade, iced tea lemonade/iced tea/fruit flavored drinks
- Apple/ cranberry/grape juices in moderation
- Mostly decaffeinated coffee or tea



Understanding Your Nutrition After Transplant

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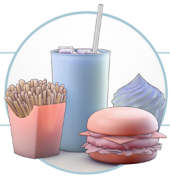
Carbohydrates (sugar and starches)

A side effect of some of your medicine is an increase in blood sugar levels, or even diabetes. If your blood sugar level is elevated, it is important to limit your sugar intake and monitor your overall carbohydrate intake. Choose mostly whole grain products and other high fiber foods. If you already have diabetes, please refer to the diabetic diet guidelines.



Sodium

Your medicine can cause swelling and cause you to have high blood pressure. The American Heart Association 2013 "guidelines to manage high blood pressure" advises that sodium intake should be limited to no more than 2,400 mg per day. Choose mostly foods that are fresh, seasoned with little or no salty seasonings or if packaged, are low in sodium.



Fats and Cholesterol

Following a diet low in fat and cholesterol is important because it can help lower your risk of heart disease. It can also help you maintain your weight in a healthy range after your transplant. When eating out, look for the "American Heart Association Diet and Lifestyle Recommendations" logo on menus. This certifies that the meal contains less than 800 Mg Sodium and less than 26 Gm fat.

American Heart Association CERTIFIED Meets Criteria For Heart-Healthy Food

Phosphorus

Some people experience loss of phosphorus for a period of time after transplant. You may need to follow a high phosphorus diet.

Good sources includes: high protein foods (meat/ chicken/fish), dairy products, nuts, dried beans and whole grain products.

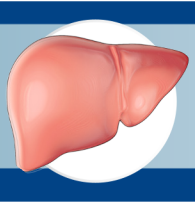
Potassium

Some people experience high potassium levels after transplant due to some of the medications. You may need to follow a low potassium diet. You may need to limit certain fruits and vegetables.

Calcium

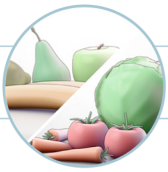
Your steroid medication can lead to bone loss over time. You need to choose high calcium foods every day; otherwise your doctor may recommend a supplement. Practicing weight bearing exercises a few times a week can also help you maintain your bone density in order to reduce your risk of fractures.

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Understanding Your Nutrition After Transplant

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Food Safety

After transplant, your medications suppress your immune system; this means you have an increased risk of infection, including food-borne illnesses. Since poor food handling causes most food-borne illnesses, you need to follow food safety guidelines at home, when shopping for food and while eating out.





General tips:

- Maintain a clean kitchen and cooking equipment
- Wash produce before eating; do not eat foods that are near or already "expired"
- Stay away from products with damaged packaging
- Meat and fish should be well-done/ leftovers heated thoroughly
- Stay away from raw fish/shellfish/sushi/osyters as well as salad bars and buffets



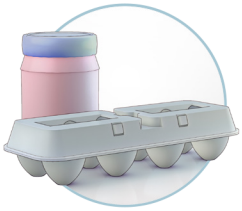
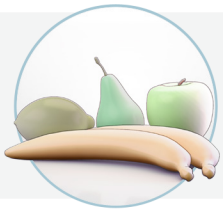
Helpful Resources

American Heart Association	www.heart.org
Healthy Diet	www.choosemyplate.gov
Food Safety	www.fightbac.org www.foodsafety.gov
For Patients with Kidney and Liver Transplant:	
American Association of Kidney Patients	www.AAKP.org
National Kidney Foundation	www.kidney.org
National Kidney Disease Education Program	www.nkdep.nih.gov

Understanding Your Nutrition After Transplant

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Your Guide for Heart-Healthy Eating

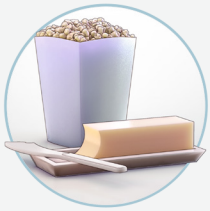
	Foods to Choose	Foods to Limit
Milk (3 cups/ day) 	Skim, 1% milk Evaporated or powdered skim milk Low-fat or fat-free yogurt Chocolate milk with less than 1% fat Low-sodium buttermilk Fat-free cream or fat-free half and half Low-fat almond, cashew, or soy milk	Whole or 2% milk and buttermilk Eggnog, malted milk Milkshakes Whole, chocolate or evaporated milk Sweetened, condensed milk Sour cream
Protein (4-6 oz/day) 	Lean, fresh or frozen meats Low sodium canned fish in water Natural peanut butter (no salt added) Low-fat or fat-free cheese Egg whites or egg substitutes Tofu, dried beans and peas Frozen dinner with less than 30% of calories from fat and 600mg sodium per serving	Fatty, cured, salted meats Regular canned tuna or salmon Fried or breaded meats Regular peanut butter or cheese More than 3 egg yolks/week Processed, convenience food Deli meats Fried or breaded meats
Fruits (2 or more servings/ day) 	All fruits and fruit juices Calcium fortified orange juice	Fried fruits Fruit pie If diabetic, avoids syrups
Vegetables (3 or more servings/ day) 	Fresh vegetables without salt Low sodium frozen or canned vegetables Low sodium tomato or vegetable juice	Vegetables with salt, bacon, or cream Fried or regular, canned vegetables Frozen vegetables in sauce Sauerkraut Pickles or vegetables in brine
Carbohydrates (6 or more servings/day) 	High fiber and whole grain products Pasta, rice, and potatoes Homemade cooked cereals Dried beans and peas Unsalted crackers, Melba toast Dry cereals Low sodium instant cooked cereals Calcium fortified products	Pasta/rice with butter, cream or fats Croissants and biscuits Sweet rolls, danish, donuts Quick breads Instant mixes or cooked cereals Salted crackers, pretzels, popcorn Self rising flour, regular baking soda

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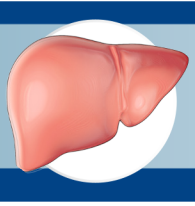
Understanding Your Nutrition After Transplant

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Your Guide for Heart-Healthy Eating

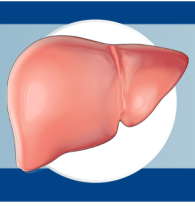
	Foods to Choose	Foods to Limit
Fat (3-6 tsp/day) 	Margarine (no hydrogenated oils) Butter blended with canola/olive oil Low-sodium, low-fat salad dressing, mayonnaise, sour cream, gravy Unsalted nuts or seeds Vegetable oils (no palm or coconut oil)	Salted stick margarine or butter Regular salad dressing, sour cream, gravy Bacon fat, salt pork, lard Snack dips with cheese or buttermilk Salted nuts or seeds Chitterlings, olives
Sugar (limit if you have diabetes) 	Sugar, honey Pure maple syrup Jams or jellies Sugar substitutes	Blackstrap molasses Commercial pancake syrup Light and dark corn syrup
Snacks/Desserts (limit if you have diabetes) 	Fruit ice, sorbet, sherbet, flavored gelatin Fat-free frozen yogurt, pudding, ice cream Homemade bakery items with low-sodium and low-fat ingredients Jellybeans, marshmallows, hard candies Snack foods without hydrogenated oils	Desserts made with salt, baking powder baking soda and self-rising flour Desserts made with whole milk Instant pudding, gourmet frozen yogurt Commercial cake mixes Packaged peanut butter, snack foods with hydrogenated oils Coconut
Soups 	Low-sodium bouillon or broth Low-sodium, low-fat commercial soups Homemade soup with minimal salt and fat	Regular bouillon or broth Regular commercial soup Reduced sodium or creamed soups Instant soup mixes
Beverage 	Most beverages including water, juice, tea, or coffee	Commercially softened water Sport drinks No alcoholic beverages

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Your Support and Resources After Transplant

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Clinic B, 6th Floor, Suite 6400

Following your transplant, your life will be significantly different. The impact of the changes can sometimes be overwhelming. This guide will discuss some of these transitions and provide resources for any questions you may have.

Your Emory social worker is available to assist you in understanding these changes. They can guide you to hospital and community resources that will provide you with financial and emotional support.



Financial Support

Some patients experience financial hardship following transplant. There are immediate costs, but also long-term costs involved in order to ensure your transplant journey is a successful one. Since your financial situation may change with time, it is important to plan ahead and let your transplant team know if any concerns arise.

Ask your social worker if you have any concerns regarding your financial situation. Some examples of areas they can assist you with are listed below.

Things to Discuss:

How am I going to pay for my medicine?

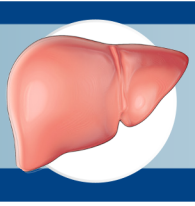
My health insurance has changed or is ending. What should I do? I can't pay my insurance premium payment and I need assistance.

My Medicare benefits are about to change. What can I do to help cover my expenses?

I need help finding a job. Are there resources for career training or education?

Are there community resources that may provide me with financial support?

Notes: _____



Your Support and Resources After Transplant

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Emotional Support

The transplant journey can be stressful at times. While you may resume your normal lifestyle, there could be some challenges. It might be difficult for you and your loved ones to cope with the changes at times.

Your social worker can help you navigate through this process. They will provide you with supportive counseling and direct you to additional resources if needed. Some examples of areas they can assist you with are listed below.

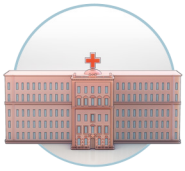
Things to Discuss:

My caregivers and I need emotional support on how to cope and deal with life after transplant.

I feel depressed and anxious. Are there resources to address my emotional health?

Will I be able to connect with other transplant patients to receive support?

Hospital Resources

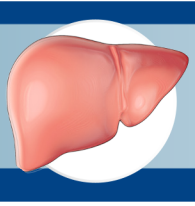


Talk with your team and ask for help. Here are some of the available resources:

. Transplant social worker
. Transplant psychologist
. Mental health social worker
. Hospital chaplain

Helpful Resources

Georgia Transplant Foundation	www.gatransplant.org
Medication Access Program	www.mapuga.com
Needy Meds	www.needymeds.com
Mason Guest House	www.emoryhealthcare.org
Metro Atlanta United Way	211online.unitedwayatlanta.org



Your Support and Resources After Transplant

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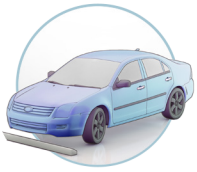
Recovery Support

Following your transplant, you will **need to have a committed support system in place to assist you**. We encourage you to have conversations with trusted and reliable members of your support system to discuss the specific ways they need to be available for you. Your support team might include family members and friends.

If you are concerned about your current plan for post-transplant support, then consider how you might reach out to others who are members of groups you might be involved with. Examples of these groups include your religious institutions, sororities, fraternities, co-workers or neighbors.

You will not be able to drive for the first 3-4 weeks after transplant. You will need to have someone available to transport you to and from your appointments, so have a backup person as well! It is important to attend all of your appointments.

Parking



You will be required to cover the cost of your own parking. At this time, the valet costs $8 and the parking decks can vary from $5-$12.

An alternative option might be to ride the Emory CLIFF shuttles. Check the Emory transportation website for schedules.

Lodging



There are several lodging options nearby. If you choose to reside at the Mason Guest Lodge, you must have someone stay with you.

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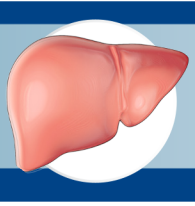
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Writing Your Donor Family

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Writing your donor family is an important part of the transplant process. However, it is a personal decision—to be made in your own time and space. It is never too late—or too early—to write your donor family and thank them for making your transplant possible.



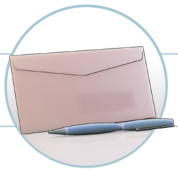
Steps to Write Your Donor Family

Have you ever wondered how you could thank the family who made your transplant possible?

- Please address your card or letter to "Donor Family"
- Identify yourself only by the organ(s) that you received. For example: heart recipient, kidney recipient, kidney-pancreas recipient, etc.
- On a separate piece of paper, write your full name and the date of your transplant so that we can make sure it goes to the correct donor family. (This will not be sent with your letter).
- Please sign with your first name only. Do not give your address, city, phone number or the name of the transplant center or your doctor.
- Remember, if writing your thoughts or feelings is too difficult, a simple Sympathy or Thank You card would also mean a great deal to the donor family.

- Mail your letter or card to:

LifeLink of Georgia
ATTN: Letter of Thanks
2875 Northwoods Parkway
Norcross, Georgia 30071



Information You May Want to Include in Your Letter

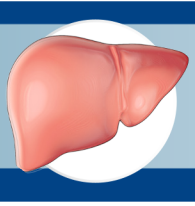
Talk about yourself:

- Your job or occupation
- Your family (spouse, children, grandchildren)
- Your hobbies or interests
- Since the faith beliefs for your donor's family are not known, please consider this when making religious comments

Talk about your Transplant Experience:

- Use simple language
- Recognize the donor family and thank them for their gift
- Describe how long you waited for the transplant and what this was like for you and your family
- Explain how the transplant has improved or changed your health and your life

- For more information and sample letters please visit: www.LifeLinkFoundation.org/SayThankYou



Patient Portal

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If you have been hospitalized at Emory Healthcare, use our Patient Portal to:

- View portions of your hospital record, such as laboratory results, medications and immunizations
- View your hospital departure summaries

If you see an outpatient provider at the Emory Clinic, use our Patient Portal to:

- View portions of your Emory medical record, such as laboratory results, medications and immunizations
- View outpatient summaries from your Emory Clinic office visit
- Send and receive secure, non-urgent messages to and from your outpatient Emory Clinic provider's office
- Request a prescription renewal from your outpatient Emory Clinic provider's office

Getting Started with the Portal

1. When you check in at one of our Emory Clinic office locations and/or Emory hospitals, the email address you provide to our team will be used to automatically send you an email invitation to the Patient Portal to create your account.

2. Once you receive an email invitation, access the link in the instructions and follow the steps included on the destination page to activate your account.

3. If you have not received an invitation to the Patient Portal during a visit to one of our Emory Healthcare locations, but would like to enroll, please either call our team at 404-727-8820, or visit emoryhealthcare.org/patient portal to complete our online request form.

Please note that the Emory Healthcare Patient Portal is supported by Cerner Health (IQHealth). You will receive notification emails from IQHealth regarding Patient Portal messages from Emory Healthcare (noreply@iqhcalth.com). These notifications will alert you when you have new messages on the Patient Portal, but to protect your privacy they will not include the content. You will need to log into the Patient Portal to read the messages. Please make sure your email program is set to accept messages from this email address.



Do you have questions about the Emory Healthcare Patient Portal? If so, please contact our team at 404-727-8820 or visit emoryhealthcare.org/patient portal to view answers to some of our Frequently Asked Questions.

If you have trouble logging in or accessing the Emory Healthcare Patient Portal, please contact the 24/7 Cerner Health Consumer Support toll free number at 1-877-621-8014.

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Additional Information

1-855-EMORYTX (366-7989)
emoryhealthcare.org/transplant-liver
Clinic B, 6th Floor, Suite 6400

Satellite Locations

The Emory Transplant Center has expanded in order to better serve our patients throughout Georgia. Patients can now receive transplant evaluations and post-transplant follow-up care from Emory professionals without making a trip to Atlanta.

☐ Emory Transplant Center - St. Joseph's

5673 Peachtree Dunwoody Rd
Suite 350
Atlanta, GA 30342

☐ EmoryTransplant Center - Savannah

5534 Reynolds Street
Suite 212
Savannah, GA 31405

For questions about our satellite clinics or to schedule your next appointment at a location more convenient to you, call 1-855-EMORYTX (366-7989) or speak with your transplant coordinator.

Medical Alert Bracelet

Pick up a medical alert bracelet either online or from your local drugstore or pharmacy.



EMORY HEALTHCARE

Your Lab Tests

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Lab Collection (PHS Increased Risk Donor Only)

You are receiving this notification because you consented to receiving an organ from a deceased donor that is considered to have an increased risk for transmitting certain infections according to Public Health Service guidelines.

Your physicians believed that the benefits of receiving this organ outweighed the risk of disease transmission.

Donors are considered "increased risk" because of certain behavioral factors that place them at a higher than average risk for recently acquiring certain infections such as Hepatitis C, Hepatitis B, or HIV.



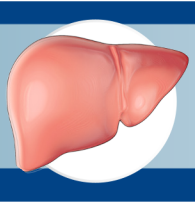
Your Lab Tests: First 12 Months

Emory Transplant Center requires that you obtain the following lab tests at the following times:

Hepatitis C Quantification
HIV antibody
Hepatitis B Quantification.

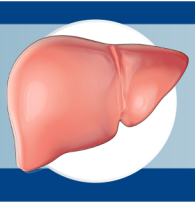


If you have any questions please contact your transplant coordinator.



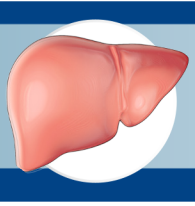
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