

# **Division of Cellular Therapy**

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# ABMT-GEN-020 CRITERIA FOR RE-TRANSPLANTATION

### 1 PURPOSE

1.1 To describe the criteria for patient selection for second or subsequent HSCT.

### 2 INTRODUCTION

2.1 Some patients will fail to respond to HSCT because of primary or secondary graft failure, severe graft dysfunction, autologous reconstitution or relapse of their primary disease. In some of these cases, when the patient's situation is lifethreatening, a subsequent transplant is indicated.

### 3 SCOPE AND RESPONSIBILITES

3.1 Physicians, nurses, advanced practice nurses

#### 4 DEFINITION/ACRONYMS

- 4.1 HSCT-Hematopoietic stem cell transplant
- 4.2 TBI-Total body irradiation

#### 5 MATERIALS

1.1. See specific drug administration sheets

### 6 EQUIPMENT

6.1 NA

#### 7 SAFETY

7.1 NA

#### 8 PROCEDURE

- 8.1 The selection criteria for second or subsequent HSCT include:
  - 8.1.1 Documentation of graft failure from prior transplant without autologous recovery.
  - 8.1.2 Relapse of malignancy after prior transplant with a reasonable expectation that a subsequent transplant provides a chance of long term relapse free survival.
    - 8.1.2.1 An example of this would be a patient relapsing after a chemotherapy-based or reduced intensity transplant who could be re-transplanted using a TBI-based prep regimen.
    - 8.1.2.2 A second example would be a patient experiencing a late relapse (>1 year) after a matched sibling transplant who could be re-transplanted using an unrelated donor.
  - 8.1.3 Primary or secondary graft failure with marrow aplasia.

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- 8.1.4 Adequate organ function to withstand planned cytoreduction. The patient may go through a complete transplant work-up including reevaluation of disease status, infectious disease status, organ function, "donor" screening, infectious disease screening and would need be deemed able to withstand the anticipated toxicity of planned therapy.
- 8.1.5 Control of active infections.
- 8.1.6 Availability of a suitable donor.
- 8.1.7 Availability of a full time care taker.
- 8.1.8 Patient consent

# 9 RELATED DOCMENTS/FORMS

Patient specific consents are composed for second transplants.

### 10 REFERENCES

10.1 See materials attached to specific drug information utilized in the preparative regimen selected for the patient.

### 11 REVISION HISTORY

Revision No. Author		Description of Change(s)	
03 J. Loftis	Added Section 11 Revision History. Updated responsibilities and added scope.		

# Signature Manifest

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