



Dear colleagues

According to the actual situation in the context of the COVID-19 pandemic we come up with a stepwise scheme to shut down in a structured manner and according to clear priorities living and deceased donation programs in Switzerland.

We set up a stepwise flag light system giving clear priorities how the transplantation programs should be shut down if unavoidable, aiming to save – as long as possible – potential recipients with a high probability of dying and/or in urgent status on the National waiting list.

We are in a close exchange with the Federal Office of Public Health, who is actually evaluating these steps in the context of the transplantation law. Together we try to come up with modalities and models in each step.

It is important to underline that the ICU experts still consider and announce potential deceased donors to Swisstransplant as usual. In this context, I would like to thank the ICU colleagues for all the efforts and the donor announced in the last few days.

Living and deceased donation

First step:	Stop all elective living donation programs - Start 17 th March 2020 until further notice up to 3 rd of May 2020
Second step:	Stop all deceased pancreas and/or islet transplantations
Third step:	Stop all deceased donor kidney transplantations
Fourth step:	Selected and tailored approach in vital organs and urgent status
Fifth step:	Only urgent transplantations in vital organs (liver, lungs and hearts)
Sixth step:	Stop transplantation from deceased donors

Foreign offers

First step:	Stop all cross-border elective living donation programs - Start 17 th March 2020 until further notice up to 3 rd of May 2020
Second step:	Stop import of pancreas/islets and small-bowel
Third step:	Stop import of kidneys
Fourth step:	Selected import of vital organs according to situation on waiting list
Fifth step:	Selected import of vital organs for patients in urgent status
Sixth step:	Stop import of foreign organs

In parallel Foreign offers should be evaluated very carefully according to the measurements in place in the country of the donor and should actually be limited to COVID-19 neg. PCR and vital organs only.

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