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## Kidney Transplant Services Inspection Checklist- Final

Name of the Facility:

Ref.	Description	Yes	No	N/A	Remarks		
5	STANDARD ONE: REGISTRATION AND LICENSURE PROCEDURES						
5.3.	Accreditation						
	The hospital shall be accredited as per the DHA						
5.3.1.	Hospital accreditation policy, before the						
	commencement of the kidney transplant service.						
	The hospital laboratory must be accredited as per						
5.3.2.	the DHA Clinical Laboratory accreditation policy,						
J.J.Z.	before the commencement of kidney transplant						
	service.						
	The hospital shall have Standard Operating						
5.4.	Procedures (SOPs) related to the Kidney						
5.4.	Transplant Service. The relevant staff shall be						
	trained to abide by these SOPs.						
5.5.	The health facility should develop the following						
5.5.	policies and procedure; but not limited to:						
5.5.1.	Patient acceptance criteria						
5.5.2.	Recipient selection criteria						
5.5.3.	Patient assessment and admission						
,	ABO Compatibility verification and documentation						
5.5.4.	for Organ Transplantation						
5.5.5.	Pre-Transplant work up process						
5.5.6.	Post-Transplant follow up protocol						
5.5.7.	Patient education and informed consent						

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5.5.8.	Patient health record			
5.5.9.	Infection control measures and hazardous waste			
5.5.9.	management			
5.5.10.	Incident reporting			
5.5.11.	Patient privacy			
5.5.12.	Medication management			
5.5.13.	Emergency action plan			
5.5.14.	Patient discharge/transfer			
	The health facility shall maintain charter of			
F 7	patients' rights and responsibilities posted at the			
5.7.	entrance of the premise in two languages (Arabic			
	and English).			
	The health facility shall have in place a written plan			
5.8.	for monitoring equipment for electrical and			
5.0.	mechanical safety, with monthly visual inspections			
	for apparent defects			
6	STANDARD TWO: HEALTH FACILITY REQUIREM	NTS		
6.1.	Kidney transplant services shall only be performed			
0.11	in DHA licensed Hospitals.			
	The hospital shall have an Organ Transplant Unit			
6.2.	(OTU) to ensure an integrated and seamless organ			
D.Z.				
0.2.	transplant services, including the kidney transplant			
0.2.	transplant services, including the kidney transplant service.			
6.4.				
	service.			
6.4. 6.4.1.	service. The hospitals shall provide the following:			
6.4.	service. The hospitals shall provide the following: Minimum of two Operating Theatres (OTs).			
6.4. 6.4.1. 6.4.2.	service.The hospitals shall provide the following:Minimum of two Operating Theatres (OTs).Minimum of two (2) positive pressure rooms for			
6.4. 6.4.1.	service.The hospitals shall provide the following:Minimum of two Operating Theatres (OTs).Minimum of two (2) positive pressure rooms for the management of posttransplant patients.			
6.4. 6.4.1. 6.4.2. 6.5.	service.The hospitals shall provide the following:Minimum of two Operating Theatres (OTs).Minimum of two (2) positive pressure rooms for the management of posttransplant patients.The hospital shall ensure easy access to the health			
6.4. 6.4.1. 6.4.2.	service.The hospitals shall provide the following:Minimum of two Operating Theatres (OTs).Minimum of two (2) positive pressure rooms for the management of posttransplant patients.The hospital shall ensure easy access to the health facility and treatment areas for all patient groups.			

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7.6.	The responsibilities of the Kidney Transplant Committee are as follows:						
7.6.8.	Create a process of transplant wait-listing that is efficient, effective and transparent.						
8	STANDARD FOUR: CONSENT FOR ORGAN TRANSPLANT						
8.2.	Kidney Transplant Surgery Consent shall include the following:						
8.2.1.	Potential psychosocial risks post-transplant						
8.2.2.	Transplant centre's observed and expected one- year survival rate						
8.2.3.	Prospective transplant candidate of alternative treatments.						
8.2.4.	Organ donor risk factors that could affect the success of the graft or the candidate's health as a recipient.						
8.3.	Consent for living kidney donation shall include the following:						
8.3.1.	Potential psychosocial risks of donation.						
8.3.2.	Alternative treatments for the transplant candidate						
8.3.3.	Donors have the right to opt out of donation at any time during the donation process.						

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