

Posting Date: 2020-04-23

Posting History Dates:

Next Review Date: 2021-04-23

Title: SCBMT – HHS COVID-19 Testing for HCT Recommendations during the COVID-19 Pandemic

Applies to: All allogeneic and Autologous Hematopoietic Cell Transplantation (HCT) and CAR-T Cell procedures

1.0 Purpose

1.1 This guideline document outlines the current recommendations for managing both donors and recipients during the COVID-19 Pandemic

2.0 Policy

2.1 General Statements

2.1.1 At this time, COVID-19 positive DONORS cannot be considered for apheresis. Firstly, we do not have a process in place that would allow us to do so while maintaining the necessary safety for staff and other patients, and secondly, transplants from COVID-19 positive DONORS cannot be considered safe given the (theoretical) risk of transmission. Furthermore, COVID-19 infected DONORS are supposed to be self-isolating and not leave their home. Although COVID-19 positive individuals are allowed to leave their home for necessary medical appointments, serving as a DONOR is not considered a necessary appointment, and interactions with other individuals including health care workers should be minimized.

Early testing allows the possibility of finding an alternate donor, while testing immediately prior to donation provides the greatest assurance of negativity. For these reasons, we are testing DONORS 21-30 days and 72 hours prior to apheresis.

2.1.2 COVID-19 infected RECIPIENTS are at greater risk of serious COVID-19 related complications due to their imminent immunosuppression. Currently followed pre-COVID-19 guidelines² for pre-transplant viral infections recommend postponing transplants. Early testing avoids extensive pre-transplant investigations and sign-off procedures, and the stress of last minute cancellations on donors, coordinators, CBS and distant donor centres. Early testing may also allow another patient to receive a timely transplant.

¹ Tomblyn M et al. BBMT 2009;15:1143

2.2 Recommended Testing Schedule (assume grafts are cryopreserved).

2.2.1	DONORS	21-30 days prior to donation	2-3 days prior to donation. (For fresh donations 2-3 days prior to conditioning of recipient.)
	RECIPIENTS	21-30 days prior to conditioning	2-3 days prior to conditioning

2.2.2 Testing is a Nasopharyngeal swab (NPS) specifically for COVID-19 (lab mnemonic COVID19)

3.0 Actions following positive COVID-19 tests

3.1 Donors

- Cancel donation
- Consider alternate donor
- Donor to follow self-isolation as per Public Health recommendations
- Defer donation until at least 14 days after recovery (asymptomatic plus two negative swabs as recommended)

3.2 Recipients

- Defer transplantation for 28 days then repeat testing schedule
- For urgent cases, postpone transplantation until at least 14 days after recovery (asymptomatic plus two negative swabs as recommended)

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- Consult Malignant Infectious Disease Service
- for direction

4.0 Other

Note, existing guidelines not covered here include management of donors and recipients answering positive to questions relating to contact and travel that are incorporated into the regulated questionnaires.

5.0 Duration of Guidelines

This guideline is valid until the threat of COVID-19 ceases or until there are changes in testing practices and technologies, whichever comes first.

6.0 Summary of Testing¹ Recommendations from Various Organizations

SOURCE	DATE	RECIPIENTS	DONORS @ assessment	DONORS @ donation
EBMT	April 7	Pre-conditioning and admission (one test)	---	Prior to mobilization
BSBMTCT	Mar 27	≥ 72 hrs pre-conditioning	Yes	Yes
	April 1	≥ 72 hrs pre-conditioning	Yes	Yes
Anthony Nolan Registry	N/A	N/A	Yes	Yes (Fresh donors – pre-conditioning)
ASTCT	Mar 9	At assessment and 2 days pre-conditioning*	---	---
CTTC	April 3	Yes**	Yes***	Yes***

* "If prevalence of COVID-19 is thought to be high in the community"

** "In areas with high prevalence of SARS-CoV-2"

*** "Depending on the availability of testing resources and prevalence of the disease"

In Ontario, donor testing is active at UHN, LHSC; recipient testing at UHN, LHSC, OH

¹ Current testing is PCR on nasopharyngeal swabs

7.0 Developed By

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8.0 In Consultation With

COVID-19 Subject Matter Expert Group
Infection Prevention and Control

19.0 Approved By

HHS COVID-19 Corporate Command Centre
MAC

Keyword Assignment

COVID-19, covid, coronavirus, BMT, bone marrow

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