

BRADLEY OGLINE

INTESTINAL TRANSPLANT AT UPMC



In 2017, Bradley Oglie, now a certified nurse anesthetist at UPMC, was a typical, healthy 26-year-old enrolled in graduate nursing school. But Bradley's life changed when one morning, she suddenly began to vomit. Soon after, the vomiting turned into blood, followed by severe abdominal pain, bloody diarrhea, and growing disorientation. Recognizing the severity of her symptoms, she called 911.

At the hospital, imaging showed blood clots blocking blood flow to her small intestine. Later that day, Bradley was taken to the operating room for emergency surgery.

During the procedure, surgeons removed most of her small intestine, leaving 10 centimeters intact. To confirm their next steps, the surgical team contacted the director of the Gastrointestinal Rehabilitation and Transplant Program at UPMC, Ruy Cruz, MD. Dr. Cruz instructed the team to arrange for Bradley's transfer to UPMC Montefiore for specialized care and additional surgery.

The weeks following surgery were physically and emotionally challenging. Once fiercely independent, Bradley now needed assistance with basic tasks. Despite her vulnerability, her support system remained strong, including her boyfriend, who visited frequently.

Bradley's Path to Intestinal Transplant

Over the next six months, Bradley's main goal was to focus on physical recovery and intestinal rest, during which time she was completely dependent on total parenteral nutrition (TPN), a method of providing nutrition to someone with digestive system complications. After six months of recovery, her care team would work on getting her onto the intestinal transplant waiting list.

Once she was discharged from the hospital, Bradley began to adjust to life while dependent on TPN, but her goal was to get back to school as soon as she could. Adjusting to life came with challenges, like showering with a catheter line in her upper arm and learning to use the TPN pump. With help from her transplant coordinator and family, she resumed her studies remotely six weeks after her surgery, and not long after, returned to clinical rotations.

Over the next few months, Bradley settled into a routine of labs, classes, clinicals, appointments, and nightly TPN infusions. Planning became essential. Even attending a nearby conference required coordination of lab draws, TPN delivery, hotel refrigeration, and transplant team notification. This loss of independence became a key motivator in her decision to pursue intestinal transplant.

Roughly nine months into TPN, she developed her first catheter-related bloodstream infection, followed by a fungal infection a month later.

"It was so disappointing. These sorts of things are inevitable, but I felt like a bad patient, and I was studying to be a nurse, so I felt like a bad nurse too."

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AFTER MY TRANSPLANT, I FELT GREAT.

— Bradley Ogline

These setbacks left her frustrated and eager to move forward with transplant. Ten months after her initial surgery, Bradley completed the final steps in the transplant evaluation process and was placed on the waiting list. Just two months later, she was notified that an organ was available. Unfortunately, testing showed that the organ was unsuitable for Bradley.

Between that first call and her eventual transplant, she experienced several major life milestones. She became engaged, graduated from nursing school, and began working. On her second day of work, she received a call letting her know a donor organ had become available, but she declined due to concerns about donor risk factors previously discussed with her care team.

On June 11, 2019, she received another call. This time, the organ was viable. Accompanied by her family, she underwent a successful intestinal transplant surgery at UPMC Montefiore.

Bradley's Life after Transplant

"After my transplant surgery, I felt great," remembers Bradley. "I wasn't in any pain and was up and walking that same day. I thought I would be in much more pain and wouldn't be able to do anything. I felt so relieved."

Bradley began the long process of adjusting to post-transplant life. She had to learn how to manage her immunosuppressive medications, monitor for signs of organ rejection, and learn to navigate the new medical, emotional, and physical aspects of her new life.

She remained hospitalized for three weeks, during which time she underwent frequent testing to monitor her new organ. Eventually, she began eating again. Three months after her transplant surgery, she no longer needed TPN. The day her catheter was removed, she celebrated with something she hadn't done freely in over a year: a long, catheter-free shower.

Several months later, she returned to work, and at seven months post-transplant, her ileostomy was reversed. She had no signs of rejection, and her quality of life was what she had been hoping for; she was working at a job she loved, she was getting married, and she could go to dinner with her friends.

A year after her transplant, she married her husband, Bret. His patience and support throughout her illness had been constant. Today, she works full-time without restrictions. Her post-transplant life involves a schedule of monthly medical appointments, annual screenings, and dietary restrictions; she can't eat raw or high-risk foods, and no grapefruit or pomegranate due to her antirejection medications.

"Overall, I feel very fortunate," says Bradley. "My transplant team and family have been here for me every step of the way."

Bradley celebrated her sixth transplant anniversary in June 2025.

Why Choose UPMC?

People with intestinal failure have hope at UPMC. At UPMC, we provide intestinal transplant and intestinal rehabilitation options to all patients who will benefit. Since 1990, our team has performed more than 670 combined adult and pediatric intestinal and multivisceral transplants. Our skilled team of intestinal transplant surgeons take on some of the most complex cases.

UPMC is home to one of the largest intestinal transplant programs in the world. We take pride in keeping the lines of communication open with patients, families, referring physicians, and transplant case managers regarding status procedures, treatments, and follow-up care. Although intestinal transplantation is a complex, serious procedure, we maintain a personal, patient-focused approach that takes into consideration the stress and concerns many individuals experience.

Our Intestinal Rehabilitation and Transplant Location

UPMC Montefiore

3459 Fifth Ave., 7 South
Pittsburgh, PA 15213

For more information about intestinal transplant, please visit [UPMC.com/IntestinalTransplant](https://www.upmc.com/IntestinalTransplant) or call 412-647-5800.