

**OPTN Organ Procurement Organization Committee
Organ Offer Acceptance Limit Workgroup
Meeting Summary
May 11, 2023
Conference Call
David Marshman, Workgroup Chair**

Introduction

The Organ Offer Acceptance Limit Workgroup met via Citrix GoToMeeting teleconference on 05/11/2023 to discuss the following agenda items:

1. Overview of OPTN Committee Feedback
2. Overview of OPO Committee Discussion
3. Next Steps

The following is a summary of the Workgroup discussions:

1. Overview of OPTN Committee Feedback

The Workgroup Chair provided an overview of the feedback provided by the Liver and Intestinal Organ Transplantation, Lung Transplantation, Kidney Transplantation, and Transplant Coordinators Committees.

Summary of Presentation:

Liver Committee

- Favored hybrid of option 1 and 3 as not to disadvantage the sicker candidates if one of the offers doesn't work out
- Acknowledged logistical challenges created by multiple acceptances

Lung Committee

- Favored hybrid of option 2 and 3
- Timeframe – sometimes OR is not set for 24 hours
- DCD consideration
- Convert LAS threshold to LCAS (Lung Committee)

Kidney Committee

- No substantive feedback

Transplant Coordinators Committee

- Recommendation to include exception for DCD donors
 - Future use of alternative methods of DCD (e.g., NRP)
- Comment about how the proposed changes (with exceptions) will help?
 - For example, 67% of candidates with multiple acceptances are higher status
- Also recognized challenges created by late turndowns

Summary of Discussion:

Workgroup members did not have questions or comments.

2. Overview of OPO Committee Discussion

The Workgroup Chair provided an overview of the OPO Committee discussion.

Summary of Presentation:

He noted that the OPO Committee had an in-depth and thoughtful discussion about the feedback received by the other committees. However, they ultimately decided to move forward with the option to change the number of acceptances from two to one.

Rationale

- One primary organ offer acceptance does not prevent additional offers, provisional acceptances, etc.
- Exceptions for higher status candidates will only reduce concurrent acceptances by 30%
- Two primary acceptances disadvantages candidates on the second match run

Other Considerations

- Timeframe – difficult to identify (e.g., donor recovery times change)
- Exception for DCD donors – data does not support (only 4.4% of liver concurrent acceptances, 11% of lungs)

Summary of discussion:

Several Workgroup members expressed concern about how the OPO Committee decided not to move forward with the recommendations from the Workgroup and the feedback from the other OPTN Committees. Another member responded that the proposed language does not prevent transplant programs from receiving offers. A member responded that this proposal is a result of liver program behavior and lung programs should not be included in the new requirements.

A member commented that when his program receives a lung offer, the donor recovery will not get scheduled for 24 hours or longer. An OPO member responded that if additional offers are received then transplant programs have the option to accept them if the donor recovery is scheduled sooner.

Another member expressed similar concerns about the donor recovery times. An OPO member responded that OPOs try to get the donor recovery scheduled as soon as possible and engage with their transplant partners to accomplish that task. A member suggested that the provisional yes acceptance remain in place until the donor recovery is set. Another OPO member reiterated that even though a transplant program has one acceptance they can still get offers and accept another one, they just must release the other acceptance.

An OPO member noted that with the increase in case times and late turndowns there is always the uncertainty about whether an organ has actually been placed. Another member added that OPOs are not trying to disadvantage patients, they are just trying to avoid having thoracic teams in a plane when the liver gets declined. Another member added that organ offers have increased with continuous distribution and will continue to do so. Additionally, as organs are being more broadly distributed, there is an increase in expedited placements due to late turndowns as OPOs attempt to avoid non-utilization.

A member asked if there was a plan to collect data to evaluate the effects of this proposed policy change. Staff noted that all policy proposals include a policy evaluation plan to monitor the effects of a policy post-implementation. This can be done at 3 months, 6 months, or 1 year depending on the request by the sponsoring committee and needs of the community.

Next Steps

The OPO Committee meets in person on April 21, 2023, and decide which policy solution to pursue during the upcoming public comment period.

Upcoming Meeting

- June 8, 2023, at 2:00 pm EDT (Teleconference)

Attendance

- **Work Group Members**
 - David Marshman
 - PJ Geraghty
 - Larry Suplee
 - Samantha Endicott
 - Candy Wells
 - Greg Abrahamian
 - Pablo Sanchez
 - Joe DiNorcia
 - Kelsey McCauley
 - Errol Bush
 - Kyle Herber
- **SRTR Staff**
 - Katherine Audette
 - Jon Snyder
- **UNOS Staff**
 - Robert Hunter
 - Kaitlin Swanner
 - Taylor Livelli
 - Sharon Shepherd
 - Matt Belton