

# **Meeting Summary**

# OPTN Transplant Administrators Committee Meeting Summary August 22, 2024 In-Person Meeting

# Susan Zylicz, MHA, BSN, CCTC, Chair Jason Huff, MSN, RN, FNKF, Vice Chair

## Introduction

The OPTN Transplant Administrators Committee ("Committee") met in-person on 08/22/2024 to discuss the following agenda items:

- 1. Welcome and Open Discussion
- 2. Continuous Distribution of Hearts Update
- 3. Continuous Distribution of Liver and Intestines Update
- 4. Revise Conditions for Access to the OPTN Computer System
- 5. Promote Efficiency of Lung Donor Testing
- 6. Continuous Distribution of Pancreata Update
- 7. Continuous Distribution of Kidneys Update
- 8. Open Discussion

The following is a summary of the Committee's discussions:

#### 1. Welcome and Open Discussion

No decisions were made.

#### Summary of Presentation:

Staff welcomed the committee to the in-person meeting. The committee introduced themselves and reviewed the agenda.

#### Summary of discussion:

The committee used free agenda time to engage in initial TAC topic discussions. The TAC Chair mentioned financial estimates and time burdens for the Increasing Organ Transplant Access model implementation. The committee discussed ways of informing their patients about IOTA and its implications in a way that is accessible to patients and their families, and it was noted that addressing the IOTA model is out of scope for the committee. A member stated that they support increasing transplants but recognizes that this is hard without increases of staff or finances, and rising costs may decrease transplants in the long term for smaller programs. A committee member mentioned possible overuse of normothermic devices and lack of documentation of NRP. An OPTN staff member discussed federal government data collection steps which lengthens the data collection process. A committee member brought up technology companies and their relationships with donor hospitals.

#### Next steps:

This conversation continued later in the day.

# 2. Continuous Distribution of Hearts Update

No decisions were made.

# Summary of Presentation:

The Heart Committee Chair presented the 2024 updates to Continuous Distribution of Hearts.

# Summary of discussion:

A committee member asked if there were specific measurements for improving equity in this proposal and counterbalance measurements. The Chair replied that the committee was focused on distance measurements that may disadvantage isolated transplant centers. Heart Committee support staff asked TAC what attributes they think the Heart Committee should be looking out for in terms of advantages or disadvantages. The TAC Chair mentioned that NRP could cause disadvantages due to its cost. A committee member stated that medical urgency should have priority over finances and burden, however, rising costs can make this difficult.

# Next steps:

None

# 3. Continuous Distribution of Liver and Intestines Update

No decisions were made.

# Summary of Presentation:

The Liver and Intestines Committee Vice Chair presented the 2024 update for Continuous Distribution of Liver and Intestines.

# Summary of Discussion:

A committee member asked about updates to multivesicular transplant, to which the Liver and Intestines Vice Chair responded that there were no changes. A member raised concerns about rising costs of transplants due to technological changes, while also recognizing technology's positive impact on procuring organs. The Liver and Intestines Committee Vice Chair stated that they have plans to begin tracking NRP livers.

# Next Steps:

None

# 4. Revise Conditions for the Access of the OPTN Computer Systems

# No decisions were made.

# Summary of Presentation:

The Network Operations Oversight Committee (NOOC) Vice Chair presented the proposal titled *Revise Conditions for the Access of the OPTN Computer System.* 

# Summary of Discussion:

A member of the committee asked if access granting within certain modules has been evaluated for the ability of third-party vendors to access full waitlist data as opposed to institutional data, among others.

The NOOC Chair stated that this proposal will require the OPTN to grant access as opposed to institutions. The member said that institutions cannot fully monitor third-party vendor actions and that data restrictions are a better option. Another member agreed that programs and OPOs should be able to decide and restrict data access for third party vendors. A member also stated that smaller third-party vendors may be financially burdened by stringent IT requirements. A member said that registering everyone who accesses the OPTN computer system as an OPTN member is a time burden and possible security issue.

# Next Steps:

None

# 5. Promote Efficiency of Lung Donor Testing

No decisions were made.

# Summary of Presentation:

The Lung Committee Vice Chair presented the proposal titled *Promote Efficiency of Lung Donor Testing*.

# Summary of Discussion:

A member asked if the Lung Committee would consider adding the peak inspiratory pressure to viewable event settings in the ABG event settings section. The Lung Vice Chair responded that this would be an upcoming endeavor for the Lung Committee. This committee member also mentioned that vital signs donor management indicators in the intake fields are not always filled out, and that fluid management should be included in the testing requirements.

The Lung Vice Chair discussed if peak inspiratory pressure should come with every vital sign, which may not all be necessary. The member stated that if OPOs are able, that the aforementioned testing ideas in the presentation are helpful to transplant centers. The Lung Vice Chair stated that some ideas mentioned in the conversation may be included in the next phase of this proposal, and that this phase focuses on CT scans, ABGs, and x-rays. A member mentioned that film imaging should be a requirement if the transplant center has imaging capabilities. The Lung Committee Vice Chair responded that some hospitals have privacy requirements around sharing imaging, and a member said that creating policy guidance may help encourage imaging sharing.

# Next Steps:

None

# 6. Continuous Distribution of Pancreata Update

No decisions were made.

#### Summary of Presentation:

The Pancreas Committee Vice Chair presented an update on Continuous Distribution of Pancreata.

#### Summary of Discussion:

A member suggested that pancreata programs allow for external staff to train in the pancreas field at their facilities to expand pancreas transplant professionals. Committee members mentioned that separate pancreas directors are not typically needed.

## Next Steps:

None

# 7. Continuous Distribution of Kidney Update

No decisions were made.

## Summary of Presentation:

The Kidney Committee Chair presented an update on Continuous Distribution of Kidneys.

# Summary of Discussion:

A committee member asked if any additional discrete fields are necessary, such as NRP indications, anatomical damage indications, or others. The Kidney Chair said this may be worked on in the Kidney committee-led project workgroup. Another member mentioned that aggressive offers may not be sent with all the necessary information to accept the organ. The Chair agreed with increasing transparency in the offer process. A member mentioned that the "provisional yes" system could be updated, while another member mentioned standardizing offer definitions and offers according to centers to preserve equitable access. A member reiterated the importance of data fields highlighting possible organ declination reasons, so an organ does not become perceived as "undesirable" without known reason.

## Next Steps:

None

# 8. Open Discussion

No decisions were made.

# Summary of Discussion:

A committee member suggested that OPTN computer system users should be able to request their own removal. Members also discussed speeding up the member removal process from the computer system. A member suggested having different user profiles for different types of computer access as needed for one's job role. The committee discussed organ continuous distribution timelines, and a member suggested having more detailed cross-clamp data field options. The committee discussed accessibility of organ transplantation transportation and possible future work with other committees regarding data collection.

# Next Steps:

None

# **Upcoming Meetings:**

• September 23rd, 2024

### Attendance

# • Committee Members

- o Laura Droll
- Chuck Zollinger
- Brian Cruddas
- o Emily Warren
- o Jamie Bucio
- o Jason Huff
- o Katie Dokus
- o Heidi Monroe
- o Kay Shield Ragan
- o Luke Preczewski
- o Shelley Zomak
- o Sharon Klarman
- o Susan Stockemer
- o Susan Zylicz

## • HRSA Representatives

- o Arjun Naik
- o Kala Rochelle

## • UNOS Staff

- o Jamie Panko
- o Cole Fox
- o Stryker-Ann Vosteen
- o Kristina Hogan
- o Kim Uccelini
- o Kayla Temple
- o Meghan McDermott
- o Eric Messick
- o Lindsay Larkin

#### • Other Attendees

- o Dennis Lyu
- o Andrew Kao
- o JD Menteer
- o Ty Dunn
- o Shimul Shah
- o Jim Kim