

Thoracic Organ Transplantation Committee
Meeting Summary
October 27, 2016
Conference Call

Kevin Chan, MD, Chair
Ryan Davies, MD, Vice Chair

Discussions of the full committee on October 27, 2016 are summarized below. All committee meeting summaries are available at <https://optn.transplant.hrsa.gov>.

Committee Projects

1. Modification of the Adult Heart Allocation System

The Thoracic Organ Transplantation Committee (hereafter, referred to as the Committee) convened to approve outstanding policy language clarifications and made changes to heart-lung allocation policy post-public comment.

One public comment the Committee discussed was a concern from some members in Region 5 regarding the phrase “the candidate demonstrated a contraindication to being supported by a durable device” in the extension criteria in *Policy 6.1.B.i Non-Dischargeable, Surgically-Implanted, Non-Endovascular Left Ventricular Assist Device*. These members believe this language dictates clinical practice in encouraging use of durable devices when a surgically implanted non-durable device is clinically sufficient to manage the patient. Region 5 also stated that requiring programs to prove contraindications is not an appropriate function of the OPTN. The Committee responded that the community at large, through public comment and other fora, recommended including this language in an attempt to prevent programs from keeping candidates on a temporary device longer than necessary to gain a higher status or access broader sharing. In addition, the Committee reasoned that this comment had not come up at any other regional meeting, or by any other individual, society or program. Thus, the Committee opposed removing this requirement.

The Committee also clarified that the heart from a deceased donor must be offered to *all* the heart-lung potential transplant recipients only after the heart has been offered to all: pediatric status 1A, adult status 1, and adult status 2 potential transplant recipients in the DSA and current geographic zone(s) of offer. In addition, if the intent of the proposed changes to heart-lung policy was to mirror current policy to the extent possible, then isolated hearts should also be offered to adult status 3 and pediatric status 1B candidates in each geographic zone before heart-lung candidates. As pediatric status 1B is equated with adult status 3, and because one of the overarching principles of the proposal was to avoid disadvantaging pediatric candidates, the Committee elected to include them as well.

The Committee approved the proposed changes to Policies 6.1, 6.2, 6.3, 6.4, 6.5 (and subsections therein) and recommends Board of Director consideration December 2016 (Approve-12, Oppose-1, Abstentions-0).

Upcoming Meeting

- November 17, 2016

Attendance

Thoracic Committee Attendance		Date 10/27/2016
Committee Member	Role	GoToTraining Teleconference
Kevin Chan, MD	Chair	X
Ryan Davies, MD	Vice Chair	X
Francis Fynn-Thompson, MD	Region 1	
Jonathan D'Cunha, MD	Region 2	
Nirav Raval, MD	Region 3	X
Mark Drazener, MD	Region 4	X
Mark Barr, MD	Region 5	X
Erika Lease, MD	Region 6	X
Richard Daly, MD	Region 7	X
Andrew Kao, MD	Region 8	X
Jane Farr, MD	Region 9	X
Jules Lin, MD	Region 10	X
Chadrick Denlinger, MD	Region 11	
Tim Whelan, MD	At Large	X
Masina Scavuzzo, RN, BSN, CCTC	At Large	X
Jeffrey Goldstein	At Large	X
Karen Lord, RN, CCRN	At Large	X
Marc Schecter, MD	At Large	
Melanie Everitt, MD	At Large	X
Joseph Rogers, MD	At Large	
James Gleason	Visiting Board Member	X
Kimberly Uccellini, MS, MPH	Committee Liaison	X
Liz Robbins Callahan, Esq.	Policy Leadership	X
Leah Edwards, PhD	Research Analyst	X
Leah Slife	Member Quality	X
Jeff Davis	Instructional Innovations	
Betsy Gans	Regional Administration	X
Jim Bowman, MD	HRSA	X
Monica Lin	HRSA	X
Jessica Zeglin	SRTR	
Katie Audette	SRTR	X
Noelle Hadley	SRTR	X
Melissa Skeans	SRTR	X
Monica Colvin, MD	SRTR	
Maryam Valapour, MD	SRTR	
Shelley Hall, MD	Former Committee Member	X