

**SELECTED RECOMMENDATION OF THE
OPTN/UNOS ORGAN PROCUREMENT ORGANIZATION COMMITTEE
TO THE BOARD OF DIRECTORS**

**Richmond, VA
June 26, 2007**

**Charles Alexander RN, MSN, MBA, CPTC, Chair
Jeff Orlowski MS, CPTC, Vice Chair**

The following is the Organ Procurement Organization Committee's recommendation regarding the placement of the modified OPTN/UNOS Definition of Eligible Death in OPTN/UNOS Policy.

The definition of "eligible death" was approved by the Board of Directors at its March 23, 2006 meeting. A Policy Notice about this definition was distributed on July 20, 2006.

The definition of "eligible death" was approved for placement in Policy 7.1.8 at the March 23, 2007 Board meeting. This definition has not yet been programmed into UNetSM.

The definition of "eligible death" provided to the Board at the March 23, 2007 meeting, however, did not include the modifications that had already been approved by the Board on March 23, 2006. Therefore, the Organ Procurement Organization Committee recommends that the Board approve the placement of the following corrected eligible death definition in Policy 7.1.8.

**** RESOLVED, that the following modifications to Policy 7.1.8 shall be approved and implemented pending programming in UNetSM.**

7.1 REPORTING DEFINITIONS

7.1.1 – 7.1.7 [No changes]

7.1.8 Eligible Death is defined as Eligible Death Definition: The term Eligible Death is defined on UNetSM as any death or imminent death (ventilated and non-ventilated) reported by a hospital that is evaluated and meets organ donor eligibility requirements. An eligible organ donor is defined as any patient aged 70 or younger meeting death by neurological criteria, based on the American Academy of Neurology Practice parameters for determining brain death, who does not have the following: Tuberculosis, HIV Infection with Specified Conditions, CJD, Herpetic Septicemia, Rabies, Reactive Hepatitis B Surface Antigen, Any Retrovirus Infection, Active Malignant Neoplasms except Primary CNS Tumors and Skin Cancers, Hodgkin's Disease, Multiple Myeloma, Leukemia, Miscellaneous Carcinomas, Aplastic Anemia, Agranulocytosis, Fungal and Viral Meningitis, Viral Encephalitis, Gangrene of Bowel, Extreme Immaturity, Positive Serological or Viral Culture Findings for HIV.

Although it is recognized that this definition does not include all potential donors, for reporting purposes for DSA performance assessment, an eligible death for organ donation is defined as the death of a patient 70 years old or younger who ultimately is legally declared brain dead according to hospital policy independent of family decision regarding donation or availability of next-of-kin, independent of medical examiner or coroner involvement in the case, and

independent of local acceptance criteria or transplant center practice, who exhibits none of the following:

Active infections (specific diagnoses) [Exclusions to the Definition of Eligible]

Bacterial: Tuberculosis, Gangrenous bowel or perforated bowel and/or intra-abdominal sepsis, See "sepsis" below under "General"

Viral: HIV infection by serologic or molecular detection, Rabies, Reactive Hepatitis B Surface Antigen, Retroviral infections including HTLV I/II, Viral Encephalitis or Meningitis, Active Herpes simplex, varicella zoster, or cytomegalovirus viremia or pneumonia, Acute Epstein Barr Virus (mononucleosis), West Nile Virus infection, SARS

Fungal: Active infection with Cryptococcus, Aspergillus, Histoplasma, Coccidioides, Active candidemia or invasive yeast infection

Parasites: Active infection with Trypanosoma cruzi (Chagas'), Leishmania, Strongyloides, or Malaria (Plasmodium sp.)

Prion: Creutzfeldt-Jacob Disease

General [Exclusions to the Definition of Eligible]: Aplastic Anemia, Agranulocytosis

Extreme Immaturity (<500 grams or gestational age of <32 weeks)

Current malignant neoplasms except non-melanoma skin cancers such as basal cell and squamous cell cancer and primary CNS tumors without evident metastatic disease

Previous malignant neoplasms with current evident metastatic disease

A history of melanoma

Hematologic malignancies: Leukemia, Hodgkin's Disease, Lymphoma, Multiple Myeloma

Multi-system organ failure (MSOF) due to overwhelming sepsis or MSOF without sepsis defined as 3 or more systems in simultaneous failure for a period of 24 hours or more without response to treatment or resuscitation

Active Fungal, Parasitic, Viral, or Bacterial Meningitis or Encephalitis

NOTE: The change to Policy 7.1.7 and 7.1.8 above shall be approved and implemented pending programming in UNetSM, if and as applicable.

7.2 – 7.9 [No changes]