OPTN/UNOS Transplant Administrators Committee (TAC) Meeting Minutes February 28, 2018 Conference Call

James Pittman, MBA, RN, Chair Nancy Metzler, Vice Chair

Introduction

The Transplant Administrators Committee met via Citrix GoToTraining teleconference on 02/28/2018 to discuss the following agenda items:

- 1. Modifications to the Distribution of Deceased Donor Lungs
- 2. Expedited Organ Placement Concept Paper

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

1. Modifications to the Distribution of Deceased Donor Lungs

The OPTN/UNOS Transplant Administrators Committee (TAC) received a presentation and discussed the Modifications to the Distribution of Deceased Donor Lungs proposal (Thoracic Organ Transplantation Committee). The Committee was in agreement that further research and discussions need to occur regarding the concepts of the proposal but this is a good first step. The following is a summary of the questions and comments committee members had for the presenter.

- Some DSAs with broad geography may have donor hospitals with no centers within the 250 nm radius was there consideration of having the first circle being 250 nm and DSA?
 The presenter stated that this is one of the options the committee has been discussing and will continue to consider.
- Several members supported the concept of 250 nm and include DSA in first circle.
- How long does the Thoracic Committee think it will before there is enough data to review? Any hypothesis to the effect this allocation change will actually have? The presenters stated that the first look at preliminary data does appear to show that there is broader sharing occurring. One surprise was there is a middle distance where sharing is occurring. No other huge surprises have been discovered and it seems policy is doing what it was intended to do, which was share lungs more broadly. There was no change in waitlist mortality but it is still very early for any real outcomes measures. More in the months to come.
- The TAC would suggest the committee take more time to consider the data and consider more options and go back out for public comment with those recommendations. Also, suggest considering the effect EXVIVO has on this proposal.
- One member stated support for how the proposal is written now vs being forced because it has been pushed through the court of law.
- Opinion about sensitized patients removed exception policy all together or should it go through regional review board or allowing all parties in any zone A.
- One committee member stated that sensitized lung cases should go to regional review board and would be too complex to go through all zone As.
- The proposed Heart/Lung allocation policy does help clarify for OPOs.

2. Expedited Organ Placement Concept Paper

The OPTN/UNOS Transplant Administrators Committee (TAC) received a presentation and discussed the Expedited Organ Placement Concept Paper (OPO Committee). The Committee applauds the OPO Committee's work on this issue and agreed something needs to be in place to expedite organ placement and this is a good first step. However, building a model around acceptance practices will be extremely difficult and could have unintended negative consequences when assuming past behavior dictates future behavior. This could negatively impact the system and patients overall. A member also asked, "As we build a system for expedited placement, how do we make sure it stays expedited?" One way is to reduce time to evaluate from 1 hour to 30 minutes. However, if there are no discerning qualifications, essentially it's the same national offer pool and there needs to be some level of filtering or there will be a situation with miss opportunities.

Upcoming Meeting

March 28, 2018