

**OPTN Operations and Safety Committee  
ABO Workgroup  
Meeting Minutes  
November 14, 2019  
Conference Call**

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## **Introduction**

The ABO Workgroup (the Workgroup) met via Citrix GoToMeeting teleconference on 11/14/2019 to discuss the following agenda items:

1. Review and Discussion: Guidance Document and Proposed Policy Language

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

### **1. Review and Discussion: Guidance Document and Propose Policy Language**

The Workgroup reviewed and discussed the guidance document and proposed policy language to *OPTN Policy 2.6: Deceased Donor Blood Type Determination and Reporting*.

#### Summary of discussion:

##### Guidance Document

Upon further review and discussion, the Workgroup decided to remove the case study example from the guidance document. The case study did not coincide with the issues that have been seen with discordant results.

A member stated that the case study provided an example where the patient's blood type was converted back to the patient's true blood type six days after receiving a transfusion. This example may create a misconception that the case study would be true for other cases. The Workgroup agreed to include a statement that there is no known timeframe for when the patient's true blood type is converted back after a transfusion.

The Vice Chair continued with a review of the "Practices to Resolve Donor ABO Typing Conflicts". This section provides information to consider when there is an indeterminate ABO result and consideration in how to resolve this issue. An example was included. The intent of this section is to encourage thoughtful consideration before referring a patient as an AB and the impact it can have on urgently O patients that may be excluded from consideration.

A member asked how the guidance document would be made available for members. The Vice Chair explained that the guidance document and policy language will go out separately for public comment. Once approved, the document would be accessible on the OPTN website. There has been discussion of having the document made available through a webpage to have the ability to track how many members are utilizing the document.

The member continued by commenting that this information should also be shared in a peer reviewed journal as well. The MPSC is supportive of using its knowledge for community education. The Vice Chair

agreed with this and stated that this type of project would be something that could be discussed outside of the Workgroup.

There were no additional comments.

#### Propose Policy Language

The Workgroup reviewed the proposed policy language to *OPTN Policy 2.6: Deceased Donor Blood Type Determination and Reporting*. Some changes to the proposed language was to remove IV product infusion because it wasn't believed to being relevant to blood type. Additionally, the history blood products was specified to the current hospitalization that may impact blood typing.

The Vice Chair stated that there was a question raised of including a plasma diluted calculation. The issue presented was that if a plasma dilution calculation were done, and the patient's plasma was diluted due to the administration of IV fluids, this would not affect the patient's ABO and there would be no value in the calculation. The Workgroup decided not to include the calculation as a requirement.

There was language added to include that health care professionals must use all known available blood type and subtype determination source documents. The intent of this was to alert members to reference other blood type testing if they are available. If the results are conflicting or indeterminate, the OPO should have a written protocol for making sure they look at and resolve the discrepant results.

A member commented that item #4 under *OPTN Policy 2.6.A: Deceased Donor Blood Type Determination* does not state what to do if the results do not indicate the same blood type. The member stated that it appeared that the policy should state upfront what should be done if the results are not matched. There is concern that OPOs will read item #4, realize they are out of policy because their results are not the same, and will continue to send more results until they are the same.

The Vice Chair clarified that *OPTN Policy 2.6.A: Deceased Donor Blood Type Determination* is explaining that blood typing must be done, how it should be collected and that the results must be the same. If the results are not the same, *OPTN Policy 2.6.C: Reporting of Deceased Donor Blood Type and Subtype* explains how this should be reported. If the results are conflicting or indeterminate, the member is to refer back to *OPTN Policy 2.6.A: Deceased Donor Blood Type Determination* as it is required to have a protocol to resolve any discrepancies.

A member stated that the concern is that item # 1-3 are all things the host OPO must do and it is under their control. Item #4, what the test results are, is not under the OPO's control. The Workgroup agreed that the policy language should be reviewed and refined further based on this assessment of item #4. The policy should explain the process required for obtaining blood type results. If the blood typing results are not the same, members should go through the process as outlined in their protocol per OPTN policy, and report the most clinically appropriate result.

There were no additional comments or questions.

#### Next steps:

- The guidance document and proposed policy language will be refined based on the Workgroup's recommendations.
- The OPTN Operations and Safety Committee will review and vote on the final drafts of the guidance document and proposed policy language during their November 21, 2019 full committee teleconference.