

**OPTN Living Donor Committee
Meeting Summary
May 20, 2020
Conference Call**

**Randy Schaffer, M.D., Chair
Heather Hunt, J.D., Vice Chair**

Introduction

The Living Donor Committee (the Committee) met via Citrix GoToTraining teleconference on 05/20/2020 to discuss the following agenda items:

1. Living Donor Vascularized Composite Allografts (VCA) Policy 14 Project
2. Policy Oversight Committee Update
3. Committee Service Recognition

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

1. Living Donor Vascularized Composite Allografts (VCA) Policy 14 Project

The Chair of the Living Donor Committee VCA Workgroup (the Workgroup) presented the draft update to Policy 14.

Data summary:

The Workgroup's task was to review Policy 14 on living donors in order to identify any areas that may require additional elements related to living donor VCA, specifically living donor uterus transplants. The Workgroup convened over the last several weeks and proposed new language and tables to include living VCA donors and uterus specific elements.

Summary of discussion:

During a discussion about reproductive VCA being categorized as genitourinary in the proposed table under *Policy 14.3: Informed Consent Requirements*, a member of the Committee asked if the intent was to avoid the word "reproductive". The presenter responded that the updated definition of VCA in *Policy 1* will use the term "genitourinary" so it was used in the proposed table to match the updated language. A member asked if a bladder transplant would be considered "genitourinary". The presenter responded that a bladder transplant is listed as an example of "genitourinary" within the updated definition of VCA.

A member asked if a conversation should be pursued about insurability impact. The presenter responded that those issues are covered in the general living donor policy. The additional element proposed in the informed consent section was added because it was found that there is no formal donation insurance process for living donor VCA as there is for other organ types. The lack of formal insurance process for these living VCA donors could result in the donor themselves being faced with potential charges to their health insurance or lack of coverage for certain aspects of their donation process.

The presenter asked the Committee their thoughts regarding the potential redundancy of fungal screening underneath the "Additional Specific Tests" section and "Additional Transmissible Disease Screening for Uterus Donors" section of *Policy 14.4: Additional Medical Evaluation Requirements for*

Living Donors. The Committee members agreed that if they are different tests, then that needs to be made clear. If it is the same test, then the language is duplicative and fungal screening should be kept underneath the “Additional Transmissible Disease Screening for Uterus Donors” section for simplification and efficiency.

Next steps:

Pending approval by committee vote on June 10, this will go to Public Comment. Before Public Comment begins on August 4, staff will draft a public comment proposal to accompany draft language.

2. Policy Oversight Committee (POC) Update

The Committee Vice-Chair gave an overview of the POC’s role within the OPTN. Additionally, the presenter reviewed the POC’s updated strategic policy priorities: Continuous Distribution, Efficient donor/recipient matching to increase utilization, and Increased Equity for Multiorgan and Single Organ Candidates.

3. Committee Service Recognition

Outgoing members of the Committee received recognition for their service.

Upcoming Meetings

- June 10 - Teleconference