

**OPTN Data Advisory Committee
Meeting Summary
March 8, 2021
Conference Call**

**Rachel Patzer, PhD, Chair
Sumit Mohan, MD, MPH, Vice Chair**

Introduction

The Data Advisory Committee (DAC) met via Citrix GoToMeeting teleconference on 3/8/2021 to discuss the following agenda items:

1. Project Updates
2. Data Collection Related to US Public Health Service Guideline 2020 (Disease Transmission Advisory Committee)
3. Refine Lung Data Fields (Lung Transplantation Committee)
4. Data Collection to Evaluate the Logistical Impact of Broader Distribution (Operations and Safety Committee)

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

1. Project Updates

UNOS staff provided an update on the on the emergency *Relaxation of Data Submission Requirements* policy and refusal code project.

Summary of discussion:

Relaxation of Data Submission Requirements

The Executive Committee approved concluding the *Relaxation of Data Submission Requirements* policy.

On March 1, 2021, OPTN members were notified of the following:

- On April 1, 2021, all required forms will resume their expected submission dates as indicated in policy and will no longer be placed in "amnesty" status
- Transplant hospitals will have until July 1, 2021, to complete forms that had been placed in amnesty status between March 13, 2020 and March 31, 2021

The Chair thanked the members for providing input when developing the Data Advisory Committee's (DAC) recommendation to the Executive Committee.

Refusal Codes Project Update

UNOS staff shared that cross committee presentations are underway and will be completed by mid-March. The remaining committees that will receive presentations are the Transplant Coordinator, Lung Transplantation, and Vascular Composite Allograft Committees.

UNOS staff also noted that a request for community feedback is now available on the OPTN website. All feedback will be compiled and shared with the Workgroup to inform final revisions to the proposed list of refusal codes.

2. Data Collection Related to US Public Health Service (PHS) Guideline 2020 (Disease Transmission Advisory Committee)

This project, sponsored by the Disease Transmission Advisory Committee (DTAC), intends to add the ten specific PHS risk criteria to DonorNet[®]. Currently, PHS risk data are collected in DonorNet[®] as a singular yes/no question.

Summary of discussion:

DAC members expressed support for this effort as a way to systematically collect more granular PHS risk information. There was also support for using a dropdown menu that allows members to check off all applicable information related to PHS risk criteria. Increasing the accessibility of this information will allow for coordinators and clinicians to share more detailed PHS risk information with a potential recipient.

A member asked about the collection of hemodilution. The DTAC representative noted that hemodilution will still be collected but it is no longer connected to the PHS risk factors.

DAC endorsed this proposed data collection effort.

3. Refine Lung Data Fields (Lung Transplantation Committee)

This project, sponsored by the Lung Transplantation Committee, intends to collect date for height and weight separately. Currently, these dates are collected in one combined date field for both parts of height and weight used to calculate body mass index (BMI). Separating the height and weight dates will allow for easier API (application programming interface integration with Electronic Health Records (EHR). This project also intends to clarify policy language and system implementation for when coefficient adjustments to lung allocation score (LAS) are used for certain existing diagnoses.

Summary of discussion:

The Chair expressed support for the considerations around EHR API integration as part of this effort. A member asked if the reporting of height would be required every six months. UNOS staff noted that only weight would need to be updated every six months but acknowledged that the Lung Committee has not voted on a final proposal yet.

The Vice Chair expressed concern about the potential data entry errors relating to variation in weight units (kilograms or pounds) collected in EHRs and imported by an API. He recommended creating an alert if the recorded measurement varies a significant amount. UNOS staff will bring this concern to the Lung Committee for consideration.

A member asked if site surveyors will review the converted weight (if converted to kilograms) or the weight that was reported. UNOS staff confirmed that the weight reported would be reviewed during a site survey.

DAC endorsed this proposed data collection effort.

4. Data Collection to Evaluate the Logistical Impact of Broader Distribution (Operations and Safety Committee)

The Operations and Safety Committee (OSC) are developing a data collection proposal that will evaluate and collect data related to broader distribution, specifically as related to travel.

Summary of discussion:

The Chair asked about the current availability of data to monitor broader distribution policies across all organ systems. UNOS staff noted that each proposal has a monitoring plan and there is also the potential to retroactively apply new data as part of the pre and post implementation review of allocation changes.

UNOS staff shared that the final data elements being considered for inclusion in the proposal are still being considered. The Chair noted that it is important to balance the burden of new data collection with the ability to evaluate the broader distribution of organs.

UNOS staff shared that this proposal is intended to go to public comment in August and will be reviewed by the Board of Directors in December 2021. The Vice Chair expressed concern about the timing of when this data will become available as new allocation policies, such as the kidney and pancreas allocation changes, are implemented. He commented that there is a concern relating to the allocation changes is that transplant programs will begin receiving multiple organ offers from multiple organ procurement organizations (OPOs) simultaneously. This creates the challenges of navigating this process and creates an opportunity for transplant programs to provide provisional yes responses for multiple offers. He commented that this will need to be monitored. UNOS staff commented that provisional yes data is collected currently and can be compared pre and post implementation.

UNOS staff noted that each allocation proposal is required to include a monitoring plan. The Chair commented that the DAC should consider being involved in the development of the monitoring plans. The Chair suggested evaluating the data elements being proposed as part of this project alongside of the existing monitoring plans for the broader distribution proposals.

Next steps:

UNOS staff will redistribute the meeting materials as well as the *Elimination of DSA and Region from Kidney Allocation Policy* briefing paper to the Committee for further review. Members were encouraged to provide additional feedback by email.

Upcoming Meeting

- April 12, 2021

Attendance

- **Committee Members**
 - Rachel Patzer
 - Sumit Mohan
 - Alicia Redden
 - Benjamin Schleich
 - Bilal Mahmood
 - Colleen O'Donnell Flores
 - Daniel Stanton
 - Heather Hickland
 - Krishna Mahendraraj
 - Kristine Browning
 - Lauren Kearns
 - Macey Levan
 - Melissa McQueen
 - Sandy Feng
- **HRSA Representatives**
 - Adriana Martinez
 - Chris McLaughlin
- **SRTR Staff**
 - Ajay Israni
 - Bert Kasiske
 - Jon Snyder
 - Nick Salkowski
- **UNOS Staff**
 - Abigail Fox
 - Adel Husayni
 - Brooke Chenault
 - Carly Engelberger
 - Elizabeth Miller
 - Joann White
 - Katrina Gauntt
 - Kiana Stewart
 - Kim Uccellini
 - Lauren Mauk
 - Lauren Motley
 - Leah Slife
 - Meghan McDermott
 - Nicole Benjamin
 - Randall Fenderson
 - Robert Hunter
 - Sarah Konigsburg
 - Sarah Taranto
 - Susan Tlusty
- **Other Attendees**
 - Lara Danzinger-Isakov