

OPTN Kidney Transplantation Committee

Meeting Summary

March 15, 2021

Conference Call

Vincent Casingal, MD, Chair
Martha Pavlakis, MD, Vice Chair

Introduction

The Kidney Transplantation Committee met via teleconference on 03/15/2021 to discuss the following agenda items:

1. Welcome & Announcements
2. 2021-2024 OPTN Strategic Plan Proposal
3. Update Transplant Program Key Personnel Training and Experience Requirements Request for Feedback
4. Require Notifications of Human Leukocyte Antigen Typing (HLA) Changes Proposal
5. Cross-Committee Updates

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

1. Welcome & Announcements

Committee Leadership welcomed the Committee members, and staff provided updates on the kidney and pancreas allocation policy implementation. Staff shared a request for information from the Agency for Healthcare Research and Quality regarding clinical algorithms that may contribute to racial and ethnic disparities, and requested input from Committee members via email for the development of an OPTN response.

Summary of discussion:

A member asked if the response could include research on how many people were affected by the use of the race covariate in eGFR calculation, particularly the number of people denied appropriate access to transplant. The member also asked if the Reassess Race in eGFR Calculation Workgroup planned to provide retroactive support to restore appropriate access and wait time to disadvantaged candidates. The Committee Vice-Chair noted that the Workgroup would begin discussions on this soon.

2. 2021-2024 OPTN Strategic Plan Proposal

The Committee reviewed the Executive Committee's *2021-2024 Strategic Plan* proposal and provided feedback.

Summary of discussion:

The Committee Vice-Chair remarked that the goals and initiatives are thorough, but that the reference to increasing donation placed too much emphasis on increasing kidney paired donation alone, instead of increasing living donation overall.

A member noted that the metrics were measurable and specific, but pointed to a need to revise benchmarks and membership and professional standards flagging criteria, particularly with all organs in circle-based allocation.

3. Update Transplant Program Key Personnel Training and Experience Requirements Request for Feedback

A representative of the Membership and Professional Standards Committee (MPSC) presented the *Update Transplant Program Key Personnel Training and Experience Requirements* request for feedback currently out for public comment and received feedback from the Committee.

Data Summary:

The MPSC is requesting feedback on transplant program key personnel training and experience requirements to include community input throughout the holistic review and re-structuring of the requirements.

The Membership and Professional Standards Committee is seeking feedback on the following two topics:

- Foreign Equivalency – for surgeons and physicians who either trained or gained experience outside of the United States
 - A foreign equivalency pathway would need to have equivalent rigor for US surgeons and physicians, as well as be objective, clearly defined, and flexible enough to accommodate multiple combinations of foreign training and experience.
- Primary Availability to Program – primary surgeons and physicians are currently required to be onsite, particularly as they are the clinical leaders of a program and responsible for ensuring compliance with OPTN obligations

Summary of discussion:

The Committee Chair remarked that improved clarity will be helpful, and noted that primary physicians and surgeons should have some minimal onsite requirement, in order to ensure responsibility to patients. Another committee member agreed, adding that the amount of required onsite time should be defined clearly, such as a certain number of weeks a year or hours a month.

A member shared that transplant administration in the United States (US) varies significantly from transplant administration in some foreign physicians' practicing countries. The member added that some requirement of time practicing in the US would be an appropriate quality measure to ensure the new provider can navigate the transplant administration system and processes.

4. Require Notification of Human Leukocyte Antigen (HLA) Typing Changes Proposal

The ex officio Chair of the Histocompatibility Committee presented the *Require Notification of HLA Typing Changes* proposal and received feedback and questions from the Committee.

Data Summary:

This proposal aims to ensure better patient safety through early notification of critical HLA typing changes, which could prevent serious adverse events associated with incorrect candidate, recipient, or donor HLA typing.

The Histocompatibility Committee is seeking feedback on the proposed time frames, whether match re-execution is necessary in cases of critical discrepancy, how policies should address cases of discrepancies discovered between procurement and transplant, and the inclusion of automated electronic notification.

Summary of discussion:

The Committee Chair expressed support for the proposal, and noted that requiring re-execution of the match run upon discovery of a critical typing discrepancy may not be necessary, particularly as the organ procurement organization (OPO) can utilize released organ policy. The Chair deferred further discussion on match run re-execution. The Committee had no additional comments on match re-execution for critical typing discrepancies.

The Committee agreed that automated notification of typing discrepancies would be helpful, particularly as they are also trackable.

5. Cross-Committee Updates

Committee members in Policy Oversight Committee, Kidney-Pancreas Continuous Distribution Workgroup, and Technology Tools Workgroup provided updates on their respective projects.

Data summary:

In March 2021, the Policy Oversight Committee received an update from the Biopsy Best Practices and Standards Workgroup, and reviewed and approved new projects, including the Reassess Race in eGFR Calculation project.

The Kidney and Pancreas Continuous Distribution Workgroup has been discussing HLA typing and developing a data request regarding HLA typing in kidney allocation.

The Technology Tools Workgroup, sponsored by the OPO Committee, has most recently continued discussions on the DonorNetSM Mobile pilot project, in-app notifications, and chat capabilities.

Summary of discussion:

The Committee had no comments or questions.

Upcoming Meetings

- April 14, 2021 – Virtual “In-Person” Committee Meeting
- April 19, 2021 (Tentative)

Attendance

- **Committee Members**
 - Martha Pavlakis
 - Vincent Casingal
 - Andrew Weiss
 - Arpita Basu
 - Asif Sharfuddin
 - Bea Concepcion
 - Cathi Murphey
 - Jim Kim
 - Julianne Kemink
 - Krista Lentine
 - Precious McCowan
 - Erica Simonich
- **HRSA Representatives**
 - Jim Bowman
 - Marilyn Levi
 - Raelene Skerda
- **SRTR Staff**
 - Ajay Israni
 - Jonathan Miller
 - Katie Audette
 - Nick Salkowski
- **UNOS Staff**
 - Amanda Robinson
 - Ben Wolford
 - Chelsea Haynes
 - Jennifer Musick
 - Joel Newman
 - Kayla Temple
 - Kerrie Masten
 - Lauren Motley
 - Lindsay Larkin
 - Meghan McDermott
 - Melissa Lane
 - Nicole Benjamin
 - Ruthanne Leishman
 - Sally Aungier
 - Sharon Shepherd
- **Additional Attendees**
 - Clifford Miles