

Remove CPRA 99-100% Form for Highly Sensitized Candidates

OPTN Histocompatibility Committee

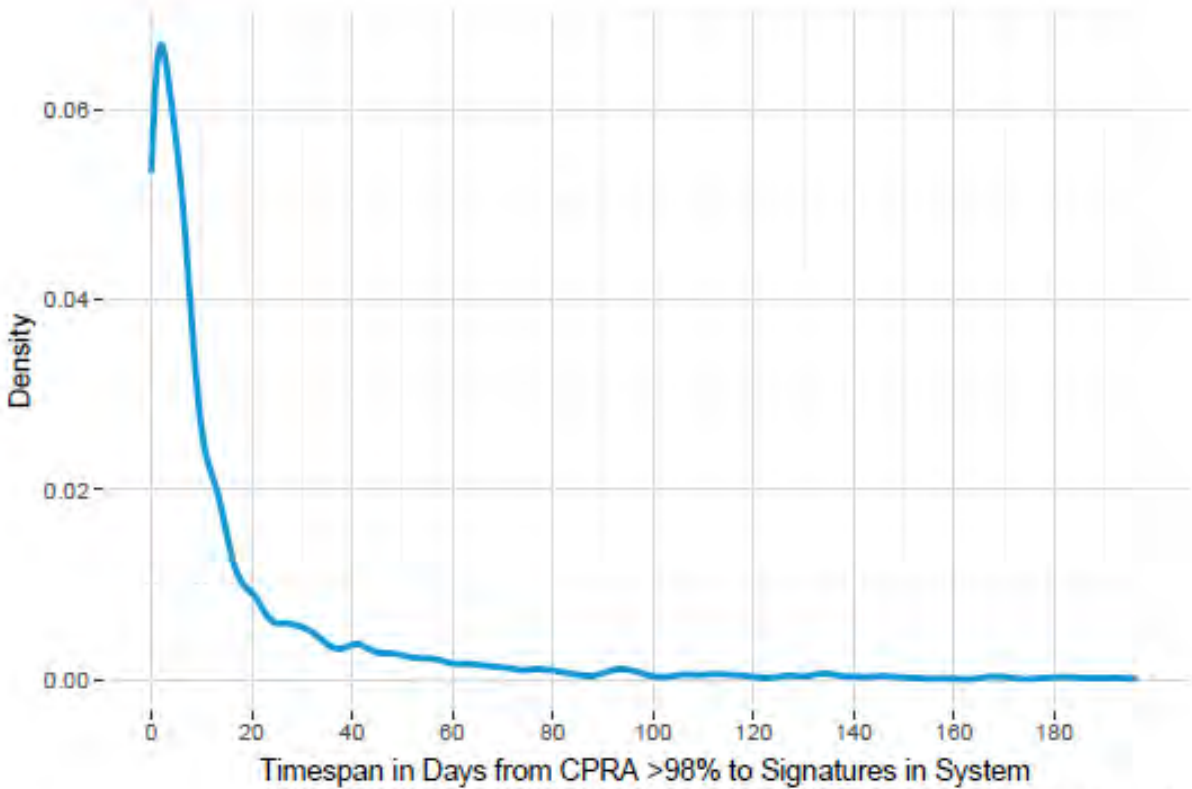
Purpose and Proposal

- Increase candidate equity for highly sensitized kidney candidates
- Remove additional documentation for CPRA 99-100% kidney candidates
 - Histocompatibility lab director and transplant physician or surgeon signatures must currently be documented on OPTN Waiting List in order for these candidates to receive higher allocation priority

Rationale

- Highly sensitized candidates have a more limited pool of potential organ donors and require additional allocation priority
 - Removing the documentation requirements will increase the speed at which these candidates receive allocation priority
 - It takes a median of 7 days for these candidates to gain priority with the current documentation requirements
- This documentation was initially implemented to safeguard against concerns about improper assignment of unacceptable antigens
 - Compliance monitoring has found no cases of this since implementation of this data collection
 - The Committee feels the documentation is no longer necessary

Time in Days From CPRA >98% to Required Signatures Received



Note: View is restricted to 99th Percentile

Number of Registrations	Min	25th %-tile	Median	Mean	75th %-tile	Max
4,070	0	2.07	6.83	20.09	18.92	608.18

Member Actions

- Histocompatibility labs and transplant hospitals will no longer need to provide additional documentation for CPRA 99-100% kidney candidates
 - This data collection will no longer be required on the OPTN Waiting List
- Histocompatibility labs and transplant hospitals will need to evaluate their transplant agreements

What do you think?

- Are there other barriers that highly sensitized candidates may face when being listed that the committee needs to consider addressing?
- Are there other OPTN documentation requirements that the committee should consider reviewing for efficiency or equity concerns?