

# **Meeting Summary**

OPTN Membership and Professional Standards Committee
OPO Performance Monitoring Enhancement Work Group
Meeting Summary
September 29, 2023
Conference Call

Rick Hasz, Chair

#### Introduction

The MPSC OPO Performance Monitoring Enhancement Work Group met in open session virtually via Webex on September 29, 2023, to discuss the following agenda items:

- 1. Discuss draft OPO referral data collection tool
- 2. Next Steps

The following is a summary of the Work Group's discussions.

### 1. Discuss Draft OPO Referral Data Collection Tool

The Chair reviewed the draft OPO referral data collection tool line by line, answered questions and gathered feedback on suggested revisions, definitions, and things to consider as the project moved forward. The Chair asked the work group to submit any additional comments and suggestions.

### Summary of Discussion:

**Decision**: The Chair will incorporate suggested revisions into the draft OPO referral data collection tool and send the updated tool to the work group for additional feedback prior to the next meeting. Simultaneously, will also put together a process flow incorporating the logic algorithms for review by the work group.

The work group provided suggestions and feedback on the sections of the draft OPO referral data collection tool that address:

- Hospital Information make sure it is clear this is the referring hospital information to distinguish from a hospital to which a donor may be transferred.
- Hospital Referral Process a number of suggestions were made for this section
  - Address patients on mechanical support that could be potential donors in question on whether patient is ventilated
  - Make clear picking primary reason for circumstances of cardiac arrest
  - Need to clarify definition for what is a referral on time for OPO on-site intervention
  - Include quantitative variable for mean arterial pressure (MAP) rather than >60 yes/no question
  - o Clarifications to the choices for neurological status at time of referral
  - Potentially add unknown option for did healthcare team approach family about organ donation and make clear this does not include family asking hospital staff about donation
  - o For on-site evaluation, consider capturing remote evaluation done prior to going on-site
- Next of Kin (NOK) Authorization Process Suggestions included:

- Add additional registries
- o Include more options under no NOK identified including gift document, hospital administrator, court, guardian ad litem
- Expand list for NOK relationship to patient to incorporate Uniform Anatomical Gift Act (UAGA) list
- Incorporate more information on donor after cardiac death (DCD) approaches into timing of NOK conversation
- Final Neurological Assessment at Case Disposition
  - Clarified that this section would be completed if did not proceed to brain death and in DCD cases
  - o Clarify in tool that this is the last evaluation prior to case disposition
  - For respiratory drive assessment, include a choice that reflects hospital restrictions since some hospitals do not allow
  - Change terms such as "poor" or "elevated" to quantitative field for ejection fraction (EF), partial pressure of oxygen (PO2) and creatinine

### Organ Allocation

- The work group had a discussion about how much of this data is collected on other forms or in match run. The intent is to include everything and then scale back as needed and this section is included to ensure we capture this information when a match run is not executed. Collecting this information could support development of expedited placement policies in future
- The work group discussed whether interest calls should be captured and noted the need to balance capturing the efforts of the OPO to place an organ and expanding the tool creating larger burden on OPO to document data

### Organ Recovery

- Recovery attempted intended to capture patient taken to the operating room to recover at least one organ or DCD was attempted but did not move forward
- Method of Recovery should include option for uncontrolled DCD
- Circumstances of Cardiac Arrest
  - Clarify that staff are selecting the primary reason for cardiac arrest
  - Consider including that hospital withdrew support of life-sustaining therapies based on do-not-resuscitate (DNR) order
- Medical Suitability Evaluation
  - o In some instances, terminal lab values may not be available
- Classification of Cause of Death for Non-Ventilated Referrals
  - Chair noted that the list is long but it would be organized as a two or three level selector

The work group also discussed capturing a transfer to a donor recovery center in the tool and decided not to capture Normothermic Regional Perfusion (NRP) in this tool. The tool is designed to capture information prior to recovery and there are other ongoing efforts to capture NRP in DonorNet.

### 2. Next Steps

The Chair will incorporate suggested revisions into the draft OPO referral data collection tool and send the updated tool to the work group for additional feedback prior to the next meeting. Simultaneously, will also put together a process flow incorporating the logic algorithms for review by the work group.

# **Upcoming Meetings**

- October 24, 2023, 3 5pm ET
- November 9, 2023, 10 11am ET
- December 1, 2023, 11am 1pm, ET

### **Attendance**

# • Work Group Members

- Richard Hasz, Work Group Chair
- Kristine Browning
- o Jamie Bucio
- o Ashley Cardenas
- o Theresa Daly
- o Micah Davis
- o Chad Ezzel
- o Kyle Herber
- Raymond Lee
- Scott Lindberg
- o Paul MacLennan
- o Deborah McRann
- o Malay Shah
- o Candy Wells

# • HRSA Representatives

Marilyn Levi

### SRTR Staff

- o Ryo Hirose
- o Jon Miller
- o Jon Snyder
- o Bryn Thompson

### UNOS Staff

- o Stephanie Anderson
- o Matt Belton
- o Rebecca Brookman
- o Marty Crenlon
- o Robyn DiSalvo
- Katie Favaro
- Nadine Hoffman
- o Sevgin Hunt
- o Krissy Laurie
- o Eric Messick
- o Amy Minkler
- o Heather Neil
- o Samantha Noreen
- o Jacqui O'Keefe
- o Melissa Santos
- o Sharon Shepherd
- o Betsy Warnick
- o Joe Watson
- o Divya Yalgoori

# Other Attendees

o None