

Meeting Summary

OPTN Transplant Coordinators Committee Meeting Summary January 19, 2022 Conference Call

Stacy McKean, RN, Chair Natalie Santiago-Blackwell, RN, MSN, Vice Chair

Introduction

The Transplant Coordinators Committee (the Committee) met via Citrix GoToMeeting teleconference on 01/19/2022 to discuss the following agenda items:

1. COVID-19 Open Forum

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

1. COVID-19 Open Forum

The Committee held an open forum for coordinators share best practice policies surrounding COVID-19.

Summary of discussion:

The Chair introduced the topic of discussion and inquired how programs were handling the latest stage of the COVID-19 pandemic. A member responded that, due to the increased rate of COVID-19 infections in patients across their health system, their program was considering requiring a vaccination for all waitlisted candidates. They concluded by asking the Committee whether their programs had instituted any sort of vaccination requirement for candidates.

A second member replied that their program was requiring all waitlisted candidates to be vaccinated by a set date or be placed inactive. In addition, they added that counseling on vaccination has become part of their evaluation process. Another member noted that they had the same requirements at their program, and were considering whether booster vaccinations should be made mandatory as well.

A third member contributed that their program experienced initial pushback on vaccination requirements for candidates, but felt that, since the Omicron surge, the resistance had diminished. They did mention, however, that within their state, most programs were not requiring a vaccination.

Another member replied that they worked with pediatrics, and that vaccination requirements would be difficult to enforce, as the COVID-19 vaccine was still in emergency use authorization for pediatrics. The Chair followed up and asked whether that program was requiring caregivers to be vaccinated, and the member responded that those too were not required, but strongly recommended.

The question was posed as to how programs were considering the usage of oral treatments for COVID-19, as these treatments were only just starting to appear. One member responded that, though the usage of oral treatments was state-controlled in their state, their program had worked with their electronic medical record (EMR) distributer to be updated daily as more treatments for COVID-19 become available. This was done such that providers can remain up to date on which treatments are available for immunosuppressed individuals. Another member added that, with how early on in distribution these treatments are, acquiring them can be difficult. Additionally, a number of members mentioned that they were working closely with their pharmacy departments to ensure that the correct

treatments were being administered as both more treatments and information surrounding the treatments emerged.

Another member asked what programs are considering when they receive a COVID positive organ offer. Two members who work with pediatrics stated their program was very conservative and they were refusing every COVID positive offer. A member working with adults noted that their program felt it would not be advisable to admit a candidate for elective kidney surgery with the risk that they could end up in the intensive care unit (ICU). A second member added that their program stringently reviewed each donor case with a past positive, especially surrounding cause of death, bronchoalveolar lavage (BAL) samples, and the type of positive test. The Chair added that, from the organ procurement organization (OPO) side, their organization was very cautious about approaching patients whose cause of death is COVID, versus patients whose cause of death is not COVID related, but incidentally test positive. A final member added that their program was accepting COVID positive organs, but their recipients must be informed of the positivity as well as have had the COVID-19 vaccine. They will preemptively be given a broad spectrum antiviral prior to transplant, and the member noted that they have had good outcomes with this approach.

The Chair asked the Committee how they were securing backup for organ offers given the rate of incidental asymptomatic COVID positive tests when recipients were brought in. A member also expressed interest in this topic, as they noted their program had had to refuse three organs in the past week because recipients were asymptomatically COVID positive. It was suggested that perhaps recipients could test more frequently, given the availability of home tests now. This was supported by a number of members on the Committee, especially given the recent announcement that home test kits will be available for delivery. Another member added that their program had been admitting potential recipients earlier to ensure adequate testing time, and that, for those potential recipients, they had an expedited lab pathway to return quick results.

A member inquired what different programs were doing about personal protective equipment (PPE). Another responded that they were not requiring N95 grade masks, but did require masks that fit better than standard surgical masks. A second member added that their program did require N95 grade masks, as well as eye and face shields. This was done because their team does see unvaccinated patients and cannot afford to lose staffing due to COVID infection.

The question was also posed as to whether there were any plans to create screening criteria for match runs for programs who would refuse a COVID positive donor every time. Staff responded that there were not any plans at present, but would inquire as to whether that will be considered in the future. The ability to screen based off COVID results was supported by a number of Committee members.

Upcoming Meeting

• February 16, 2022

Attendance

• Committee Members

- Stacy McKean
- Lindsay Barker
- o Donna Campbell
- o Jill Campbell
- o Lisa Gallagher
- o Rosa Guajardo
- o Sharon Klarman
- o Angele Lacks
- o Heather Miller-Webb
- Kelsey McCauley
- o JoAnn Morey
- o Jaime Myers
- o Stacy Sexton
- o Melissa Walker
- o Rachel White

• HRSA Representatives

- o Arjun Naik
- o Raelene Skerda

UNOS Staff

- o Brooke Chenault
- o Isaac Hager
- o Tina Rhoades