

# OPTN Board of Directors Ad Hoc Meeting Summary

## Meeting Information: Agenda and Attendees

Friday, November 7, 2025 | 1:00–2:30 p.m. ET | Location of Event: Zoom

The following is a meeting summary from the OPTN Board of Directors meeting, which took place on **November 7, 2025, 1:00–2:30 p.m. ET.**

### Agenda

#### Open Session

- Welcome
- OPTN Directive to Reduce the Risk of Donor Derived Rabies Transmission Policy Proposal- Vote
- HRSA Directive for OPTN Donation after Circulatory Death (DCD) Policy Drafting Update
- Normothermic Regional Perfusion (NRP) Overview and Work Group Update
- Update on Lung Continuous Distribution Policy
- Brief Updates on Other Timely Patient Safety Issues
- Announcements
- Adjourn

### Attendees

Attendee Name(s)	Affiliation
John Magee (President), Shelley Hall (Vice President), Alan Reed (Treasurer), Justin Wilkerson (Secretary), William (Bill) Ryan (Vice President for Patient and Donor Affairs), Gina Marie-Barletta, George Bayliss, Jen Benson, Vincent Casingal, James Cason, Kenneth Chavin, Ari Cohen, Andrew Courtwright, Ryan Davies, Meelie DebRoy, Nahel Elias, Samantha Endicott, Joshua Gossett, John Hodges, Darren Lahrman, Kevin Lee, Reynold Lopez-Soler, Joseph Magliocca, Jerold Mande, Dan Meyer, Cathi Murphey, Annette Needham, Peter Nicastro, Robert (Cody) Reynolds, Austin Schenk, Kymberly Watt	OPTN Board of Directors
Brianna Doby, Mesmin Germain, Sarah Laskey, Raymond Lynch, Joni Mills, Nolan Simon	HRSA Representatives
Doug Fesler	OPTN Executive Director
Christine Jones, Rachel Shapiro, Vanessa Amankwaa, Tennille Daniels, Jady Dunning, Eli Greenspan, Surakshya Karki, Tessa Kieffer, Mona Kilany, Anthony LaBarrie, Mary Lavelle, Markus Louis, Taylor Melanson, Christina Sledge, Zulma Solis, Lee Thompson	OPTN Board Support Staff
Carly Rhyne, Kaitlin Swanner	OPTN Operations Contractor

Attendee Name(s)	Affiliation
Marie Budev, PJ Geraghty, Matthew Hartwig, Dennis Lyu, Stephanie Pouch	OPTN Committee Representatives

## Meeting Summary

### Welcome

The OPTN Executive Director, Doug Fesler, convened the open session and confirmed quorum. The OPTN Board President (“President”) John Magee opened the meeting by acknowledging that the meeting is an open session and is being livestreamed to the public. In an effort to foster more direct engagement, Magee asked Board members to raise their hands to speak and only use the chat feature to report technical issues.

### *OPTN Directive to Reduce the Risk of Donor Derived Rabies Transmission Policy Proposal*

Stephanie Pouch, Chair, Ad Hoc Disease Transmission Advisory Committee (DTAC), presented a proposed policy to address the HRSA directive requiring the OPTN to reduce the risk of donor-derived rabies transmission in organ transplantation. The proposal aims to improve patient safety through new donor screening criteria, standardized data collection, and Centers for Disease Control and Prevention (CDC) consultation protocols.

#### **Key Policy Components:**

- Establishes criteria to identify donors with potential high-risk rabies exposures within the past 12 months.
- Requires organ procurement organizations (OPOs) and living donor programs to consult the CDC for any donor meeting these criteria.
- Mandates recipient notification and post-transplant monitoring.
- OPTN to revise data instruments for reporting and compliance.

#### **Discussion Highlights:**

- Concerns about costs of screenings and implementation were raised; Centers for Disease Control and Prevention CDC estimated nine high-risk cases per year.
- Informed consent documentation required; no signed consent currently mandated.
- Questions on CDC reporting and living donor privacy addressed.
- HRSA clarified the directive followed a complex 2024 rabies case requiring multi-state coordination.

Following the discussion, the Board voted on the following:

RESOLVED, that the Board has reviewed the “OPTN Directive to Reduce the Risk of Donor Derived Rabies Transmission” policy proposal and finds the proposal eligible for expedited action.

FURTHER RESOLVED, that the Board hereby authorizes the distribution of the policy proposal for expedited public comment for a length of 30 days.

**Final vote: 27 approve, 1 reject, 0 abstain.**

***HRSA Directive for OPTN Donation after Circulatory Death (DCD) Policy Drafting Update***

PJ Geraghty, Chair, Organ Procurement Organization (OPO) Committee presented the HRSA directive requiring new policies to safeguard DCD patients and improve family communication.

**Key Policy Elements:**

- Requires neurological reassessment every 12 hours and within 2 hours pre-withdrawal.
- Establishes process for requesting and reporting an unplanned DCD pause.
- Defines family information standards including NRP explanations and process transparency.
- OPOs to train staff and document pause procedures and outcomes.

***Discussion Highlights:***

- Discussion on consistent use of 'pause' versus 'suspend'.
- Calls for more standardization across OPOs.
- CMS and HRSA coordination reaffirmed.
- Clarification that guidance will be developed for implementation consistency.

**Next Steps: Proposal to return to Board during November 20, 2025 OPTN Board of Directors meeting for approval to send for expedited public comment.**

***Normothermic Regional Perfusion (NRP) Overview and Workgroup Update***

Magee reviewed HRSA's September 2025 directive establishing an NRP workgroup to assess ethical and clinical implications of NRP. NRP improves organ viability but raises ethical questions about the Dead Donor Rule and variable practices.

***Key Points:***

- Workgroup chaired by Geraghty, includes surgeons, ethicists, critical care experts, and donor family representatives.
- Charged with developing policies, data collection, and member education.
- Discussions emphasized inclusion of OPO and hospital perspectives.
- Future iterations to include more critical care and public stakeholders.

***Update on Lung Continuous Distribution Policy***

Matthew Hartwig, Chair, Lung Committee presented analysis on allocation out-of-sequence (AOOS) events and logistical complexity in continuous distribution (CD).

***Key Findings:***

- Number of centers per match run increased by 50% since CD implementation.
- AOOS often occurred early in match runs.

- Adjusting placement efficiency weighting could improve logistics but risks higher waitlist mortality.
- Committee recommends balanced changes guided by data and ongoing simulation modeling.

**Discussion Highlights:**

- Board members emphasized caution, data-driven review, and fairness across patient populations. AOOs oversight and multi-factor solutions remain priorities.

***Brief Updates on Other Timely Patient Safety Issues***

Magee and HRSA provided the following updates on patient safety issues:

- HHV-8 Update
  - HHV-8 identified as a transmissible risk through organ donation, notably liver and lung.
  - Enhanced recipient monitoring planned.
  - Positive HHV-8 donors will not be ruled out but tracked for post-transplant surveillance.
- Authorization granted to proceed on OPO Patient Safety Officer directive.
- CMS opened applications for FLMP Donation Service Area.

***Announcements***

- November 28 Office Hours canceled; potential to be rescheduled in December.
- December 12 meeting converted to virtual; shorter duration expected.
- COI disclosure forms due November 10, 2025.

**The next Board meeting will be held on November 20, 2025.**

***Adjourn***

The President thanked the Board of Directors for their engagement and adjourned the meeting.