

OPTN Transplant Coordinators Committee

Meeting Summary

March 10, 2025

Conference Call

Christine Brenner, RN, BSN, CPTC, CCTC, Chair

Heather Bastardi, RN, MSN, CPNP, Vice Chair

Introduction

The Transplant Coordinators Committee (“the Committee”, “TCC”) met via Citrix GoToMeeting on 03/10/25 to discuss the following agenda items:

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

1. Pancreas Continuous Distribution
2. Disease Transmission Advisory Committee (DTAC) - Clarify Requirements for Reporting a Potential Disease Transmission
3. Internal Discussion
4. Barriers Related to the Evaluation and Follow-Up of International Living Donors
5. Multi-Organ Allocation

1. Pancreas Continuous Distribution

The Committee did not make any decisions.

Summary of Presentation:

A member from the Pancreas Committee presented Pancreas Continuous Distribution updates.

Summary of Discussion:

The Committee thanked the speaker for the committee’s work on this update. The Chair queried how ketoacidosis or severe hypoglycemic events might be recorded or documented to the patient can benefit from medical urgency if possible. The Pancreas Committee Chair offered that patients can provided emergency room documentation or other documents that show hospitalization or that they suffered from a severe life-threatening event.

2. (DTAC) - Clarify Requirements for Reporting a Potential Disease Transmission

The Committee did not make any decisions.

Summary of Presentation:

A member of DTAC presented Clarify Requirements for Reporting a Potential Disease Transmission.

Summary of Discussion:

TCC members discussed that the proposed definition for sick patients is not clear enough for sick lung recipients, as some cultures are drawn pre-donation. The DTAC member responded that guidance documents will be updated along with this policy in order to clarify instances such as this.

3. Internal Discussion

The Committee did not make any decisions.

Summary of Discussion:

The Chair led a discussion around Data Advisory Committee (DAC) feedback regarding the TCC operations standardization checklist. The DAC urged TCC to root the checklist into policy, whether that be its own formal process, or tied to the DAC project check-ins for data collection. TCC leadership mentioned that they would like to keep the checklist optional rather than mandatory. A member said that all new TCC volunteers should be trained with the checklist to support project development across Committees. She mentioned that without a tool like the checklist, more projects might struggle with implementation, as they are not all considering the burdens on labs, hospitals, and organ procurement organizations for implementing policies. This member also said that this could be a tool for reviewing committee work. Members encouraged creation of a “TCC check-in,” utilizing the checklist as a development process for committee projects.

The Chair mentioned that TCC had been flagged for sponsoring a project that would update *OPTN Policy 3.5: Patient Notification* to add a requirement for notification related to patient inactivation. This would specifically be included into Policy 3.5 with patient notification requirements.

A member said that EPIC Systems is rolling out a new option to allow patients to view where they are in their process. Members mentioned that they had previously drafted language for another iteration of this project. Another member mentioned possibly creating a patient educational resource about waitlist statuses. A member mentioned that this policy should include the perspective of patient self-advocating while also balancing this with the abilities of programs to notify patients. A member said that the Center for Medicare and Medicaid Services policy requires patient notifications, and though not explicitly stated, this member said that waitlist status notifications are already incorporated into some programs.

4. Barriers Related to the Evaluation and Follow-Up of International Living Donors

The Committee did not make any decisions.

Summary of Presentation:

A member of AHIRC (Ad-Hoc International Relations Committee) presented the committee’s proposal.

Summary of Discussion:

The TCC Chair said she supports this proposal as someone who works in a border-city. She mentioned that there have been instances at her center where patients have found donors online and had to go through the process of getting the donor over to the United States. She said that guidance for these situations would be helpful. The AHIRC member said that the guidance document hopes to guide centers in cultural competency. Another member added that navigating international healthcare systems is one of the hardest parts of international living donation.

5. Multi-Organ Allocation

The Committee did not make any decisions.

Summary of Presentation:

A member of Multi-Organ Transplantation (MOT) presented the committee's proposal.

Summary of Discussion:

A member asked about how the match run would appear with multi-organ allocation, and the speaker clarified that the match run will look the same as it does now. One member mentioned allocation out of sequence, and the speaker replied that this proposal will require explanation in real time if organs are not placed in order. Another member gave support for high CPRA patients and living donors getting priority. A member added that liver patients should be high priority because they do not have life-sustaining technology like dialysis or cardiac/respiratory support while waiting for a transplant.

Upcoming Meeting

- April 17 2025

Attendance

- **Committee Members**
 - Kati Robinson
 - Robin Petersen-Webster
 - Ashley Cardenas
 - Karl Neumann
 - Whitney Holland
 - Brandy Baldwin
 - Eve Cabatan
 - Anne O'Boye
 - Christine Brenner
 - Katherine Meneses
 - Kenny Laferriere
 - Stewart Jusim
 - Heather Bastardi
 - Gertrude Okelezo
 - Stacy McKean
- **UNOS Staff**
 - Jamie Panko
 - Stryker-Ann Vosteen
 - Sarah Roache
 - Tamika Watkins
 - Cole Fox
- **Other Attendees**
 - Lisa Stocks
 - Rachel Miller
 - Oyedolamu Olaitan
 - Cynthia Forland