

**Interim Report of the  
OPTN/UNOS Transplant Coordinators Committee Meeting  
April 2, 2012  
Chicago, IL**

**I. Old Business**

Inactive Waitlist Management. The Committee was presented data to examine inactive registrations on the waiting list. As a result, the Committee decided to split into two working groups. The Education Working Group will meet next month to: a) plan a webinar and b) write a publication based on the data presented to us on April 2<sup>nd</sup>; and c) collaborate with the Patient Affairs Committee to define “inactive”.

The Policy Working Group will meet in June to: 1) review additional data requested during the April 2<sup>nd</sup> meeting on waiting list deaths for those waiting having an inactive status, then 2) decide on what the policy will be for: a) patient notification; b) listing requirements; c) time limit having an inactive status.

Additionally, the Committee will: 1) recommend that language be changed in all Policies to read “temporarily inactive” where “inactive” is currently written to eliminate existing confusion as temporarily inactive is also the term used throughout UNet; and 2) recommend that a column be added in UNet that gives a snapshot of inactive patients and how many days they are inactive from greatest to least when a center runs their reports. The committee agreed that this will assist centers in keeping up with their patients having an inactive status.

Data Collection Forms. The Committee was presented with information [who, what, why] on the Program Specific Report Risk Adjustment Models. As members on the Committee review the data collection form fields, several questions arise regarding which fields are more important than others etc. The Committee made a recommendation that a Task Force (comprised of surgeons, physicians and other transplant specialists) be created to standardize the definitions on all the data collection forms. The reason for this is because as Transplant Coordinator Committee members are reviewing these fields and suggesting modifications based on current practice, questions consistently pop up asking: 1) why are we asking for this information; 2) how is this information being used; and 3) is the information being asked being interpreted the same way by everyone filling out the field. The Committee believes that in order to make the data valid, standard definitions are necessary!

**II. New Business**

Policy Proposals Issued for Public Comment. The Committee reviewed and voted on the following:

1. OPTN Bylaws Substantive Rewrite of Appendix A: Application and Hearing Procedures for Members and Designated Transplant Programs. The Committee voted in full support [14:0:0].
2. Proposal to Update Data Release Policies (Policy Oversight Committee). The Committee voted in full support [14:0:0].
3. Proposal to Update and Clarify Language in the DCD Model Elements (OPO Committee). The Committee voted in full support [14:0:0].

4. Proposal to Document All Locally Assigned Unique Identifiers in the Donor Record (OPO Committee). The Committee voted in full support [14:0:0].
5. Proposal to Require Reporting of Unexpected Potential and Proven Disease Transmission Involving Living Organ Donors (Living Donor Committee). The Committee voted in full support [14:0:0].

### **III. Meetings**

The next Live Meetings are scheduled for May 22<sup>nd</sup> and June 26<sup>th</sup>. Agenda items will include reviewing and voting on the Policy Proposal out for public comment from the Liver Committee; discussing, as a full committee, the work of the two recently developed working groups: 1) policy and 2) education; and discussing the rationale behind having an inactive status option with a Kidney Committee member.

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