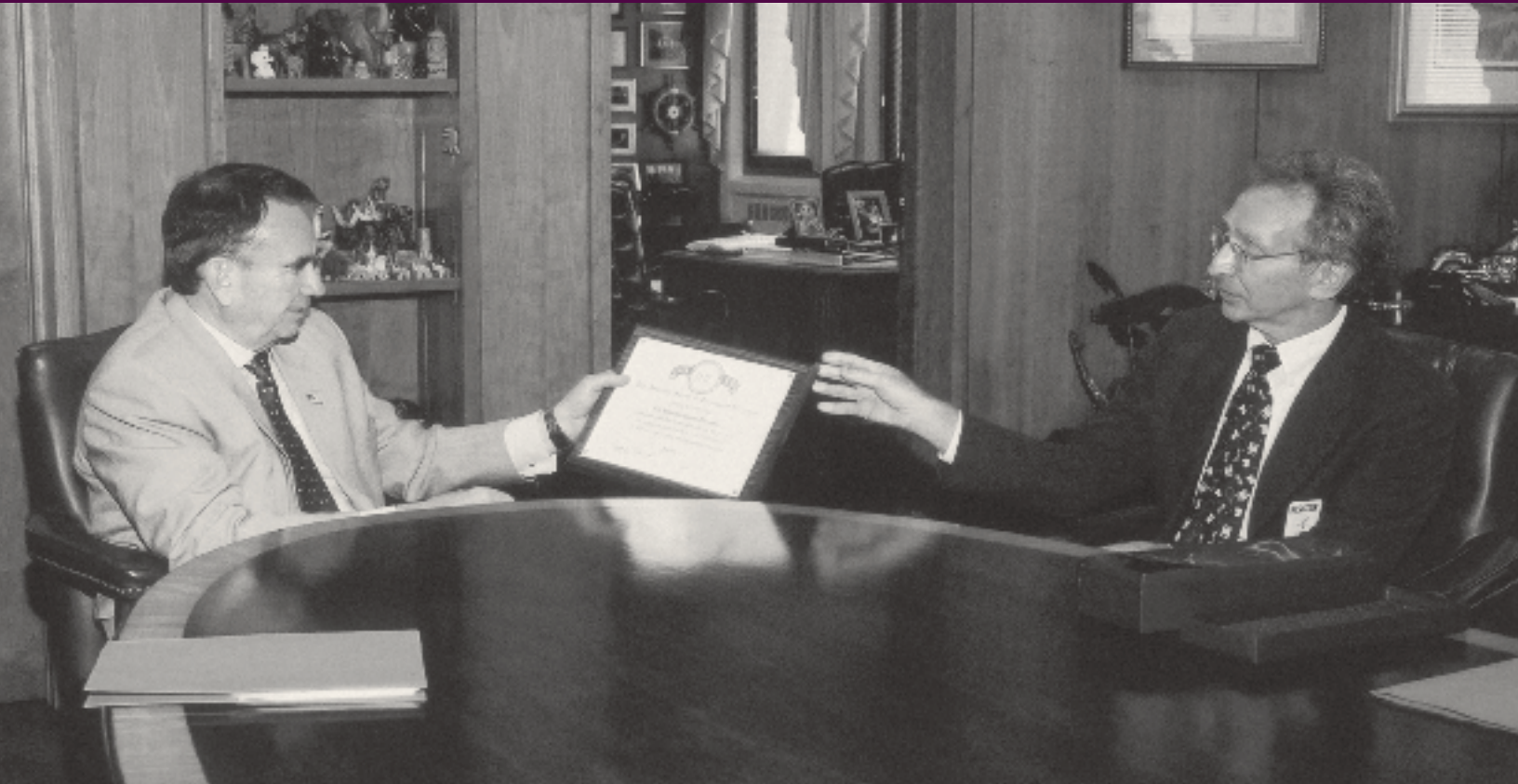


Vol. XV No. 4 Summer 2004

CHIMERA

Published Quarterly for Members of the American Society of Transplant Surgeons



CHIMERA
VOL. XV ✠ No. 4 ✠ SUMMER 2004

ASTS 
American Society of Transplant Surgeons

Letter from the President	1	American Transplant Congress	17
Letter from the Editor	2	ASTS 2004 Awards	18
Chimera News	5	ASTS 2005 Winter Symposium	20
Spotlight on Congressional Fly-In	8	ASTS New Members	21
Report from Washington	11	Calendar	21
Regulatory and Reimbursement Update	15	Research Bulletin Board	22
Code of Conduct of Organ and Tissue Recovery Personnel	16	Job Board	23
		ASTS Committees	25

ASTS BOARD OF DIRECTORS MAY 2004 - MAY 2005

PRESIDENT

Richard J. Howard, MD PhD (2005)
University of Florida
Dept. of Surgery, Rm. 6142
1600-6142 SW Archer Rd.
PO Box 100286
Gainesville, FL 32610-0286
Phone: 352-265-0606
Fax: 352-265-0678
Email: howard@surgery.ufl.edu

PRESIDENT-ELECT

A. Benedict Cosimi, MD (2005)
Massachusetts General Hospital
Dept. of Surgery
55 Fruit Street
Boston, MA 02114
Phone: 617-726-8256
Fax: 617-726-8137
Email: cpadyk@partners.org

IMMEDIATE PAST PRESIDENT

Abraham Shaked, MD PhD (2005)
University of Pennsylvania
Dept. of Surgery-4 Silverstein
3400 Spruce St.
Philadelphia, PA 19104
Phone: 215-662-6723
Fax: 215-662-2244
Email: shaked@mail.med.upenn.edu

PAST PRESIDENT

James A. Schulak, MD (2005)
Case Western Reserve University
Dept. of Surgery
11100 Euclid Ave.
Cleveland, OH 44106
Phone: 216-844-3020
Fax: 216-844-5398
Email: james.schulak@uhhs.com

SECRETARY

Arthur J. Matas, MD (2005)
University of Minnesota
Dept. of Surgery, Box 328 UMHC
420 Delaware St., SE
Minneapolis, MN 55455
Phone: 612-625-6460
Fax: 612-624-7168
Email: matas001@tc.umn.edu

TREASURER

Goran B. G. Klintmalm, MD PhD (2006)
Baylor Univ. Medical Center
Transplantation Services
3500 Gaston Ave.
Dallas, TX 75246
Phone: 214-820-2050
Fax: 214-820-4527
Email: gb.klintmalm@baylorhealth.edu

COUNCILORS-AT-LARGE

Robert M. Merion, MD (2005)
University of Michigan - KECC
315 West Huron, Suite 240
Ann Arbor, MI 48103-4262
Phone: 734-936-7336
Fax: 734-998-6620
Email: merionb@umich.edu

Francis L. Delmonico, MD (2005)
Professor of Surgery
Harvard Medical School
Director, Renal Transplantation
Massachusetts General Hospital
White Bldg. 505
Boston, MA 02114-2696
Phone: 617-726-2825
Fax: 617-726-9229
Email: delmonico.francis@mgh.harvard.edu

John P. Roberts, MD (2006)
Univ. of California-San Francisco
Division of Transplantation
505 Parnassus Ave., Box 0780 Rm. M896
San Francisco, CA 94143-0780
Phone: 415-353-1888
Fax: 415-353-8709
Email: robertsj@surgery.ucsf.edu

Mark L. Barr, MD (2006)
University of Southern California
Dept. of Cardiothoracic Surgery
1510 San Pablo St., Ste. 415
Los Angeles, CA 90033-4612
Phone: 323-442-5849
Fax: 323-442-5956
Email: mbarr@surgery.usc.edu

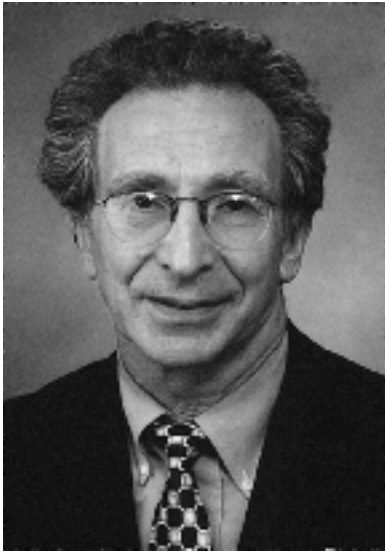
Thomas G. Peters, MD (2007)
Jacksonville Transplantation Center
Dept. of Surgery
580 W. 8th Street, #8000
Jacksonville, FL 32209
Phone: 904-244-9800
Fax: 904-244-9842
Email: tgpetersmd@hotmail.com

Stuart J. Knechtel, MD (2007)
University of Wisconsin Hospital & Clinic
Dept. of Surgery
600 Highland Avenue
Madison, WI 53792-7375
Phone: 608-263-2527
Fax: 608-262-6280
Email: stuart@surgery.wisc.edu

NATIONAL OFFICE

Katrina Crist, MBA
Executive Director
1020 North Fairfax Street, #200
Alexandria, VA 22314
Phone: 703-684-5990
Fax: 703-684-6303
Email: katrinacrist@earthlink.net

LETTER FROM THE p r e s i d e n t



Dear Friends,

First, I want to thank everyone for the privilege of serving as president of the ASTS. It is truly an honor and I hope I can live up to the fine examples of individuals who have previously served in this office. I can only promise my best effort. Please contact me if there is any concern, input, ideas, suggestions, complaints or otherwise you have.

The American Transplant Congress was held in Boston at the John B. Hynes Convention Center. It was an outstanding meeting. The Program Committee did an excellent job of putting together an interesting and comprehensive program from the submitted abstracts. Sixteen hundred and twenty-one (1,621) presented or had poster abstracts published in the American Journal of Transplantation abstract book. For the first time the ATC was held in a convention center since we have outgrown hotels due to our success. Since this is the 50th anniversary of the first transplant, which by the way was performed in Boston, it was fitting that the meeting was held there. Dr. Nicholas Tilney gave a lecture on the history of transplantation and Dr. Joseph Murray, who performed the first transplant, and his team were honored. There were more people at the 2004 ATC than ever before, 4096 attendees, with forty percent from outside North America. The number of individuals attending the meeting attests that the ATC is the most important transplant meeting in the world.

This past year the ASTS welcomed sixty-four new members. We now have nine-hundred and sixty-eight members. On June 8, 2004, ASTS presented Secretary of Health and Human Services Tommy G. Thompson with Honorary Membership in the ASTS during a special visit to his office. He now joins the select group of only fifteen other Honorary Members during the Society's thirty year history. We believe his great contributions to transplantation through his efforts during his tenure as Secretary were deserving of Honorary Membership. You should know that after we presented Secretary Thompson with Honorary Membership in ASTS, I was privileged to sit in his chair at his desk and he said I was now Acting Secretary. During those two minutes I tried to change the regulations about immunosuppressive coverage and to secure funding for the organ donor bill, but two minutes was just not long enough to get the job done. We will keep working on it.

As many of you know Gail Durant resigned from her job as Executive Director after serving the ASTS so well for six years. She will be missed but is staying on for a short while to help with the ASTS Foundation. We are very happy that Katrina Crist has returned to the role of Executive Director of the ASTS, a position in which she served from 1997-1999 before going to Boston where she was responsible for a major grant covering islet transplantation.

Thirteen members went to Washington, D.C. June 7-8, 2004 to meet with Members of Congress about appropriating money for the organ donor bill which was passed earlier this year and signed by President Bush in April. The bill calls for a total of \$25,000,000 to promote organ donation. While this is a lot of money, it is not even a rounding error in the total federal budget. We were told that the bill was signed late in the budget process and therefore was not included and the likelihood of its being funded was small. But members of the Appropriations Committee did seem amenable to having language inserted and would tell the Agency for Health and Research Quality that Congress thought this was important. We also look on this effort as the first phase of full funding for the bill in the next fiscal year and of a continuing effort that the ASTS plans to have with our lawmakers about matters relating to transplantation.

We are grateful to the efforts of a few members to challenge CMS's proposed rule for islet reimbursement in which acquisition costs would not be reimbursed on a "reasonable cost basis" and transplant costs would be assigned to clinically inappropriate DRGs. This proposal would be a challenge that would make it difficult for islet programs not to incur large debts for their hospitals. We are also grateful for the work Mike Abecassis has done in securing CPT codes for back bench work (preparing organs for transplantation which currently is not covered). The RUC is also going to value vascular reconstruction, so that also will now be covered.

I would like to remind everyone to plan to attend the ASTS Winter Symposium, "The Science and Art of Immunosuppression" which is arranged by the ASTS Vanguard Committee. It will be held January 21-23, 2005 at the Eden Roc Resort and Spa in Miami Beach, Florida. I look forward to seeing you in Florida.

Best Regards,

A handwritten signature in cursive script that reads "Richard J. Howard".

Richard J. Howard, MD, PhD
President



LETTER FROM THE EDITOR



Dear ASTS Member,

It is with great pleasure that we forward another issue of the Chimera for your review. As you know, the society is quite active in a number of areas and the Chimera is an important conduit for information dissemination concerning societal activities. It is anticipated that the Chimera will be published quarterly. As a publication of the society, we are most interested to know how we are doing in meeting your needs for information relevant to the field in general and your practice or area of research endeavor specifically. I invite you to comment on format and content directly to me so that we can incorporate your suggestions and maintain a high level of reader satisfaction. It is a pleasure to serve as your new editor.

With best regards,

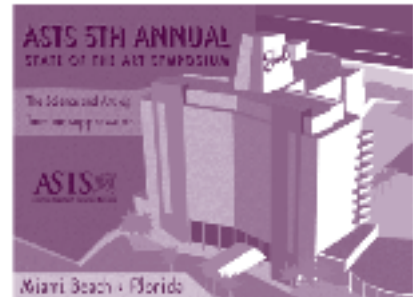
Ken Brayman
email: klb9r@virginia.edu



CALL FOR ABSTRACTS

American Society of Transplant Surgeons 5th Annual Winter Symposium “The Science and Art of Immunosuppression”

Eden Roc Resort and Spa, Miami Beach, FL
January 21-23, 2005



Call for Abstracts:

The American Society of Transplant Surgeons (ASTS) welcomes the submission of original abstracts for inclusion in The 5th Annual State of the Art Winter Symposium, scheduled for January 21 to 23, 2005 at the Eden Roc Resort and Spa in Miami Beach, Florida. This year's symposium is entitled 'The Art and Science of Immunosuppression'.

We encourage the submission of any and all clinical or basic science research exploring immunosuppression for solid organ or islet cell transplantation. Topics include, but are not limited to, individualization and minimization of immunosuppression, acute humoral rejection, chronic rejection, immunological profiling and monitoring, novel applications of standard immunosuppressive medications and new immunosuppressive agents in the “pipeline”. Outstanding abstracts will be selected for oral presentation.

Submission:

Beginning Monday, July 19, 2004 you can complete and submit your abstract via the internet through the ASTS website: www.astfs.org

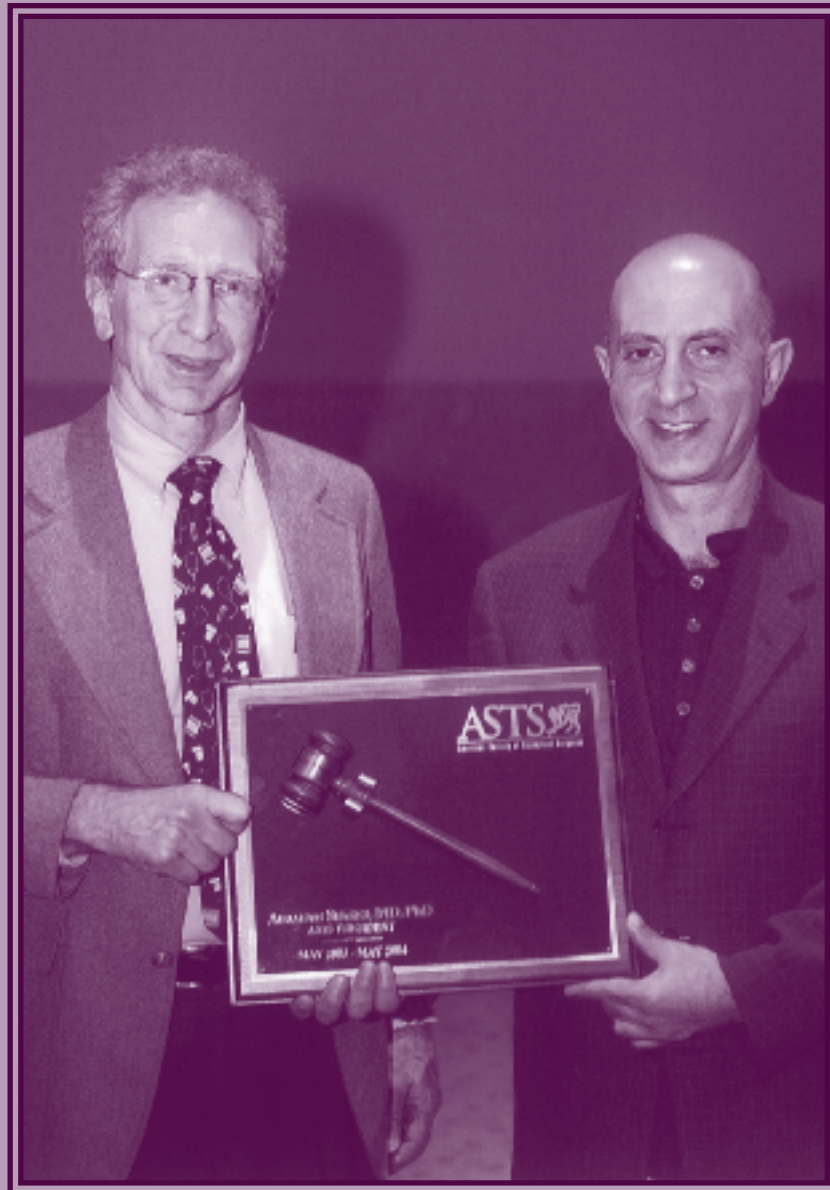
Review and Notification:

All abstracts are blinded for peer review and ranked on the basis of scientific merit. *You will be notified by early November 2004 whether or not your abstract has been accepted for either poster or oral presentation.*

All abstract presenters must register for and attend the ASTS Winter Symposium (registration is free for trainees, candidate, and junior ASTS members).

The deadline for abstract submission is Monday, SEPTEMBER 27, 2004, 6pm EST.

American Society of Transplant Surgeons
1020 North Fairfax St, #200, Alexandria, VA 22214
703-684-5990 www.astfs.org



ASTS President, Richard Howard, presents gavel and plaque to outgoing President, Abraham Shaked.

The ASTS Council and Committee Chairs met on May 15, 2004 prior to the American Transplant Congress in Boston. In addition the ASTS Members Business Meeting was held May 17, 2004. The following are reports from these meetings:

ASTS Awards Committee: Dr. Thomas Peters reported that due to the fact that no one applied for the two ASTS Roche Travel Awards this year and it was felt that the age limitation contributed to this factor, the Council voted to remove the age limitation. Dr. Peter's also noted that the ASTS Awards is the largest budget expenditure item of the Society.

ASTS Bylaws Committee: ASTS President, Dr. Abraham Shaked presented the following four bylaws proposals for approval of the Membership:

1. Development of Specific Language to Describe ASTS Executive Committee: To be Article III, Section 13: The ASTS Executive Committee consists of six officers which are the current ASTS President, President Elect, Secretary, Treasurer, Immediate Past President and Past President.
2. Remove age criteria for senior Members to receive reduced dues: Article IV, Section 4: Senior Members will not serve as Officers or on Committees of the Society, but will participate in all other functions of the Society. Senior Members will be (remove wording in bold) **all those above the age of 65**, (add underlined wording) those who so elect and others with special justification submitted in writing to the Committee on Membership to become Senior Members and approval of Council. Senior Members may attend annual meetings, may have a vote, and will have a reduction in dues as determined by Council.
3. Change Corresponding Membership to International Membership with rights of Regular Member: Article IV: Section 5: (Corresponding) International Members shall have the same qualifications as a Regular Member except that these applications shall be residents of countries other than the United States and Canada and shall have been invited to membership by recommendation of three regular members to the Membership Committee and approved by the Council. (A Corresponding Member shall not have the privilege of voting and holding office)
4. Make Ad Hoc Committee on Reimbursement a standing committee of the Society: Proposed the formation of standing committee entitled: ASTS Committee on Reimbursement.

Bylaw changes in () are to be deleted and wording underlined is to be added.

A motion was made that the above four proposed bylaws changes be approved, the motion was seconded and passed.

ASTS Cell Transplantation: Dr. Camillo Ricordi reported that the committee is working on a new islet demonstration project that would be funded by CMS and NIH. Also the committee is addressing with other entities the proposed islet transplantation regulations.

ASTS Education Committee: Dr. Mitch Henry reported about the ongoing reaccreditation and new accreditation of transplant programs by the Committee. Dr. Sandy Feng joined Dr. Henry to report on the Match Program for transplantation that ASTS is initiating (more details follow on page 7). The goals of the program are to standardize a process and communication by which candidates select programs and programs select candidates and to standardize and telescope time frame between decision-making and start date. Dr. Feng and Dr. Henry outlined the process and requirements. They are proposing an Institute of Transplant Fellowship Match for positions matriculating in July 2006 and participation in the match will be a prerequisite for ASTS certification of fellowship programs.

ASTS Ethics Committee: The committee plans on conducting five projects this year. Dr. Douglas Hanto stated that they are: 1) financial disincentives project that will include a survey; 2) Ethics program at the winter symposium; 3) donor registry with standards on organ procurement committee; 4) expert witness policy; and, 5) surrogate consent. Dr. Hanto noted that the committee discussed addressing the international component of ethics such as buying organs in other countries.

CHIMERA

ASTS Reimbursement Committee: Dr. Michael Abecassis reported on the three codes that ASTS worked to have added for reimbursement for living transplantation procedures as of January 4, 2004. He next reported on editorial changes he is working on with the AMA Editorial Committee to all donor codes. In addition the committee is working on adding back bench codes for reimbursement. They are addressing practice expenses for all transplant codes and are working with RUC on practice expense RVUs and liability RVUs. Finally the committee is working with the ASTS Cell Transplantation Committee on reimbursement for islet transplantation.

ASTS Scientific Studies: Dr. Giacomo Basadonna noted that the scientific studies committee is planning a retransplantation conference.

ASTS Standards on Organ Procurement: Dr. Richard Freeman reported on the committee's work regarding CMS' upcoming proposed regulations and that ASTS will be responding. Also, the committee is reviewing the organ donation bill to identify areas that ASTS can submit proposals.

ASTS Legislative Committee: Dr. John Roberts advised Members of an ASTS legislative day to be held June 8, 2004 in Washington, DC. Invitees will attend an education session on how to visit members of Congress. They will also be updated on appropriations for the Organ Donor Bill which they will be discussing during Hill visits with their Members of Congress and their staff.

ASTS Vanguard Committee: It was reported by Dr. Sandy Feng that over 270 registrants attended the ASTS Winter Meeting in 2004. There were 105 registrants for the pre-meeting clinical research program. The committee plans on conducting a basic science program every other year. NATCO will be holding their instructional meeting in parallel with the ASTS winter meeting allowing both societies' registrants to attend the other's meeting for a small fee. Dr. Feng also reported that the database project is in phase two and members will be sent instructions in the near future on how to provide additional information to their profile.

ASTS Thoracic Committee Report: Dr. Mark Barr reported that The Thoracic Committee worked with the STS once again this year on the 4th Annual joint ASTS/STS Symposium at the Society of Thoracic Surgeons meeting in San Antonio in January 2004. There were approximately 150 attendees. The ASTS Thoracic Committee will be working with Robert Higgins and UNOS in regards to the ACOT Heart Utilization Initiative. The ASTS Thoracic Committee and ASTS regulatory counsel, Rebecca Burke, will be working with JCAHO on development of Medicare standards for facilities doing destination ventricular assist device implants.

ASTS Nominating Committee: Dr. Shaked presented the following slate proposed by the Nominating Committee for consideration: President Elect: A. Benedict Cosimi; ASTS Councilors for terms ending in 2007: Thomas G. Peters and Stuart Knechtle. A motion was made to accept the nominees as presented. The motion was seconded and approved.

In closing: Dr. Howard presented Dr. Shaked with a plaque and gavel and thanked him for all his work during his term as ASTS' 30th President. He next presented Gail Durant with a gift from the Council for her work as ASTS Executive Director and introduced Katrina Crist the new ASTS Executive Director.

ASTS Transplantation Match Program

Premises

- There is no standard process by which candidates select programs or by which programs select fellows
Wide variability in time and process
- “Early” commitments are vulnerable to plan changes
A decision, typically by a candidate, to break a commitment can disruptively ripple through many programs and other candidates.
- There is no fundamental reason why selection of transplant surgery programs or fellows differs from other subspecialties, most of which utilize a match.

Goals of a Match

- Standardize process and communication by which candidates select programs and programs select fellows
Clarify expectations
- Standardize and telescope timeframe between decision-making and start date
Decrease frequency of “mid-course corrections”

Process

- 9/03: Match proposal brought to ASTS Council and Committee Chairs Meeting by Vanguard and Education Committees
Council requested polling the opinions of fellowship program directors
Overall, proposal WELL-RECEIVED (predominantly positive responses; only 2 negative responses)
- 1/04: Proposal endorsed by ASTS Council
Agreement to present to full membership during ATC Charge to examine details of set - up with goal to implement for fellowships beginning July 2006

Facts

- Non-ACGME - accredited specialties can participate in a NRMP match.
- Requirements to participate:
 - ≥75% of all fellowship programs
 - ≥75% of each program’s positions
- Most matches occur, on average, 12 months, prior to program initiation.
- ASTS=the sponsoring organization.

Fees

- Sponsoring Organization (ASTS): \$0
- Each fellowship program
 - \$250.00 institutional fee
 - \$25.00 program fee
 - \$25.00 for each matched candidate
- Each applicant: \$65.00

Proposal

- Institute a Transplant Surgery Fellowship Match for positions matriculating in July 2006
Match run would occur Spring 2005
- Participation in the match will be a prerequisite for ASTS certification of fellowship programs

Implementation

- ASTS compiles a list of all available training positions for submission to NRMP to set up the first match
Multiple “training tracks” possible for each institution
Specify the type of training offered (liver ± kidney ± pancreas)
Number of positions for each training track
- Once match is established, programs will interact annually with NRMP to confirm participation and specifics regarding available training positions

Spotlight on Congressional Fly-In

By John P. Roberts, M.D., Chair, Legislative Committee

Peter W. Thomas, Esq., Legislative Counsel and Dustin W. C. May, Legislative Director

On June 8, 2004, eighteen ASTS members began an effort to develop long-term relationships between ASTS members and Congressional leaders and, as a legislative priority for 2004, educated Congress on the new organ donation law and the importance of full funding in FY 2005.

ASTS members met with 40 Congressional offices and Administration officials, including the offices of Senate Majority Leader Frist, Chairmen of the full and subcommittees of the House and Senate Appropriations Committees and key individual members of the committees, and the Agency for Healthcare Research and Quality. The day concluded with a ceremony honoring Secretary of Health and Human Services Tommy Thompson.

Because the new organ donation law was enacted after the release of the President's FY 2005 budget proposal, the need to educate lawmakers on the new law was paramount at the meetings. The FY 2005 budget included level-funding for Department of Transplantation and no dedicated funding for transplant research at the AHRQ.

Individual transplant surgeons met with Senator Arlen Specter in a morning breakfast fundraiser that donated to his reelection effort. Specter is Chairman of the Senate Appropriations Subcommittee that has oversight for funding of the organ donation bill. ASTS members discussed the challenges impacting the field of transplantation, organ donation, and the importance of funding the Organ Donation and Recovery Improvement Act in FY 2005.

ASTS has been working directly with Senator Specter's office, on including "report language" in the FY 2005 Labor, HHS, and Education appropriations bill. The report language is intended to accomplish two major ASTS goals: 1) Direct specific funding within the AHRQ toward the organ donation research provisions of the organ donation law; and, 2) Direct the AHRQ to partner with ASTS and other transplant organizations on development of a scientific network for the study of organ retrieval and preservation. It is hoped that getting a small amount of funding for this bill, such as 2 million dollars to fund the AHRQ initiative, would be an important step in eventually getting the bill funded to a greater extent in future years.

ASTS members were successful in establishing relationships with federal lawmakers, including each Chairman of the key House and Senate Appropriations Committees and Subcommittees, Senator Ted Stevens (R-AK, Full Committee), Senator Arlen Specter (R-PA, Labor, HHS, Education Subcommittee), Congressman Bill Young (R-FL, Full Committee), and Congressman Ralph Regula (R-OH, Labor, HHS, Education Subcommittee). ASTS also met extensively with other influential members of the House and Senate Appropriations

Subcommittees, such as Congressman Dave Weldon (R-FL), a physician member of Congress. Congressman Weldon's office has agreed to request that the House Appropriations Subcommittee include the ASTS-drafted report language.

In addition to educating members of Congress on the organ donation law, ASTS members also engaged Congressional members on issues relating to immunosuppressive coverage under Medicare. Several ASTS leaders also participated in a well-attended Congressional briefing (underwritten by Roche) on transplant issues hosted by ASTS and other major transplant organizations.

Next Steps

- ASTS should aggressively continue efforts to work with Congressional champions to ensure that the organ donation law is funded and that ASTS-specific report language is included in the final bill.

We would ask that ASTS members initiate and continue their communications with members of Congress and re-emphasize the importance of full funding of the organ donation law. This could occur when the full Labor, HHS, Education bill is scheduled for consideration in the subcommittee.

- Continue to monitor the status of the House and Senate Appropriations process and report to ASTS as necessary.
- Schedule a meeting with HRSA's Division of Transplantation to discuss implementation of the new organ donation law's authorizations.

Our Perspective

Looking back on the first ASTS Legislative Day, we believe that the event was a success in beginning long-term relationships with federal lawmakers and engaging key members of Congress on funding for the new organ donation law. Though the event was planned on relatively short notice and resulted in some logistical challenges, ASTS led the efforts of transplant organizations in Washington, DC to engage Congress on funding the new organ donation law. ASTS members increased their visibility within Congress as leaders in transplantation. Ongoing relationships will need to be maintained to carry on our reputation as leaders in the transplant community and ensure success of our legislative priorities in the future. We ask that any members interested in participating in this process contact Katrina Crist at ASTS. 🐉

ASTS Members visited Secretary of Health and Human Services Tommy Thompson during a day of visits to Capitol Hill.



ASTS Members meeting with HHS Secretary Thompson who asks ASTS President Richard Howard to sit at his desk. Standing behind Dr. Howard from left to right are Niraj Desai, Kenneth Chavin, Douglas Hanto, Secretary Thompson, Richard Thistlethwaite and Peter Thomas.



ASTS President Richard Howard presents HHS Secretary Tommy Thompson with an award from the Society commending the Secretary on his efforts on behalf of transplantation.



HHS Secretary Tommy Thompson gives ASTS representatives a tour of the HHS situation room. From left to right: Secretary Thompson, Niraj Desai; Kenneth Chavin, Richard Howard, Richard Thistlethwaite; Douglas Hanto in back, Peter Thomas and Katrina Crist.

The spring and early summer have been very eventful for ASTS priorities in transplantation. Of greatest significance is the final enactment of the “Organ Donation and Recovery Improvement Act,” which was signed into law by President Bush on April 5, 2004. Its enactment marks the culmination of three years of efforts by ASTS and its members to secure meaningful organ donation improvement legislation. Subsequent to enactment, ASTS organized its first “Legislative Day” in Washington, DC, to directly engage federal lawmakers on the importance of transplantation, funding the new organ donation law, and educating Congressional members and staff on immunosuppressive coverage. While in Washington, DC, ASTS honored Secretary of Health and Human Services Tommy Thompson for his efforts to increase organ donation and bestowed upon him honorary membership in ASTS, only the 16th honorary member in ASTS history.

In addition to the organ donation law, other issues in Congress are also of concern. The debate over fixing the Medicare physician payment formula is intensifying, setting the stage for a legislative fix as early as next year. Medicaid reform is also being hotly debated with an eye toward a greater reliance on “block grant” funding mechanisms. Finally, Congress is considering three other major health care issues that could impact physicians and consumers without health insurance: medical malpractice reform, health savings accounts and association health plans.

Organ Donation and Recovery Act Signed into Law

On April 5, 2004, President Bush signed into law the “Organ Donation and Recovery Improvement Act.” This legislation will assist current efforts by the federal government, states, and other entities to promote organ donation, reduce the waiting list, provide for travel and subsistence reimburse-

ment for living donors, fund hospital-based organ coordinators, and improve the practice of organ recovery, preservation, and transportation.

The legislation was originally introduced by Senate Majority Leader, transplant surgeon, and ASTS member William Frist, MD (R-TN) and subsequently introduced in the House by the Chairman of the Energy and Commerce Health Subcommittee, Michael Bilirakis (R-FL). The law was developed in close consultation with ASTS and marks the culmination of three years of efforts to secure enactment of new legislation.

Overall, the new law authorizes \$23 million in new funding for the Health Resources and Services Administration Division of Transplantation (DoT) and \$2 million for the Agency for Healthcare Research and Quality (AHRQ). This is new funding for DoT, over and above \$25 million in current funding for organ donation activities. The AHRQ authorization also represents new funding for organ donation research.

The \$23 million authorized for DoT is broken down into specific funding authorizations for the following:

- \$15 million in new funding for grants and demonstration projects to more effectively promote organ donation.
- \$5 million in new federal funding for the reimbursement of travel and subsistence expenses for living donors.
- \$3 million to provide grants to hospital-based “organ coordinators” that can increase the rate of successful organ donations and transplants.

All of these programs are new and are in addition to the existing \$25 million appropriation for the DoT. In addition to current and new authorizations, DoT is also authorized—but not explicitly funded under the new law—to establish and maintain mechanisms to evaluate the long-term effects associated with living donation. There are also several new studies mandated under the new law that are also not expressly funded, such as studies on state donor

ASTS is developing specific projects and recommendations that could be funded from AHRQ's new authorization.

registries, evaluations of living donation practices, and federal coordination of organ donation efforts.

The new law authorizes an additional \$2 million for studies by the AHRQ into existing and new methods for organ recovery, preservation, and transportation. ASTS engaged in the development of this section because there is tremendous potential to maximize existing donation practices in the areas of both health services and medical research.

Specifically, the new law tasks AHRQ to work with relevant professional societies, such as ASTS, to develop the following:

- A uniform clinical vocabulary for organ recovery;
- Application of information technology and telecommunications to support the clinical operations of organ procurement organizations;
- Enhancement of the skill levels of the organ procurement workforce in undertaking quality improvement activities; and
- Assessment of specific organ recovery, preservation, and transportation technologies.

ASTS is working directly with policymakers in Congress and the Administration to be a leader in these new areas of research. Specifically, ASTS is developing specific projects and recommendations that could be funded from

AHRQ's new authorization. One such project is the development of a formal mechanism to scientifically evaluate the efficacy new medications, devices, surgical techniques, and technical innovations that are being developed to improve organ preservation and maximize organ usage.

ASTS Legislative Day Highlights Funding for Organ Donation Law

On June 8, 2004, 18 ASTS members, led by President Richard Howard, MD, PhD, met in Washington, DC, to engage and educate members of Congress and members of the Bush Administration on two key ASTS priorities—funding for the new organ donation law and Medicare immunosuppressive drug coverage. ASTS members met with 40 Congressional offices and Administration officials, including the office of Senate Majority Leader Frist, key members of the House and Senate Appropriations Committees, and the Agency for Healthcare Research and Quality. The day concluded with a ceremony honoring Secretary of Health and Human Services Tommy Thompson.

The main purposes of the Legislative Day were to build long-term relationships between ASTS members and Congressional leaders, educate them on the new organ donation law and the importance of full funding in Fiscal Year (FY) 2005, which begins October 1, 2004. Because the new organ donation law was enacted after the release of the President's FY 2005 budget proposal,

the need to educate lawmakers on the new law was paramount at the meetings. The FY 2005 budget included level-funding for DoT and no dedicated funding for transplant research at the AHRQ. Irrespective of the President's budget, which serves as recommendation to Congress on the Administration's funding priorities, Congress must still appropriate funding for the DoT and AHRQ and fund the newly created authorizations under the organ donor law.

ASTS met with Senator Arlen Specter, Chairman of the Senate Appropriations Subcommittee that funds organ donation programs, and discussed the challenges impacting the field of transplantation, organ donation, and the importance of funding the Organ Donation and Recovery Improvement Act in FY 2005. Following the successful meeting with Senator Specter, ASTS members engaged key staff members of the relevant Appropriations Subcommittee in the House of Representatives and the full Senate and House Appropriations Committees. ASTS also met extensively with other influential members of the House and Senate Appropriations Subcommittees, such as Congressman Dave Weldon (R-FL), a physician member of Congress.

In addition to discussing the overall importance of funding the organ donation law, ASTS engaged Senator Specter and other key members on specific initiatives ASTS could undertake as a result of the new law. As discussed in many of the meetings during the Legislative Day, ASTS is working to

ASTS will continue to build and strengthen relationships between its members and their elected officials in order to educate Congress on transplant-related issues.

secure the inclusion of “report language” in the final appropriations bill. This language would promote dedicated funding for transplantation research at the AHRQ. It would also enable AHRQ to work with ASTS to develop a scientific network for the study of organ retrieval and preservation.

ASTS met directly with a lead official at the AHRQ, Stanley Edinger, on specific initiatives that the AHRQ expects to undertake with the new organ donation law. Although Mr. Edinger cautioned that it was too early to know precisely how much funding would be allocated in FY 2005—and therefore, how much could be done—he was eager to listen to and work with ASTS leaders in the future on transplantation research.

In addition to educating members of Congress on the organ donation law, ASTS members also engaged Congressional members on issues relating to immunosuppressive coverage under Medicare. Currently, Medicare limits coverage for immunosuppressive drugs to 36-months for ESRD-Medicare eligible kidney transplants and excludes coverage under certain circumstances for all other transplants, for instance if the transplant was not covered by Medicare. A chart detailing the exclusions of coverage can be obtained by visiting the ASTS website at <http://www.asts.org/immunochartrevised.cfm>. ASTS members encouraged Congressional leaders to build support for legislation that would fill the gaps in coverage for immunosuppressive drugs under Medicare and, thus, prevent rejection or retransplantation.

At the end of the Legislative Day, ASTS honored Secretary of Health and Human Services Tommy Thompson for his myriad accomplishments and dedication to promoting organ donation by bestowing upon him honorary membership in the ASTS. In addition to supporting the recent Organ Donation and Recovery Improvement Act, Secretary Thompson initiated the HHS Gift of Life Initiative, which has raised awareness of organ donation and promoted the advancement of transplantation over the past three years.

Physician Fee Schedule Debate Intensifies

Over the last several months there has been increased debate over the projected decreases in physician payments under Medicare, access to physician services and the future of the current flawed payment formula, known as the “sustainable growth rate” (SGR), being used to determine the reimbursement. Currently, the SGR uses a formula that takes into account historical and projected averages of physician payments over a 10-year window to determine Medicare physician reimbursement rates. However, in recent years the SGR formula has lowered physician payments as the volume and intensity of Medicare services rapidly increases.

The recent Medicare law contained a provision that overrode a projected cut of 4.5% in 2004 and similar cuts in 2005 so physicians will generally see a fee increase of 1.5% for

both years. However, such legislative actions only perpetuate sharper decreases in payments for future years indicating that a permanent solution is needed.

Congressional hearings continue to be held on the subject and physician groups, along with ASTS, have been engaged in Congressional sign-on efforts to pressure Congress to correct the SGR formula. Although it appears a solution is not in the offing this year, a solution may be incorporated into a Medicare bill next year.

Medicaid Reform Update

Medicaid remains a popular topic of interest within Congress, as the Administration continues to assert pressure on CMS and Congressional leaders to reduce “waste, fraud, and abuse” in the Medicaid system. The final FY 2005 Budget Reconciliation passed by the House and possibly scheduled for consideration in the Senate during June does not include specific reconciliation instructions to find savings in the Medicaid program. Suggested cuts ranging from \$2.2 billion in the House to \$11 billion in the Senate floated around Capitol Hill for months, indicating a growing desire to reduce the entitlement program’s spending. In the end, however, efforts by many consumer and provider groups, as well as the National Governors’ Association, helped stop future direct cuts to Medicaid spending.

Since Medicaid reform will not likely occur this year, the Bush

Administration is stepping up efforts through current law to reign in Medicaid spending. One way the Administration plans to garner such Medicaid savings is by reducing states' "creative" uses of Intergovernmental Transfers (IGTs). Numerous states have historically found inventive ways to obtain and use these federal funds, often for purposes for which they might not have been intended, creating Medicaid systems where the federal government is providing much more than their share of costs. Recent statements by CMS Administrator Mark McClellan indicate that the agency not only plans to reduce IGTs, but also limit the entities that provide these funding transfers.

In a related cost savings initiative, it appears that CMS has begun negotiations with several states, particularly those with significant financial trouble or federal debt, to implement caps on federal Medicaid funds. States such as New Hampshire are using the Section 1115 Medicaid waiver authority, originally designed to implement Medicaid demonstration programs, to create these "block grant" systems. Many consumer and provider groups are opposed to these initiatives because the likely reduction in federal contributions will reduce the quantity and quality of Medicaid services and strip the program of its basic entitlement. However, the Administration sees these new initiatives not only as ways to reduce abuse in the system, but opportunities for states to increase their flexibility in determining eligibility requirements and services.

As the number of legislative days remaining in the 108th Congress tick away, it appears less and less likely that Medicaid legislation will be enacted. However, with the government's continuing effort to change the system without passing legislation, it is likely that we will continue to see changes in the program throughout the remainder of the year.

Bush Administration's Health Care Initiatives Targeting the Uninsured

Outlined in the President's State of the Union Address in January, the Bush Administration, through its Congressional allies, have remained dedicated to introducing legislation that targets three separate health care initiatives, all touted as ways to combat rising health care costs and reduce the number of uninsured.

Medical-Malpractice Reform: On May 12, 2004, this House of Representatives passed, for the second time, legislation that would cap non-economic damages in medical malpractice suits at \$250,000. Supporters of the bill state that such tort reform legislation will reduce the cost of physicians' malpractice insurance leading to a reduction in overall health care costs. Medical malpractice legislation has been introduced by Senate leaders twice this year, although, unlike the House, the Senate has not produced enough votes to pass a bill.

Health Savings Accounts: Expanded through the recent Medicare law, health savings accounts (HSAs—formerly MSA's, or Medical Savings Accounts) have been touted as an opportunity for employees to save on health care expenses by setting aside earnings, tax-free, to subsidize health insurance deductibles. Under the new provisions, employees may only use such funds for the deductibles on catastrophic insurance coverage (\$1,000 for individuals and \$2000 for families). However, recent legislation passed by the House, would allow employees with Flexible Spending Accounts (FSA), which are untaxed savings set aside for medical expenses that are not covered by an employee's insurance, to place up to \$500 at the end of a year into a health savings account. Currently, an employee must forfeit any money left in their FSA at the end of each year. The Senate has

yet to take action on this legislation.

Association Health Plans: The Bush Administration has expressed strong support for legislation that would allow small businesses to join together to form association health plans (AHPs) and purchase health insurance as a single group. Supporters of AHPs feel that the pooling of resources will lead to a reduction in the number of firms that fail to offer health insurance to their employees. However, those opposed fear that AHPs exemptions from state health insurance mandates will create plans that exclude coverage for the most needy and at-risk employees.

These three proposals impact physician and other providers significantly differently than they impact consumers of health services, particularly enrollees with disabilities and chronic illnesses. It is unlikely in the election year that any of these proposals will become law.

Conclusion

ASTS continues to be a national leader on transplant issues, particularly with enactment of the Organ Donation and Recovery Improvement Act. Although the new law marks a key victory for patients and for the advancement of transplant science, it is only the first step toward quick implementation of the newly created programs. ASTS will continue to build and strengthen relationships between its members and their elected officials in order to educate Congress on upcoming transplant-related issues. As the FY 2005 appropriations bills move forward, ASTS also will continue to work with Congress and the Administration as appropriate to ensure the highest possible funding level this year for organ programs. ✎

Prepared by Peter Thomas and Dustin May, ASTS Legislative Counsel, Powers Pyles Sutter and Verville

Regulatory and Reimbursement Update

Over the past several months, ASTS has been involved in several efforts to improve coverage and payment for transplant-related services. These efforts have been in the areas of reimbursement for immunosuppressive drugs, payment for physician services, hospital reimbursement for pancreatic islet cell transplants, development of new regulations for Medicare certified transplant centers and facility standards for centers performing LVAD implants.

Medicare Payment for Pancreatic Islet Cell Transplants

The Medicare Prescription Drug, Modernization and Improvement Act of 2003 requires the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) to conduct a clinical investigation of pancreatic islet cell transplantation that includes Medicare beneficiaries. It also requires that Medicare pay for the costs of those Medicare beneficiaries who participate in the clinical trial to the same extent that transplantation of other organs is covered by Medicare.

CMS has proposed a reimbursement methodology for pancreatic islet cell transplantation that ASTS believes deviates substantially from longstanding Medicare payment policy for transplants and will result in payment that is significantly below transplant center costs of performing the procedure. Specifically, CMS is proposing to establish an “add on” payment for pre-transplant services, islet acquisition, and islet isolation rather than reimbursing for these services on the basis of the standard cost pass-through methodology generally applicable to solid organ acquisition. If adopted, this approach would establish a dangerous precedent that may threaten the current organ acquisition cost pass-through system over the long term. In addition, CMS is proposing DRG assignments for the inpatient costs involved that are inappropriate and that fail to recognize the actual costs involved in islet transplants.

ASTS is working closely with AST, APOPO, and JDRE, and UNOS on the submission of joint comments opposing the CMS proposal and hopes to meet with CMS officials soon to discuss this issue at further length.

Payment for Immunosuppressive Drugs and Generic Substitution

ASTS attended a meeting convened by Secretary of HHS, Tommy Thompson, to discuss Medicare reimbursement for immunosuppressive drugs and problems associated with generic substitution. Several members of the Government’s Advisory Committee on Transplantation (ACOT) were present, as well as other transplant-related organizations. The ASTS representative (ASTS Past President Marc Lorber) presented ASTS’ concerns with generic substitution of immunosuppressive drugs; articulated ASTS’ concern with reductions in payment amounts for immunosuppressive drugs; and advocated the establishment of an appropriate pharmacy dispensing fee. ASTS followed up its oral presentation with written comments to the Secretary, and CMS has recently indicated that it intend to accede to ASTS’s request for implementation of a dispensing fee for immunosuppressive drugs.

In response to a request from the medical oncology community, the AMA is considering modifying the CPT codes for drug administration. Modification of these codes may affect the payment for administration of immunosuppressives, and, for this reason, ASTS is monitoring this issue and will keep members posted on new developments.

Transplant Center Regulations

As reported in the last issue of *Chimera*, Medicare is in the process of developing new conditions of participation for Medicare-certified transplant centers and organ procurement organizations. CMS had expected to issue proposed regulations this spring but CMS staff now report that the proposed regulations will not be issued until late September at the earliest. ASTS is closely monitoring the development and publication of the proposed regulations and plans to meet with CMS staff to discuss ASTS’ position once the proposed regulations are issued.

LVAD Coverage and Payment

Last year Medicare announced that it would begin covering left ventricular assist devices (LVADs) as destination therapy for patients who are not candidates for transplantation and who otherwise meet Medicare coverage criteria if the procedure is performed in a facility approved by Medicare to perform LVAD implants. CMS announced temporary criteria which a facility must meet to perform a covered LVAD procedure and several facilities have been approved under these interim standards. The agency has requested that recommendations for permanent LVAD facility requirements be developed by

JCAHO. ASTS is collaborating with JCAHO on the development of facility criteria to ensure that the facility standards are appropriate and that the interests of transplant patients are protected.

In the interim, in its proposed rule on hospital inpatient prospective payment, published May 18, 2004, CMS proposed to reassign LVAD implants to DRG 103—the DRG for heart transplants. This is a higher-paying DRG than the DRG to which LVAD implants are currently assigned (DRG 525—heart assist system implant). CMS data indicate that LVAD implants are significantly more costly than other types of heart assist system implants (e.g. non-implantable heart assist systems and external heart assist systems). Charges for cases assigned to DRG 525 that include implantation of a LVAD are approximately \$140,340 higher than those involving other heart assist system procedures. While reassignment of LVAD procedures to DRG 103 will significantly increase payment for these procedures, it may adversely affect payment for heart transplants over the long term. ASTS is currently considering what position to take with respect to this issue. ❌

Prepared by Diane Millman and Rebecca Burke, ASTS Reimbursement Counsel, Powers Pyles Sutter and Verville

New Code of Conduct Adopted for Recovery Personnel

The following ASTS Code of Conduct was developed in concert with AOPO's Medical Directors Council and approved by the ASTS Council in January 2004. A work place environment that is safe and free of hostility or harassment is necessary to optimize the efficient recovery of organs and tissue. Thus, each OPO should have a formal policy for addressing the conduct of staff and physicians in the donor hospital setting. The following guidelines are recommended to each OPO as a standard for the conduct of the recovery surgeon but these guidelines are pertinent for of all members of the recovery team.

Code of Conduct of Organ and Tissue Recovery Personnel

Members of the recovery team participating in organ and tissue recovery activities within an OPO service area will treat all personnel in the donation process with professional courtesy and respect. Organ and tissue recovery personnel should conduct themselves in a manner that promotes an effective and productive setting particularly in the operating room, but also during the entire recovery process. Proper conduct avoids displays of anger, intimidation, ridicule and other abusive behavior. Each organ and tissue recovery surgeon, as head of their recovery team, must assume primary responsibility for preventing improper conduct such as harassment of personnel during the recovery process.


Addressing a Breach of the Code:

Organ and tissue recovery personnel have an obligation to object to unprofessional conduct by surgeons and staff participating in the recovery process. In the case of observed unprofessional conduct, if directly addressing the surgeon or recovery team staff member does not resolve the problem, there is an obligation to report the misconduct to the Medical Director of the OPO or other appropriate authority as designated by the OPO. The Medical Director or OPO designee has the responsibility of assessing reported violations of the Code of Conduct engaging in personal communication with the surgeon or staff member in an appropriate and timely manner. If a personal communication does not resolve the offensive conduct, the OPO should bring the misconduct to the attention of the surgeon's Chief of Service or the staff member's supervisor.

Repeated Breach of the Code:

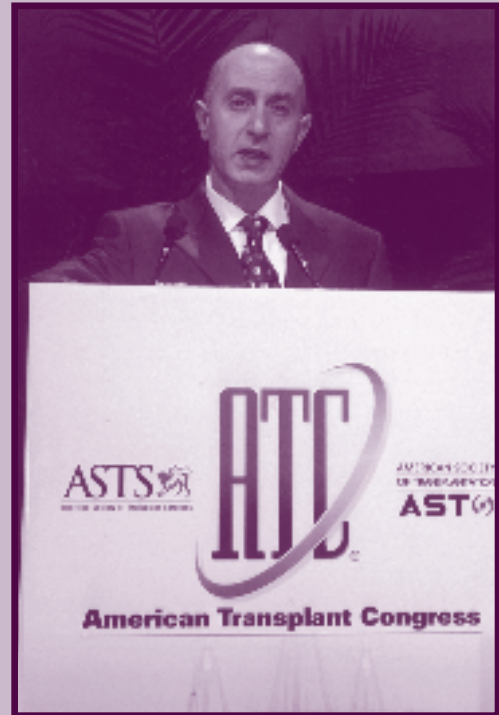
The privilege of recovery responsibility on behalf of the OPO can be approved or revoked by the OPO depending on conduct. Accordingly, conduct deemed unprofessional may be subject to disciplinary action by the OPO. This disciplinary action could result in a request to the surgeon's Chief of Service that the offending surgeon's privileges to participate in organ and tissue recovery activities be revoked within the OPO service area. In the case of misconduct on the part of a recovery team staff member other than a surgeon, the request could be made to the staff member's supervisor. If the misconduct is not resolved by this procedural step, the OPO may refuse to permit the offending surgeon or staff member from participating in organ and tissue recovery activities within the OPO service area.

American Transplant Congress

The 2004 American Transplant Congress (ATC) held on May 15-19, 2004 at the Hynes Auditorium in Boston, MA drew the largest number participants, 4096, ever for the Congress. In addition 2,500 abstracts had been submitted. The ATC is the Joint Annual Meeting of the American Society of Transplant Surgeons and the American Society of Transplantation. 



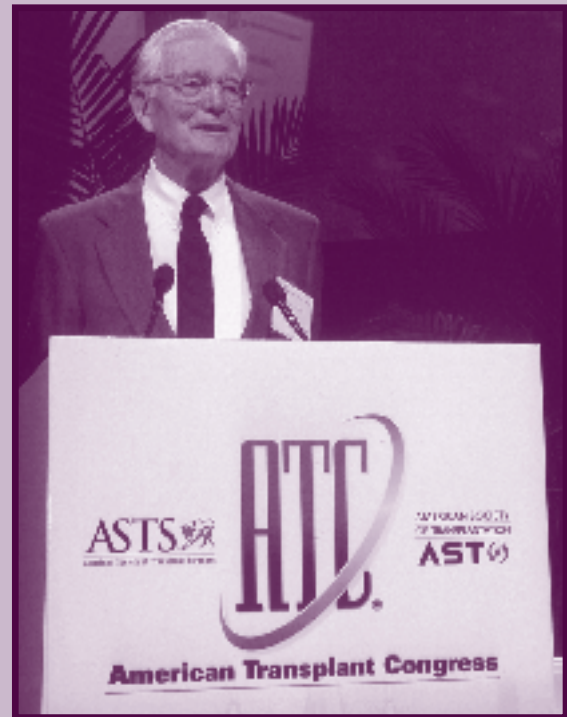
ASTS President Abraham Shaked presents plaque to Mark Pescovitz for his work on the ATC Executive Planning Committee on behalf of ASTS.



ASTS President, Abraham Shaked, gives his Presidential Address on May 18, 2004 at the American Transplant Congress.



ASTS President Abraham Shaked presents plaque to Stuart Knechtel for his work on the ATC Executive Planning Committee on behalf of ASTS.



Dr. Paul Russell provides remarks at the American Transplant Congress after accepting the ASTS Roche Pioneer Award.



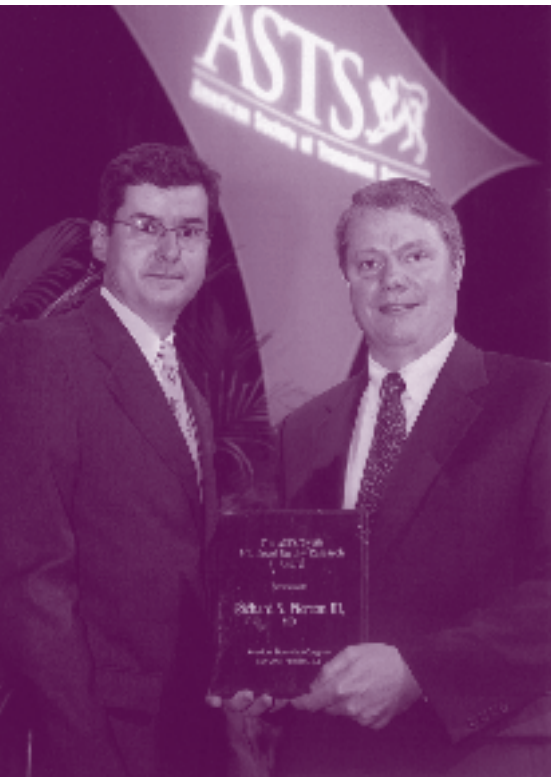
John Roberts, Executive Director of Wyeth (left) presents the ASTS Wyeth Collaborative Scientist Research Award to Thomas M. Fishbein and Michael Zasloff (not present) of Georgetown University Hospital Transplant Institute. They will be conducting research in innate immunity in the transplant intestine.

Robert Gordon (center) of Roche presents the ASTS Roche Scientist Awards to Jennifer Ehlin (right) of the Lahey Clinic and Children's Hospital of Boston who is studying hepatic regeneration in both LDALT recipients and donors and to Todd Brennan of the University of California, San Francisco whose research will focus on the study of kinetics of T cell mediated graft rejection and tolerance.



ASTS 2004

The following are the recipients of the awards presented at the American Society of Transplant Surgeons Awards Ceremony on May 18, 2004 at the American Transplant Congress in Boston, MA.



Richard Pierson, III (right) of the University of Maryland accepts the ASTS Wyeth Mid Level Faculty Research Award from Wyeth Executive Director, John Roberts. His research is entitled, "Selective CD28 blockade to modulate primate alloimmunity."



The ASTS Fujisawa Faculty Development Award was presented to Angeles Baquerizo (right) of Cedars-Sinai Medical Center by Charlotte Berlin of Fujisawa. Dr. Baquerizo's research will aim to expand our understanding of the role of human anti-pig xeno-antibodies in the xenograft rejection process.





AWARDS

David Bruno of Georgetown University School of Medicine is presented the ASTS/NKF Folkert Belzer Research Fellowship by Catherine Paykin of NKF. Dr. Bruno will be conducting research entitled, " Targeting alloreactive memory to prevent allograft rejection."

Abraham Shaked presents the ASTS Vanguard Award to Sandy Feng, University of California, San Francisco, for her clinical science paper entitled: "Sirolimus Prolongs Recovery from Delayed Graft Function After Cadaveric Renal Transplantation" which was published in the American Journal of Transplantation in April 2003.



Thomas Peters (right) presents the ASTS Vanguard Award to Alope Mandal, Oregon Health and Science University, for his paper entitled " Does Cadaveric Renal Transplantation Ever Provide Better Outcomes than Live Donor Renal Transplantation" which was published in Transplantation, February, 2003. (Andrey E. Belous, MD was also a recipient of an ASTS Vanguard Award but was unable to attend the ceremonies.)



Bao-Ngoc Nguyen of the University of Maryland is the recipient of the ASTS Thoracic Surgery Fellowship who will be conducting research in CCR5 in Cardiac Allograft Vasculopathy. ASTS Awards Committee Chairman, Thomas Peters, presents the award.



The ASTS Novartis Fellowship in Transplantation Award is presented by Brian O'Callaghan of Novartis to Dorry Segev of Johns Hopkins University School of Medicine who will be conducting research in ischemia/reperfusion injury in solid organ transplants.



ASTS 2005 Winter Symposium

“The Science and Art of Immunosuppression”

ASTS will be conducting its 5th Annual State of the Art Winter Symposium on January 21-23, 2005 at the Eden Roc Resort and Spa, Miami Beach, Florida.

The program theme will be “The Science and Art of Immunosuppression.” The members of the planning committee are Elizabeth Pomfret, Sandy Feng, Douglas Hale, John Magee, Michael Mulligan, and Stuart Knechtle.

In addition to a full program the ASTS Winter Symposium offers a beach front resort as its location and plenty of activities for families.

The Eden Roc Resort and Spa overlooks Miami Beach and the spectacular intracoastal waterway. Ranked as one of the top spas in the country the Eden Roc features 349 magnificently restored rooms. The spa and its facilities feature a glass-enclosed weight complex with the latest computerized equipment overlooking the ocean.

Within the private spa one can partake of a full array of massage therapies and body treatments and resort amenities that include two ocean front pools. You can view the Eden Roc by going to its website at www.edenroccresort.com

More detailed information and registration materials will appear on the ASTS website at www.astso.org



ASTS

Benefactor's Circle
Fujisawa Healthcare, Inc.

Founder's Circle
Novartis Pharmaceuticals Corporation
Roche Laboratories, Inc.
Wyeth Pharmaceuticals

Friend's Circle
Genzyme Transplant
Enzon Pharmaceuticals, Inc.
MedImmune, Inc.

SEPTEMBER 2004

September 5-10, 2004

XX INTERNATIONAL CONGRESS OF THE TRANSPLANTATION SOCIETY

Vienna, Austria

www.transplantation2004.at

OCTOBER 2004

October 2-3, 2004

NEW ADVANCES IN SOLID ORGAN TRANSPLANTATION

The Estancia La Jolla Hotel

La Jolla, CA 92037

Contact Website:

www.scrippsclinic.com

Contact Email: med.edu@scrippsclinic.com

Contact Phone: 858-882-8456

DECEMBER 2004

December 1-4, 2004

TRANSPLANTASIA 2004

Suntec International

Convention & Exhibition

Singapore

Contact Phone: 65-6299-0200

Contact Fax: 65-6251-7555

Contact Email:

transplantasia@nkfs.org

Contact Website:

www.transplantasia.org

December 8-11, 2004

THE 3RD INTERNATIONAL CONGRESS ON IMMUNOSUPPRESSION

Manchester Grand

Hyatt San Diego

San Diego, CA

Contact Website: www.icicongress.org

Contact Phone: 201-271-6142

Contact Fax: 201-430-1400

JANUARY 2005

January 21-23, 2005

ASTS 5TH ANNUAL STATE OF THE ART WINTER SYMPOSIUM

"The Science and Art of

Immunosuppression"

Eden Roc Resort and Spa

Miami Beach, FL

MAY 2005

May 20-25, 2005

AMERICAN TRANSPLANT CONGRESS

Washington State Convention &

Trade Center

Seattle, WA

Contact Website:

www.atcmeeting.org

Contact Phone: 856-439-0880

JULY 2006

July 21-28, 2006

WORLD TRANSPLANT CONGRESS

The Joint Meeting of the American

Society of Transplant Surgeons,

the American Society of

Transplantation and the

Transplantation Society

Hynes Convention Center

Boston, MA

Contact Website:

www.WTC2006.org

**A S T S N E W
m e m b e r s**

Juan D. Arenas, MD
University of Michigan

Amit Basu, MD
University of Pittsburgh Medical Center

Jean F. Botha, MB BCh FCS
University of Nebraska Medical Center

Luis A. Fernandez, MD
University of Wisconsin

David P. Foley, MD
University of Florida Medical School

Susan S. Ganz, MD
Univ. of Miami Sch. Of Medicine

David L. Gorden, MD
Vanderbilt University

Salvatore Gruttadauria, MD
ISMETT—UPMC Italy

Ramaiah Indudhara, MD
National Institute of Transplantation

Anand K. Khakhar, MD
London Health Science Center
University of Western Ontario

Dean Y. Kim, MD
Henry Ford Hospital

Gearld S. Lipshutz, MD
University of California – San Francisco

Richard J. Migliori, MD CEO
United Resource Networks

Matthew G. Nuhn, MD
Massachusetts General Hospital

José Oberholzer, MD
University of Illinois at Chicago

Shawn J. Pelletier, MD
University of Michigan

Shunmoogam Pragalathan Pillay, MD
Royal Prince Alfred Hospital
Sydney, Australia

Burckhardt Ringe, MD
Drexel University College of Medicine

Ye Yong, MD
Nazih Zuhdi Transplant Institute

ASTS Calendar

ASTS Research Bulletin Board

ASTS has developed a “research bulletin board” to enable you to post information about research projects in which you would like additional participants or other input.


The purpose of this bulletin board is to allow investigators to solicit participation from other centers for their clinical trial. It is hoped that this bulletin board will attract enrollment of a sufficient number of patients to statistically power clinical trials.

Please go to www.asts.org and click on to “Members Only” section and then click “ASTS Research Bulletin Board.”

Click into the specific organ where your study better belongs or to see any proposal that has been posted.

We encourage you to utilize this site and refer to it on a regular basis to see what has been added and to post studies for which you are seeking input. We hope this tool will help in developing research studies for which Members would like to find collaborators or receive input and advice from other investigators. Both clinical and basic projects are welcomed.

It should be noted that posting of studies on the trials bulletin board does not in any way denote support or sponsorship of the principal investigator or clinical trial by the American Society of Transplant Surgeons. In addition, the American Society of Transplant Surgeons does not vouch for the scientific validity, clinical efficacy, and/or any safety issues related to conduct of these research projects.

The site was developed by the ASTS Scientific Studies Committee. 

JOB BOARD

The ASTS Job Board is enhanced further by the addition to the ASTS website, www.astso.org, of CV's of ASTS Candidate Members. This is in an effort to facilitate the interactions between graduating fellows and transplant programs with junior position openings. To access the CVs go to the www.astso.org, log into the Members Only section and click on Upload/download files.

TRANSPLANT SURGEON St. John Hospital and Medical Center, a 607-bed tertiary medical care facility located in Detroit, Michigan, is seeking a board eligible/board certified surgeon who specializes in kidney and pancreas transplantation. This is a hospital-employed practice with 1,000 office visits per year, which includes new patients, post-operative visits, ultrasounds, procedures, and biopsies. In addition to the clinical component, there is an opportunity to teach General Surgery residents that rotate on the service. There is also active participation in clinical research, as well as experimental laboratory research. St. John Health is part of Ascension Health, the largest Catholic health-care system in the country. St. John Health is a growing network of community-based health care services in the metro Detroit area. St. John provides comprehensive prevention, primary care and treatment programs with approximately 3,000 physicians, 125 outpatient centers, and eight hospitals spanning five counties with a total of 2,129 licensed beds. The system is affiliated with Wayne State University School of Medicine, Michigan State University College of Osteopathic Medicine, Oakland University's Meadowbrook Health Enhancement Institute and Kirksville College of Osteopathic Medicine. A competitive compensation package is available. Qualified individuals are invited to send their CV in confidence to: Mary Bischoff - Physician Recruitment Coordinator, St. John Health, 28000 Dequindre, Warren, Michigan 48092, phone: (586) 753-1241 fax: (586) 753-1020 email: mary.bischoff@stjohn.org ✉

The University of California, Irvine, College of Medicine, Department of Surgery, Division of Hepatobiliary Surgery seeks a full-time Specialist, non-tenure track, with demonstrated expertise in animal models of transplantation, PCR and molecular biology, with a strong record of independent research to start July 11, 2004. Duties will include oversight of residents and students in the Transplant Laboratory, performance of animal transplants for investigation of new immunosuppressive agents, and processing of human liver tissue samples for microarray and other molecular assays. Term of employment beyond 1 year is dependent on funding being available. Salary and level commensurate with training, qualifications, and experience. Interested candidates should submit a curriculum vitae with a letter outlining qualifications and five letters of reference by July 11, 2004 to: David Imagawa, MD, Department of Surgery, Division of Hepatobiliary Surgery, University of California, Irvine Medical Center, 101 City Drive, Orange, CA 92868. University of California, Irvine is an Equal Opportunity Employer committed to excellence through diversity. ✉

MULTI-ORGAN TRANSPLANT SURGEON The Organ Transplant Service at Piedmont Hospital is seeking an experienced multi-organ transplant surgeon with a primary interest in liver transplantation to direct the development of a new liver transplant program. Candidates must have graduated from an ASTS approved fellowship program in hepatic and renal transplantation and meet UNOS criteria as a hepatic transplant surgeon. Candidate's experience should include being the primary surgeon on at least 50 liver transplants and operating as the primary surgeon on both renal and pancreas transplants. Living hepatic donor and other hepatobiliary surgical experience are desirable. Candidates must have team-oriented, administrative, and leadership skills and be willing to participate in community outreach development. Piedmont Hospital currently has two hepatologists on staff and two of the largest GI practices in Georgia. The Organ Transplant Service performed 112 renal transplants in 2003 and utilizes laparoscopic donor nephrectomy. Interested candidates should contact: John Whelchel, M.D., Organ Transplant Services, Piedmont Hospital, Suite 205, 1984 Peachtree Road NW, Atlanta, Georgia, 30309, Ph: 404-605-4606, Fax: 404-367-4447, e-mail: John.Whelchel@Piedmont.org ✉

MULTI-ORGAN TRANSPLANT FELLOWSHIP The Division of Organ Transplantation, Northwestern University Feinberg School of Medicine is seeking highly motivated individuals for its ASTS-approved transplant fellowship beginning July 1, 2005. The fellowship is a two-year program with training in kidney, pancreas, and liver transplantation and multi-organ cadaver procurement. Comprehensive training in adult and pediatric renal and liver transplantation will be provided. Training will also be provided in laparoscopic living-donor nephrectomy, living donor liver transplantation, and dialysis access. Participation in ongoing clinical research projects and translational projects within the Division of Transplantation is encouraged. Fellows should be board eligible or board-certified in general surgery. Interested individuals should contact: Joseph R. Leventhal, MD, PhD, Division of Transplantation, Department of Surgery, 675 N. St. Clair Street, Suite 17-200, Chicago, IL 60611, 312-695-1703 - Phone, 312-695-9194 - Fax, Email: jleventh@nmh.org ✉

SURGICAL DIRECTOR OF LIVER TRANSPLANTATION The University of Michigan Transplant Center is seeking candidates for the position of Surgical Director of Liver Transplantation in the Transplantation Division. Academic rank will be determined by the applicant's credentials. This academic position is research oriented with clinical and teaching responsibility emphasizing liver transplantation. Applicants must be board eligible or certified in General Surgery and must have completed an ASTS-approved transplantation fellowship, or have equivalent experience in liver transplantation. Inquiries should be directed to: Jeffrey D. Punch, M.D. Chief, Division of Transplantation University of Michigan Medical Center 2924 Taubman Center Ann Arbor, MI 48109-0331 or sent by email to jpunch@umich.edu ✉

TRANSPLANT SURGEON The Section of Transplantation, Division of General Surgery, at the Albany Medical Center Hospital is recruiting for a position in Transplant Surgery at the Assistant or Associate Professor level. Duties involve clinical responsibilities in all aspects of kidney and pancreas transplantation, as well as multi-organ donor procurement. Interested parties should forward a CV to David Conti, M.D., Chief of General Surgery, Director-Abdominal Organ Transplant Program. Fax: (518) 262-5571, email: contid@mail.amc.edu, mail: Albany Medical College, MC 61GE, 43 New Scotland Avenue, Albany, NY 12208 ✉

American Transplant Congress



American Transplant Congress

MARK THE DATE!

**Plan to attend the
*2005 American Transplant Congress***

May 20 - 25, 2005

**Washington State Convention and Trade Center
Seattle, WA**

**Program and information will
soon be available at**

www.astc.org and www.atcmeeting.org

ASTS COMMITTEES 2004 - 2005

(Term expires at end of annual meeting in year indicated) · *Nominations Committee Chair rotates annually to current President

ADVISORY COMMITTEE ON ISSUES

Chairman
Abraham Shaked

James A. Schulak
Marc I. Lorber
Nancy Ascher
Ronald Busuttill
Joshua Miller
Ronald Ferguson
Hans Sollinger
Nicholas Tilney
Mark Hardy
Peter G. Stock
Robert M. Merion

AWARDS COMMITTEE

Chairman
Kim Marie Olthoff (2007)
Co-Chair
Abhinav Humar (2007)

Kenneth Newell (2005)
Amy L. Friedman (2005)
Velma Scantlebury (2005)
Ron Shapiro (2006)
David K. C. Cooper (2006)
Ravi S. Chari (2006)
Charles G. Orosz (2006)
Jean C. Emond (2007)

BYLAWS COMMITTEE

Chairman
Alan N. Langnas (2006)
Co-Chair
Alan Reed (2005)

Darla Granger (2005)
James Wynn (2005)
Milan Kinkhabwala (2006)
Carlos G. Fasola (2006)
Ernesto P. Molmenti (2007)
David A. Laskow (2007)
Sander S. Florman (2007)

CELL TRANSPLANT COMMITTEE

Chairman
Camillo Ricordi (2005)
Co-Chair
Jon Odorico (2007)

Peter Stock (2005)
Hugh Auchincloss (2005)
James F. Markmann (2006)
Paul F. Gores (2006)
David A. Gerber (2006)
R. Brian Stevens (2007)
Steven Paraskevas (2007)

DEVELOPMENT COMMITTEE

Chairman
Abraham Shaked

Lynt B. Johnson
Lewis W. Teperman
Robert M. Merion

EDUCATION COMMITTEE

Chairman
Mitchell Henry (2005)
Co-Chair
Peter G. Stock (2007)

Prabhaker Baliga (2005)
John Conte (2005)
Paul Kuo (2005)
Jeffrey Lowell (2005)
David J. Reich (2006)
Carl E. Haisch (2006)
Francis H. Wright, Jr. (2006)
Michael B. Ishitani (2006)
Richard J. Knight (2007)
Marc E. Uknis (2007)
Robert M. Esterl (2007)

ETHICS COMMITTEE

Chairman
Douglas Hanto (2005)
Co-Chair
Charles M. Miller (2007)

David Cronin (2005)
Igal Kam (2005)
Elmahdi Elkhmmas (2005)
Mark I. Aeder (2006)
Thomas Diflo (2006)
Jeffrey D. Punch (2006)
Lynt B. Johnson (2007)
Christian S. Kuhr (2007)

INFORMATICS AND DATA MANAGEMENT COMMITTEE

Chairman
Mark Adams (2005)
Co-Chair
Sandy Feng (2007)

Christopher Siegel (2005)
Thomas Johnston (2005)
Rafik M. Ghobrial (2005)
Douglas A. Hale (2006)
Abhinav Humar (2006)
Atsushi Yoshida (2006)
Bradley H. Collins (2007)
Maria Koulmanda (2007)
Robert M. Merion
(Advisor)

LEGISLATIVE COMMITTEE

Chairman
John P. Roberts (2006)

A. Osama Gaber (2004)
Robert M. Merion (2005)
Thomas Peters
Michael Abecassis
J. Richard Thistlethwaite

MEMBERSHIP COMMITTEE

Chairman
David C. Mulligan (2006)
Co-Chair
E. Steve Woodle (2005)

Sukru H. Emre (2004)
Robert Robbins (2005)
Charles G. Orosz (2005)
Christoph Troppmann (2006)
Kenneth R. McCurry (2006)
Gazi B. Zibari (2006)
Henry B. Randall (2007)
Hasan Yersiz (2007)

NEWSLETTER COMMITTEE

Editor
Kenneth L. Brayman (2007)
Asst. Editor
Marty T. Sellers (2007)

Richard N. Pierson, III (2005)
Joseph Buell (2005)
Joseph R. Leventhal (2006)
Rainer W. G. Gruessner (2006)
Baburao Koneru (2007)
Jeffrey Fair (2007)
Jonathan P. Fryer (2007)
Sukru H. Emre (2007)

*NOMINATIONS COMMITTEE

Chairman
Richard J. Howard

Abraham Shaked (2006)
James Schulak (2005)
Francis L. Delmonico (2005)
Robert M. Merion (2005)
Mark L. Barr (2006)
John P. Roberts (2006)

PROGRAM, PUBLICATIONS & POSTGRADUATE COURSE*

Chairman
Scott A. Gruber (2006)
Co-Chair
Milan Kinkhabwala (2007)

Mark L. Barr (2005)
Ernesto Molmenti (2005)
Debra Sudan (2005)
George E. Loss, Jr. (2006)
Devin E. Eckhoff (2006)
Cristiana Rastellini (2007)
John P. McVicar (2007)
Lewis W. Teperman (2007)

REIMBURSEMENT

Chairman
Michael Abecassis

Darrell A. Campbell, Jr.
Francis Delmonico
David Follette
John Fung
Douglas Hanto
Barry D. Kahan
Goran B. G. Klintmalm
Marc I. Lorber
Hans Sollinger
Kenneth Brayman

SCIENTIFIC STUDIES COMMITTEE

Chairman
Giacomo Basadonna (2005)
Co-Chair
David A. Gerber (2007)

John Magee (2005)
Kenneth Chavin (2005)
Maria Millan (2005)
John A. Daller (2006)
Daniel A. Shoskes (2006)
James D. Eason (2006)
Thomas M. Fishbein (2007)
Robert M. Esterl (2007)

STANDARDS ON ORGAN TRANSPLANTATION COMMITTEE

Chairman
Richard B. Freeman (2006)
Co-Chair
Charles B. Rosen (2006)

William Marks (2005)
Christopher McCullough (2005)

Martin Mozes (2005)
Baburao Koneru (2006)
Henkie P. Tan (2006)
W. Kenneth Washburn (2007)
Joseph R. Leventhal (2007)
David Shaffer (2007)
M. Susan Mandell (ASA Liaison)

THORACIC ORGAN TRANSPLANTATION COMMITTEE

Chairman
Mark L. Barr (2005)
Co-Chairman
Joren C. Madsen (2006)

Robert Higgins (2005)
George Tellides (2005)
Robert L. Kormos (2006)
John V. Conte, Jr. (2006)
Alberto Pochettino (2007)
Abbas Ardehali (2007)

VANGUARD COMMITTEE

Chairman
Elizabeth A. Pomfret (2007)
Co-Chair
Niraj M. Desai (2007)

James Pomposelli (2005)
Paul Morrissey (2005)
Scott Batty (2005)
Liise K. Kayler (2006)
Andrew M. Posselt (2006)
Seth J. Karp (2006)
David B. Leeser (2007)
Randall S. Sung (2007)

GOVERNMENT AND SCIENTIFIC LIAISON

Chairman
J. Richard Thistlethwaite

UNOS Liaison

Hans Sollinger (2004)
Donald Dafoe (2005)
Arthur I. Sagalowsky (2006)

National Association of Medical Examiners

Goran B. G. Klintmalm

CMS

Anthony D'Alessandro (2004)
John Fung (2004)
C. Wright Pinson (2006)
Timothy L. Pruett (2006)

American Board of Surgery

James A. Schulak

American College of Surgeons

J. Richard Thistlethwaite

AD HOC COMMITTEE ON LIVING DONATION

Chairman
Francis Delmonico

Mark Barr
Arthur Matas
Stephen Tomlanovich
Amy Friedman
Ronald Busuttill
Andrew Klein
Igal Kam
Jeffrey D. Punch
Robert Brown

AD HOC COMMITTEE ON WORKFORCE

Chairman
Ginny Bumgardner

Hilary Sanfey
Nancy Ascher
Kim Olthoff
Lucy Wrenshall
Elizabeth Pomfret
Sandy Feng
Amelia Bartholomew
Debra Sudan
Lisa Florence
Patricia Sheiner

AD HOC MEMBERSHIP DATABASE COMMITTEE

Chairman
Sandy Feng

Mark B. Adams
Edward J. Alfrey
Ginny Bumgardner
David Mulligan
Ryutaro Hirose
Elizabeth Pomfret
James J. Pomposelli

ASTS 5TH ANNUAL STATE OF THE ART SYMPOSIUM

The Science and Art of
Immunosuppression



January 21-23, 2005
Eden Roc Resort and Spa
Miami Beach, Florida

To Register:

Call 1.800.314.1921
or go to www.asts.org

Abstracts will be accepted.

