



## ASTS Responses to OPTN Proposals Open for Public Comment

September 28, 2022

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### [Update Kidney Paired Donation Policy](#)

The American Society of Transplant Surgeons (ASTS) is pleased to provide the following feedback to the OPTN Kidney Transplantation Committee.

The recent OPTN proposal on kidney paired donation aims to modernize and update OPTN Policy 13 which has provided a framework for the OPTN Kidney Paired Donation Pilot Program, which has been operational as a national offering since 2010. As of July 6, 2022, there are approximately 60 programs participating in UNOS KPDPP. There have been considerable changes in modern KPD practice, most of which have evolved in the practice of other larger paired exchanges.

#### **Do the deadlines provide sufficient time to perform the required tasks and review the match offer? Is the 60-day deadline from time of match offer to recovery and transplant surgery appropriate?**

The deadlines outlined in the policy proposal do allow for completion of required tasks and match offer review within a reasonable time frame for most kidney transplant programs. There may be some limitations to meeting the deadlines for smaller programs. The 60-day deadline from match offer to recovery and transplant surgery is also a reasonable timeline, but smaller or rural programs may contest this related to issues surrounding operating room availability. Programs will need to respond by only entering donors into the KPDPP if they are ready to go to surgery in the immediate term. This timeframe will also implicitly increase communication between the donor and the donor recovery hospital to ensure effective KPD practice.

#### **Should the deadline for the provision of a preliminary response be shortened to one business day from receipt of match offer, or is two business days more appropriate? If so, why?**

The deadline for provision of a preliminary response for match offer receipt should be two business days

#### **How can overuse of extension requests be discouraged? How can better performance be incentivized in the program?**

Better performance can be incentivized through a points-based system that could, as an example, provide centers with priority for end-of-chain kidneys.

**Should clinical donor information, such as renal images, be specified as required donor information made accessible to the matched candidate's transplant hospital within the three-business day deadline? If so, why?**

Yes, this promotes a best practice in KPD by optimizing the decision-making process by transplant hospitals. It supports transplant professionals and transplant recipients. Transplant surgeons and other providers must have the right clinical information to truly understand the offers they are accepting and denying. This type of approach is utilized in other kidney exchanges.

**Should the donor's entire evaluation record, including renal images, be made available in the OPTN KPD System at time of match offer? If so, what is the rationale?**

The availability of the entire donor evaluation record at the time of offer provides the hospitals and clinical staff (surgeons and nephrologists) with the full picture to facilitate rapid and safe offer decision-making. While there may be some additional burden to programs to get images uploaded for review, UNOS has existing technology that they use in the deceased donor system in DonorNet that could help transplant hospitals with this task.

**Should policy specify that transplant programs obtain a signature from bridge donors confirming informed consent and the estimated period of willingness to be a bridge donor? If so, why?**

Transplant programs should be aware of the best practices related to bridge donors, and UNOS should serve as a conduit for dissemination of that information. However, additional policy requirements will not necessarily increase patient safety in anyway. Rather, transplant programs should be encouraged to establish and maintain a bridge donor policy that works for their program, patients, and providers. Adherence to their own policy should be expected for the purposes of regulation. This model mirrors what is in place for multiple other UNOS policies.

ASTS would like to note that this program is only one of many paired exchanges that programs can use; UNOS should be careful about being too proscriptive in creating rules. This may act as a disincentive for programs to participate in the UNOS KPDPP, which would be an unintended consequence.

**ASTS Position: Support**