

ARTICLE IX

REGIONS

9.1 Regional Structure. The 11 Regions provide a mechanism for sharing ideas and other information within a smaller than national forum to benefit from the various and unique perspectives across the country on matters affecting organ procurement and transplantation. The Members of the Corporation belong to the Region in which their principal office or residence is located. The Regions are defined as follows:

- Region 1 - Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont
- Region 2 - Delaware, District of Columbia, Maryland, New Jersey, Pennsylvania, Northern Virginia, West Virginia
- Region 3 - Alabama, Arkansas, Florida, Georgia, Louisiana, Mississippi, Puerto Rico
- Region 4 - Oklahoma, Texas
- Region 5 - Arizona, California, Nevada, New Mexico, Utah
- Region 6 - Alaska, Hawaii, Idaho, Montana, Oregon, Washington
- Region 7 - Illinois, Minnesota, North Dakota, South Dakota, Wisconsin
- Region 8 - Colorado, Iowa, Kansas, Missouri, Nebraska, Wyoming
- Region 9 - New York
- Region 10 - Indiana, Michigan, Ohio
- Region 11 - Kentucky, North Carolina, South Carolina, Tennessee, Virginia

Each Region shall hold at least two meetings per year. The purpose of these meetings is to exchange information, discuss and comment upon issues distributed for public comment under UNOS processes for policy development, vote for Regional Councillors and Associate Regional Councillors, and address such other matters as may be of interest to the Region. Positions developed at the Regional level are considered further at the national level through the national Permanent Standing Committees other than the Policy Oversight Committee, which include representatives from each of the Regions, and then the Board of Directors, which includes the Regional Councillor elected from each of the Regions.

9.2 Regional Review Boards (RRBs). Regional Review Boards (RRBs) for transplantation of organs may be formed for each Region by direction of the appropriate reviewing Committees and Board of Directors. The purpose of the RRBs shall be to provide peer review of professional conduct regarding the listing of transplant candidates at the higher levels of medical urgency and/or to serve other peer review functions as may be determined appropriate by the Board of Directors. RRBs shall follow standard UNOS policy in conducting these functions unless otherwise approved by the Board of Directors. RRBs shall be organ-specific and the voting members shall consist of only physicians and surgeons who are active in the field of organ transplantation from each Transplant Hospital within a Region that includes a program designated for the relevant organ, and may also include non-voting members, and a representative of the public. In the event that size of the RRB becomes problematic using this composition guideline, Regions may consider a rotation schedule for representation from organ-specific transplant programs. Additional guidelines regarding RRB organization and operation may be established by the appropriate reviewing Committees and Board of Directors. Each RRB shall have the discretion to administer its operations in a manner that serves the purposes determined by the Board of Directors under conditions that prevail in the Region; provided, however, that no RRB shall engage in prospective review of listing urgency status (as contrasted with retrospective review), without specific direction in UNOS policies or unless otherwise authorized by the Board of Directors.