

# Standardize an Organ Coding System for Tracking of Organs: Requirements for OPO TransNet<sup>SM</sup> Use

*Operations and Safety Committee  
June 6-7, 2016  
Board of Directors Meeting*



# How does this proposal support the OPTN Strategic Plan?

- Primary Strategic Goal – Goal 4: Promote living donor and transplant recipient safety
- Promotes transplant recipient safety by using technology to reduce common errors such as illegible labels and transcription errors that can lead to incorrect transplantation

# What problem will the proposal solve and how?

## Problems:

- Labeling and packaging errors
- Wrong organ delivered or wrong organ/wrong recipient
- Limited in-transit and package information

## Solution:

- Require OPO TransNet use to package and label organs
- Use downloaded DonorNet data
- Point of care labeling
- Produces print and bar code labels
- Bar code scans for correct donor and shipping manifest
- Package tracking



Donor ID: AAAL204  
Donor ABO: O  
Cross Clamped:

1544

Shipping Label 1

CROSS CLAMP TIME (Military Time) Time Zone

CONTENTS OF BOX:  
Contents of Box:

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> LIVER         | <input checked="" type="checkbox"/> Blood |
| <input type="checkbox"/> Vessels                  | <input type="checkbox"/> Spleen           |
| <input checked="" type="checkbox"/> Documentation | <input checked="" type="checkbox"/> Nodes |
| <input type="checkbox"/> Other:                   | <input type="checkbox"/> Biopsy           |

Shipping Label 2

	Date	Time	Initials
Ice 1:	10/21/2014	1238 EDT	AP
Ice 2:			

Originating OPO: VATB  
LifeNet Health

Shipping Label 3

ORIGINATING OPO

( )

ORIGINATING OPO TELEPHONE #

07/2010

# LIVER

KEEP  
UPRIGHT

## DONATED HUMAN ORGAN/TISSUE for TRANSPLANT

TO (INSTITUTION):

LIVER

Donor ID AAAL204

OPO: VATB

CITY:

STATE:

If available,  
PRIMARY FLIGHT #:

If available,  
CONNECTIN

Shipping Label 4 vs.0.3:

In case of delays or problems call UNOS Organ Center  
at 1-800-292-9537 a 24 hour number.

This shipment is made possible by an exchange of information through United Network for Organ Sharing,  
a charitable, non-profit organization which has no proprietary interest in this container or its contents.



# HANDLE WITH CARE



BIOLOGICAL PRODUCTS--NOT RESTRICTED, PACKED IN COMPLIANCE WITH IATA PACKAGING INSTRUCTION 650 (WET ICE).



# How was this proposal developed?

- Healthcare Failure Modes and Effects Analysis (FMEA)
- Discovery and Immersion
- Simulation
- Lean methodology
- Training evaluation





# Was this proposal changed in response to public comment?....YES

- Two clarifications made:
  - Transplant hospitals are not required to use TransNet when repackaging organs
  - OPOs are not required to use TransNet when packaging living donor organs
- Transplant community widely commented that mandatory transplant hospital use needs to occur as well
- Living Donor Committee urges use in living donors



# How will members implement this proposal?

Preparing for TransNet prior to June 1, 2017

- OPOs purchase needed equipment.
- Each tablet/printer set costs ~\$1,000
- OPO Trainers attend and pass proficiency test at UNOS training
  - Train staff at home OPO
- Revise internal protocols, identify and test back-up system



# How will members implement this proposal?

Using TransNet effective June 1, 2017

- Use TransNet for printing and scanning donor ID band
- Use TransNet to print all labels for organs and specimens, vessels, and paperwork accompanying organ
- Use TransNet to scan all package contents
- Transmit data to OPTN TransNet website to enable tracking





# How will the OPTN implement this proposal?

- IT basic programming exists
- Additional programming for VCA and multi-organ will occur prior to mandatory date
- IT support and maintenance will continue
- 24-7 user support will be provided for 1<sup>st</sup> three months
- Training is extensive (3-day session) but already developed
- Overall, this is a very large proposal requiring 3,500 total hours to implement.



# Overall Project Impact

Product

Policy

Impacted  
Populations:

*Deceased Donors*

Total IT Implementation  
Hours

2,545/12,820

Total Overall  
Implementation and  
Maintenance Hours

3,965/19,560

# Resolution 9 (page 40)

- **RESOLVED**, that changes to Policies 1.2 (Definitions), 2.2 (OPO Responsibilities), 16.1 (Organs Recovered by Living Donor Recovery Hospitals), 16.2 (Packaging and Labeling Responsibilities), 16.3 (Packaging and Labeling), 16.3.B (Internal Labeling of Organs), 16.3.C (Internal Labeling of Blood and Tissue Typing Materials), 16.3.D (Internal Labeling of Vessels), 16.3.E.ii (Mechanical Preservation Machine), 16.3.F (External Labeling), 16.4.A (Organ Packaging Documentation Requirements), and 16.5 (Verification and Recording of Information before Shipping), as set forth below, are hereby approved, effective June 1, 2017.

# Extra Slides

After this slide, feel free to include any additional slides you think your Chair may want to pull up if asked certain questions. If you don't include any additional slides, please delete this one and all subsequent slides.



# Supporting Evidence

- Barcoding, printing on-demand, and point of care processing are well established technologies/practices used to prevent errors in health care and other industries
- TransNet uses these technologies/practices



# Supporting Evidence

- TransNet is widely accepted and currently used by over half of OPOs
- 46 OPOs have attended training and 5 new OPOs are signed up for 2016 training
- 6,947 organs from 2,029 donors have been packaged using TransNet
- Cases were created for 72.4% of all deceased donors among current users
- OPO use must be mandated for transplant hospitals and entire system to reap benefits