Proposal to Establish Minimum Requirements for Living Liver Donor Follow-up

Living Donor Committee

Christie Thomas, MB, FRCP, FASN, FAHA, Chair
June 23-24, 2014
The OPTN relies on living donor follow-up (forms) to collect data on the short-term health status of living donors.

Submission of living donor follow-up data is too incomplete to allow for meaningful analysis.

New minimum thresholds for reporting living kidney donor follow-up are now in effect.

We still need policy for living liver donor follow-up.
Goal of the Proposal

Improve short term follow-up reporting for living liver donors, leading to more information about the safety of living liver donation
Living liver recovery programs will be required to:

- Report donor status and clinical information for at least 80% of their living liver donors

- Report laboratory data for at least:
  - 75% of living liver donors on the 6-month follow-up form
  - 70% of living liver donors on the one-year follow-up form
Strategic Plan

Goal: Promote living donor safety

Objective: Minimize risk to living organ donors

Strategy: Properly evaluate potential living donors

Initiative: Develop policy for the medical and psychosocial evaluation of potential living liver donors
Additional Background

- The proposed reporting requirements are based on recommendations from a joint society work group.
- If approved, the policy will only apply to living liver donors who donate after September 1, 2014.
## Public Comment

<table>
<thead>
<tr>
<th>Type</th>
<th>Total</th>
<th>Support</th>
<th>Support as Amended</th>
<th>Opposed</th>
<th>No vote or did not consider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>47</td>
<td>35 (74.47%)</td>
<td>0</td>
<td>4 (8.51%)</td>
<td>8 (17.02%)</td>
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<tr>
<td>Regional</td>
<td>44</td>
<td>10 (91%)</td>
<td>1 (9%)</td>
<td>0</td>
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<tr>
<td>Committee</td>
<td>19</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>14</td>
</tr>
</tbody>
</table>
What Members will Need to Do

- Living liver donor recovery hospitals will continue to report living donor follow-up at six months, 1 year, and 2 years from the date of donation.

- Required fields will need to be completed for donor status, clinical information and laboratory data for the form to be considered complete and contribute to the required thresholds for follow-up.
What Members will Need to Do

- Living liver donor recovery hospitals will not be required to report some elements until the Living Donor Follow-up form can be updated and related required programming is completed:
  - Loss of insurance related to donation
  - Incisional hernia related to donation
  - Platelet count
## Proposed Amendment

- Table 18-2: Timely Data Collection

<table>
<thead>
<tr>
<th>Information is timely if this member:</th>
<th>Collects this information for this form:</th>
<th>Within this time period:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recovery hospital</td>
<td>Living donor follow-up (LDF)</td>
<td>Within the 60-day prior to or after the form due date</td>
</tr>
<tr>
<td></td>
<td></td>
<td>60 days before or after the six-month, 1-year, and 2-year anniversary of the donation date</td>
</tr>
</tbody>
</table>
RESOLVED, that the following new or modified Policies 14.1.B (Required Protocols for Liver Recovery Hospitals), 18.1 (Data Submission Requirements), 18.2 (Timely Collection of Data), 18.5 (Living Donor), 18.5.A (Reporting Requirements after Donation), 18.5.B (Reporting Requirements after Living Liver Donation), 18.5.B (Submission of Living Donor Death and Organ Failure), 18.5.C (Reporting of Non-transplanted Living Donor Organs), and 18.5.D (Reporting of Living Donor Organs Not Transplanted in the Intended Recipient) as set forth in Resolution 16 is effective September 1, 2014.

FURTHER RESOLVED, however, that the modifications set forth on lines 114, 120, and 128 of Resolution 16, are approved, effective pending programming and notice to OPTN membership.