



2nd Quarter 2020

NATCO empowers donation and transplant professionals to achieve their highest potential. NATCO leads the donation and transplant communities by uniting our members, advancing education, and promoting research and advocacy.

## IN THIS ISSUE

[In the President's Words](#)

[NATCO News](#)

[45th Annual Meeting](#)

[In the Spotlight](#)

[Donate Life America](#)

[Advancing Public Policy](#)

[OPTN/UNOS](#)

[Abstracts](#)

## MEMBERSHIP

Procurement and transplant professionals who are committed to the advancement of organ, eye, and tissue donation and transplantation join together to improve outcomes and share best practices.

NATCO promotes and enhances relationships between donation and transplantation. Members improve their skills and competencies through sharing knowledge and best practices.

Click [HERE](#) to join or for more information.

## MEMBER BENEFITS

**PROFESSIONAL DEVELOPMENT:** opportunities to increase skills and expertise; and

## IN THE PRESIDENT'S WORDS

Dear NATCO Family,

***As I write this, we are all continuing to work through the global health emergency caused by the COVID-19 pandemic. During the past week our country has seen a great deal of pain and suffering wrought by the death of George Floyd. We commend your efforts to continue to persevere; to courageously take care of our families and our patients. There is new meaning now to "we are all in this together." We the NATCO community, remain connected and continue to work for a better tomorrow.***



***One of the ways we can remain connected is to Save the Date for NATCO's 45<sup>th</sup> Annual Meeting set to take place as a virtual event on Wednesday August 5<sup>th</sup>, 2020.*** Out of concern for the safety and well-being of our members and staff, we have decided to conduct the NATCO Annual Meeting using a virtual platform. You should have already received communication regarding this "can't miss" event. The NATCO staff and Annual Meeting Planning Committee are working hard to finalize all the details. I look forward to seeing you all virtually as we focus on "Partners in Excellence: A World of Opportunities."



A new NATCO logo!! Have you seen it? The new logo highlights NATCO's mission to help all members achieve their highest potential. A new and exciting upgrade to the NATCO website is also due to launch in the early fall. The new website will allow you to more seamlessly access and utilize all the benefits of your membership.

We are excited to announce that we recently conducted our first **virtual** CCTC Review Course. We had 72 attendees and received incredibly positive feedback regarding this meeting being delivered via a virtual platform. Please continue to watch for additional courses to be offered this summer and fall.

develop leadership within your organization and the community.

**EDUCATION:** geared specifically to donation and transplant professionals to provide the best patient, donor and family care.

**CERTIFICATION:** achieve and maintain current certification requirements

**RESEARCH & SCIENTIFIC INFORMATION:** through NATCO's *Progress in Transplantation* and website. Journal includes CE credit in each issue.

**ADVOCACY:** helping to advance public policy.

## EDUCATION OPPORTUNITIES

Emerging Leaders Program  
[For More Information](#)

## ONLINE LEARNING:

CCTC Review Courses: VIRTUAL COURSE  
July 15-17, 2020  
[For More Information](#)

WEBINARS:  
[For More Information](#)

Online version of the Introductory Course for Transplant Professionals  
[For More Information](#)

While communication has shifted to a virtual platform, please remember that we can continue to support one another within our own NATCO community. NATCO Connect is an opportunity to communicate strategies for managing donors and recipients, staffing, or other topics including COVID-19 related issues. Remember to check it out and engage with your fellow members at <https://natco1.connectedcommunity.org/home>

I am so grateful for the opportunity to serve as your NATCO President. While I am disappointed that I am unable to see you in person at the Kansas City meeting, I know it is what we need to do in order to be safe and healthy. I cannot believe that I am finishing my year as your NATCO President. Please reach out to me at [slerret@chw.org](mailto:slerret@chw.org) with ideas or feedback to make NATCO the best organization it can be. Thank you for all you do for the donation and transplantation community. Most importantly, take care of yourself and stay healthy.

Sincerely,

Stacey Lerret

NATCO NEWS

## Member Highlights

**Former NATCO Board member, Donna Ennis, retires after a half-century of compassionate care, first as a nurse, then as a transplant coordinator, and finally as transplant manager.**



The Board of Directors at NATCO would like to recognize and congratulate Donna Ennis on her recent retirement May 1st from IU Health Methodist Hospital after 47 years of service.

Donna was a dialysis nurse, then worked in Open Heart Recovery (OHR). She left OHR and started her transplant career as a kidney transplant coordinator. She moved from the kidney program to the liver program and joined Chris Gilmore (NATCO Past President) as the second liver transplant coordinator. When Methodist Hospital joined with (IU) University Hospital in the 90's, Donna moved with the patients, physicians, and staff to University Hospital to unite the liver programs. She served there until returning to

Methodist Hospital in 1999 as the clinical manager of the Heart, Lung, and Kidney program.

Donna joined NATCO in 1986 and served on the NATCO Board of Directors, ending her tenure on the Board of Directors as Secretary. Donna has been a huge advocate for NATCO and the mission of our organization. She has encouraged her coordinators by supplying NATCO membership via her organization, supporting coordinators in their quest to become certified and she remained certified herself. She encouraged her coordinators to expand their experiences by serving on NATCO and UNOS/OPTN in different roles.

Donna has been passionate about transplant for the majority of her life, and while retirement will not end that passion, we wish Donna much happiness in this new chapter in her life with her family and friends.

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### **A Big Welcome to Our Kidney/Pancreas Committee Members**

The Board of Directors at NATCO would like to thank all of our members who have shown interest in volunteering for our various work groups within the NATCO organization. During this issue we would like to take the time to introduce you to our volunteers for the ***Kidney/Pancreas Committee***:

#### Co-Chairs:

1. **Gwen McNatt, APRN, PhD, CNN, FNP-BC, FAAN** - Director, Operations for Organ Transplantation Center at Northwestern Memorial Hospital
2. **John Clarke, BS, CTBS** - Manager, Transplant Information Center at Gift of Life Donor Program

#### Committee Members:

1. **A Linette Alvis, MSN, RN, CCTC** - QAPI Coordinator at Duke Transplant Center
2. **Theresa Moore RN, MSN** - Transplant Educator for Solid Organ Transplant at University of Iowa Health Care
3. **Nicole Patterson RN, BSN, CCTC** - Transplant Nurse Manager at UnityPoint Health - Iowa Methodist Transplant Center
4. **Mary Beth Stephens, BSN, CNN, CCTC** - Living Donor and Pre Transplant Nurse Coordinator at University Hospital Missouri
5. **Angelique Tadeo, MSN, RN, CPTC** - ORC III at Donor Network of Arizona
6. **JoAnn Brooks** - Interim Clinical Nursing Director of Solid Organ Transplant at Michigan Medical Transplant Center
7. **Carrie Simpkins, RN** - Director Transplant Services at Wake Forest Baptist Health
8. **Cynthia Kirschbaum, RN,BSN,CPTC** - Clinical Manager at LifeNet Health
9. **Carolyn A. Boone, MSN, RN, CCTC** - Pre-Kidney Transplant Coordinator at Duke Transplant Center
10. **Jacqueline Staten RN,BSN, CPTC, FCCS** - Clinical Services Manager at LifeNet Health
11. **Heather Wertin, RN, BSN, MPH** - Program Manager, Abdominal Transplant at Barnes-Jewish Hospital
12. **Bill Thompson, RN, BHSA, MBA, CPTC** - Transplant Center Liaison at Gift of Life Michigan
13. **Heather Swonger, RN, BSN, CCTC** - Living Donor Coordinator at Virginia Mason Hospital
14. **Stephanie Ferrara, MSN, RN, CCTC** - Post Kidney/Pancreas Transplant Coordinator at Beth Israel Deaconess Medical Center
15. **Sara Geatrakas, MSN, RN CCTC** - Manager, Organ Transplant at Hackensack University Medical Center
16. **Michael Hulburt, MSN, RN, CCTC** - Abdominal Transplant Coordinator at Hospital of the University of Pennsylvania

17. **Richard Kolovich, BSN, RN, CCTC, CPTC, CTBS** - Director, Tissue & Ocular Recovery Services at The Living Legacy Foundation of Maryland
18. **Shelly Lyons, RN, BSN, CCTC** - Abdominal Transplant Coordinator at Allegheny General Hospital
19. **Linda Wright, DrNP, RN, CNN, CCTC** - Clinical Manager of Abdominal Organ Transplant at Jefferson Transplant Institute
20. **Misty Armstrong, RN, CPTC** - Organ Team Lead at Legacy of Hope Alabama
21. **Amy Johnson, BSN, RN-BC, CCRN, CPTC II** - OWS Team Lead, PTC II at Legacy of Hope Alabama
22. **Kelly Sattley, RN, CCTC** - Kidney Transplant Coordinator at Transplant Institute of Florida
23. **Clint Hostetler** - Vice President of Clinical Operations at LifeShare of Oklahoma
24. **Jeff Darcy, BSN, RN, CCTC** - Transplant Coordinator at Primary Children's Hospital
25. **Kavita Ponniah** - Riverside Community Hospital
26. **Michelle Sanders** - UC Davis Health

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## Updates in Transplant Nutrition

### Certified Clinical Transplant Dietitian

NATCO is pleased to announce the Certified Clinical Transplant Dietitian (CCTD) designation has been awarded to an inaugural class of 2020. 76 candidates are now certified transplant dietitians. This certification recognizes registered dietitians practicing in transplantation who have met strict eligibility requirements encompassing registration status, experience, and professional engagement. Congratulations on a well-deserved achievement!

**The next application period will be open until October 1st, 2020.**

**For more information regarding eligibility requirements, and for links to the application, please visit: <http://natco1.org/certifications/cctd.asp>**

45th Virtual Annual Meeting, August 5, 2020  
REGISTRATION NOW OPEN!



The NATCO 45th Annual Meeting is now a virtual event. Please join us on August 5th for our presentation of Partners in Excellence: A World of Opportunities. The focus for this meeting is working together towards improved donation and transplant outcomes through shared ideas and advanced practices.



This year we will offer a hybrid learning opportunity consisting of a one day live virtual event followed by on-demand, pre-recorded content. The live event will take place on August 5th from 12pm - 4pm Eastern Time. Choose from one of five different tracks for sessions containing best practices, and innovative information on topics of interest to your area of expertise.

[REGISTER HERE](#)

Registration includes the August 5th Live Webcast, plus all the sessions in your choice of one track:

[Procurement Track Agenda](#)

[Hospital Engagement Track Agenda](#)

[Family Services Track Agenda](#)

[Abdominal Transplant Track Agenda](#)

[Thoracic Transplant Track Agenda](#)

HERE'S A PEEK AT WHAT WE HAVE LINED UP:

<p><b>Introduction to Partners in Excellence: A World of Opportunities</b>  <i>Stacee Lerret, PhD, RN, CPNP-AC/PC, CCTC, FAAN</i>            NATCO President</p>
<p><b>Innovation in Transplantation: The First DCD Heart Transplant in the United States</b>  <i>Jacob N. Schroder, M.D.</i>            Assistant Professor of Surgery Surgical Director, Heart Transplant Co-director, Cardiothoracic Surgery ICU            Division of Cardiothoracic Surgery, Duke University Medical Center  <i>Andrew S. Mullins, MBA, FACHE</i>            Chief Operating Officer, Lifeline of Ohio            Moderator: <i>Stacee Lerret, PhD, RN, CPNP-AC/PC, CCTC, FAAN</i>            NATCO President</p>
<p><b>Highlights of a UNOS Systems Performance Improvement Initiative: What Every Coordinator Needs to Know</b>  <i>Matthew Cooper, MD</i>            Medstar Georgetown Transplant Institute            UNOS Vice President/President Elect            Moderator: <i>Stacee Lerret, PhD, RN, CPNP-AC/PC, CCTC, FAAN</i>            NATCO President</p>
<p><b>Pediatric Liver Transplant Recipient: A Father's Story</b>  <i>Bakari Sellers</i>            CNN Analyst and Former South Carolina House of Representative            Moderator: <i>Stacee Lerret, PhD, RN, CPNP-AC/PC, CCTC, FAAN</i>            NATCO President</p>
<p><b>UNOS Year in Review: Including the Impact of COVID-19 on Donation and Transplantation</b>  <i>Maryl R. Johnson, MD, FACC</i>            University of Wisconsin Hospital and Clinics            UNOS Immediate Past President</p>
<p><b>News from the Hill: Current Trends in Transplant Legislation and Advocacy</b>  <i>Matthew Cooper, MD</i>            Medstar Georgetown Transplant Institute            UNOS Vice President/President Elect            Moderator: <i>Stacee Lerret, PhD, RN, CPNP-AC/PC, CCTC, FAAN</i>            NATCO President</p>
<p><b>How to Take Care of Yourself in Our 24/7 World of High Stress</b>  <i>Andrew Sauer, MD</i>            University of Kansas Medical Center            Moderator: <i>Stacee Lerret, PhD, RN, CPNP-AC/PC, CCTC, FAAN</i>            NATCO President</p>
<p><b>Closing</b>  <i>Stacee Lerret, PhD, RN, CPNP-AC/PC, CCTC, FAAN</i>  <i>Gail Stendhal, DNP, CPNP-PC/AC, CCTC</i>            NATCO President</p>



The NATCO Transplant Nutrition Conference is now a virtual event. Please join us on August 6th and 7th for our presentation of Partners in Excellence: A World of Opportunities. The focus of this meeting will be on clinical management, best practices and innovative research in all areas of adult and pediatric transplant nutrition. This year we will offer a hybrid learning opportunity consisting of a two-day live virtual event followed by on-demand, pre-recorded Pediatric sessions.

Nutrition Conference Agenda [HERE](#)

Registration Fee: \$195 per person, includes the August 6th-7th Live Webcast. An optional Pediatric session will be available on-demand for an additional \$50. All on-demand sessions will be made available through the NATCO Academy and will be available through an individually assigned account. Unique links and password access to the live webcast will be provided closer to the event. RD Credit will be available to registered attendees only.

[REGISTER HERE](#)

IN THE SPOTLIGHT

**Transplant Care in the COVID-19 Era: One Center's Experience**

By: Dawn Eck, MSN, ACNP-BC, NEA-BC, MMHC

### **Transplant Care in the COVID-19 Era: One Center's Experience**

The arrival of COVID-19 into the Southeast necessitated many practice changes for the care of our center's transplant patients. Some of those changes include how we interface with our patients, the physical location of our staff, and how we approach new transplants.

#### **Communication with Patients**

One of our first concerns was communication with our patients. In early March, many of the transplant departments sent letters to both pre- and post-transplant patients, reinforcing the teams' commitment to their patients' care, and advised them on social distancing, masking, and hand-washing recommendations. We also let them know that we'd be in touch regarding upcoming appointments, and shared the hospital's COVID-19 website, and new visitation policies. The letters were sent via our patient portals for those who were enrolled, and physically for those who had not.

[READ MORE...](#)

### DONATE LIFE AMERICA

By: Lida Pieterman, Senior Writer and Editor, Donate Life America

#### Thinking of You

We want to take a moment to say *thank you* for all that you do to help save and heal lives. Amidst these challenging times, please stay safe, and know that you are in our thoughts. We will get through this together!

Fondly,  
The Donate Life America Team

#### Donate Life Masks

[DonationMerchandise.com](http://DonationMerchandise.com) Will have blue and green masks featuring the Donate Life and Done Vida logos beginning at the end of May. The masks are made of canvas and have elastic ear loops. They are also available for bulk order at [Members.DonationMerchandise.com](http://Members.DonationMerchandise.com).



#### 2020 Donate Life Transplant Games - New Dates

Due to the ongoing impact of COVID-19, the 2020 Donate Life Transplant Games originally scheduled for this summer will now take place **July 16 - July 21, 2021** in the New Jersey Meadowlands.

Registration will reopen in the coming weeks. All existing registrations remain valid for the 2021 dates. Please visit [TransplantGamesofAmerica.org](http://TransplantGamesofAmerica.org) for additional details and ongoing updates.



#### Congratulations 2020 National Donate Life Blue & Green Day Photo Contest Winners!

A record-setting 895 incredible photos were submitted in this year's National Donate Life Blue & Green Day Photo Contest! The amazing creativity from the Donate Life Community shows that, even while apart, we remain very much together. The winners can be viewed on the [DLA Facebook page](#). Thank you to all who participated!



ADVANCING PUBLIC POLICY  
By: Wade Delk



Congress' attention has been focused on a response to COVID-19, so not much has changed since my last article, except that I hope we are getting closer to the other side of this pandemic and can soon attempt to return to normalcy. I would simply like to reiterate my last request. If you have not already done so, please go to <https://honorthegift.org/act/> to send a letter to your two Senators and Representative requesting they support S.3353 and H.R. 5534 - Comprehensive Immunosuppressive Drug Coverage Act for Kidney Transplant Patients.

We need to make sure that when they are ready and willing to focus on this, we still have support and momentum to get it passed and see that it becomes law.

-Wade

OPTN/UNOS



**Stay Informed. Make Your Voice Heard. *You are the OPTN.***

**By: Anne Paschke**

## An invitation from UNOS CEO Brian Shepard

While many in the country are still sheltering in place, donation and transplant professionals have continued the lifesaving work of recovering organs, supporting donor families, and transplanting and caring for recipients in every region.

This is why I want to share with you some encouraging data-despite the challenges presented by this pandemic, the number of donations and transplants has increased for three consecutive weeks.

This improvement didn't happen by itself. It's a result of our community coming together to brainstorm and strategize with each other. Collaboration is when we are at our best. It's true here at UNOS, and at every OPO, transplant hospital and histocompatibility lab in the country.

That's why I invite you to dive into collaboration right now and [register for the OPTN COVID Collaborative](#). There you will find other members, connecting in real time to share effective practices in discussion forums. Current discussion threads revolve around a variety of topics including:

- Patient testing: Whether and how programs are testing potential recipients
- Procurement team exposures: How OPOs are handling potential threats
- OPO strategies: How to plan for reopening of nonessential operations
- Living donation: Processes and timelines for antibody testing
- Organ utilization: Are delays in placement having an impact?



- Telemedicine: Incorporating virtual practices into patient care

UNOS established this platform in order to help you work together to address the COVID-19 operational challenges you are experiencing.

After registering, I encourage you to actively participate in the Collaborative-I challenge you to ask a question, and answer a question. It may be the answer another member has been looking for. This is a time for learning together, across disciplines and regions. Your expertise, experience and collaboration are invaluable to our community's efforts to save lives during the global pandemic.

#### ABSTRACTS

By: Linda Ohler, MSN, RN, CCTC, FAAN

### [COVID-19 in Solid Organ Transplant Recipients: Initial Report from the US Epicenter](#)

Solid organ transplant recipients may be at a high risk for SARS-CoV2 infection and poor associated outcomes. We herein report our initial experience with solid organ transplant recipients with SARS-CoV2 infection at two centers during the first 3 weeks of the outbreak in New York City. Baseline characteristics, clinical presentation, antiviral and immunosuppressive management were compared between patients with mild/moderate and severe disease (defined as ICU admission, intubation or death). 90 patients were analyzed with a median age of 57 years. 46 were kidney recipients, 17 lung, 13 liver, 9 heart and 5 dual-organ transplants. The most common presenting symptoms were fever (70%), cough (59%) and dyspnea (43%). 22 (24%) had mild, 41 (46%) moderate and 27 (30%) severe disease. Among the 68 hospitalized patients, 12% required non-rebreather and 35% required intubation. 91% received hydroxychloroquine, 66% azithromycin, 3% remdesivir, 21% tocilizumab and 24% bolus steroids. Sixteen patients died (18% overall, 24% of hospitalized, 52% of ICU) and 37 (54%) were discharged. In this initial cohort, transplant recipients with COVID-19 appear to have more severe outcomes, although testing limitations likely led to undercounting of mild/asymptomatic cases. As this outbreak unfolds, COVID-19 has the potential to severely impact solid organ transplant recipients.



### [Clinical Utility of Cytomegalovirus \(CMV\) Serology Testing in High-risk CMV D+/R- Transplant Recipients](#)

Late-onset cytomegalovirus (CMV) disease is a significant problem in D+/R- solid organ transplant (SOT) patients who receive antiviral prophylaxis. We assessed the clinical utility of CMV IgG and IgM serology testing for predicting late-onset CMV disease. We evaluated 352 D+/R- transplant recipients who participated in a trial comparing 100 days of ganciclovir versus valganciclovir prophylaxis. CMV serology was assessed on day 28, 56, 100, and 6 and 12 months post-transplant. IgG seroconversion occurred in 26.9% of patients by day 100, and in 63.4% and 75.3% by 6 and 12 months, respectively. IgM seroconversion occurred in 8.3%, 41.8% and 54.9% by day 100, month 6 and month 12, respectively. Seroconversion by day 100 (end of prophylaxis) was not predictive of subsequent CMV disease (CMV disease 13.3% if seropositive vs. 17.8% if seronegative; p = NS). However, at 6 months post-transplant, IgG serostatus was predictive of subsequent CMV disease between month 6 and 12 (CMV disease 1.3% if seropositive vs. 10.0% if seronegative; p = 0.002). In D+/R- patients, CMV serology testing is for the most part not clinically useful for predicting subsequent disease. However, seroconversion by 6 months may be useful for identifying patients at risk of late-onset CMV disease.

### [Economic impacts of alternative kidney transplant immunosuppression: A national cohort study](#)

Understanding the economic implications of induction and maintenance immunosuppression (ISx) is important in developing personalized kidney transplant (KTx) care. Using data from a novel integrated data set including financial records from the University Health System Consortium, Medicare, and pharmacy claims (2007-2014), we estimated the differences in the impact of induction and maintenance ISx regimens on transplant hospitalization costs and Medicare payments from KTx to 3 years. Use of thymoglobulin (TMG) significantly increased transplant hospitalization costs (\$12 006; P = .02), compared with alemtuzumab and basiliximab. TMG resulted in lower Medicare payments in posttransplant years 1 (-\$2058; P = .05) and 2 (-\$1784; P = .048). Patients on steroid-sparing ISx incurred relatively lower total Medicare spending (-\$10 880; P = .01) compared with patients on triple therapy (tacrolimus,

antimetabolite, and steroids). MPA/AZA-sparing, mammalian target of rapamycin inhibitors-based, and cyclosporine-based maintenance ISx regimens were associated with significantly higher payments. Alternative ISx regimens were associated with different KTx hospitalization costs and longer-term payments. Future studies of clinical efficacy should also consider cost impacts to define the economic effectiveness of alternative ISx regimens.

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### [Development of the living donation and kidney transplantation information made easy \(KidneyTIME\) educational animations](#)

Current web-based educational approaches about living kidney donation (LKD) are complex, lengthy, and/or text-laden, which may impair accurate interpretation of information, thereby limiting kidney transplant access.

#### Purpose

This paper describes the process of developing animation-based LKD education designed to be suitable for and acceptable to kidney transplant candidates and their support networks.

#### Methods

Based on formative work, early animation prototypes were designed by a transplant surgeon and a health communication expert. In qualitative focus groups and individual interviews, animation prototypes were shown to 46 kidney transplant recipients, 28 kidney transplant candidates, 32 previous or potential kidney donors, 10 caregivers, 32 transplant providers, 24 dialysis providers, and 4 cultural and community advisors for their input regarding animation suitability, acceptability, and potential usability/feasibility. Viewer feedback was used to iteratively refine the animations. Animation design to facilitate adult learning was guided by elaboration theory, Bandura's self-efficacy theory, and Mayer's cognitive theory of multimedia learning.

#### Results

KidneyTIME currently consists of 12 animations about LKD process, benefits, and risks.

#### Conclusions

Patients/friends/family members, experts, and stakeholders provided valuable feedback to the research team that was integrated into the development of KidneyTIME with the goal of enhancing suitability, acceptability, engagement, usability, and feasibility of dissemination.

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### ABOUT OUR SPONSOR

Organ Recovery Systems is committed to delivering exceptional clinical tools and services to preserve and protect donor organs. We support 289 transplant programs in 39 countries with the LifePort® Kidney Transporter and the gold-standard in preservation solutions, UW solution (SPS-1®) and UW machine perfusion solution (KPS-1®). From the start, Organ Recovery Systems' mission has been to support transplant professionals in their service to improve outcomes for their patients. Now over 20 years later, with over 100,000 kidneys preserved in the LifePort Kidney Transporter, we are honored that the organ donation and transplant community continues to give us the opportunity to help save and improve lives.



The LifePort Liver Transporter clinical trial is underway! PILOT™ (Preservation to Improve Liver Outcomes in Transplantation) is a prospective randomized multi-center trial comparing LifePort Liver Transporter system with Vasosol® to static cold storage. This trial is registered with clinicaltrials.gov and has been approved by US Food and Drug Administration (Investigational Device Exemption) and the Center for Medicare and Medicaid Services (CMS). The FDA has approved 8 transplant center study sites and 140 subjects to participate in the trial; 70 patients will be in the study arm and 70 in the control cohort. Patients will be tracked for a year post transplant to accommodate all the outcomes to be measured.

[www.organ-recovery.com](http://www.organ-recovery.com)

**Stay Connected**



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