



# In Touch

The latest news and information from NATCO

## Fourth Quarter 2019

*NATCO empowers 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.*

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### 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 develop leadership within your organization and the community.

### IN THE PRESIDENT'S WORDS

Dear NATCO Family,

As I am writing this letter, I cannot believe that Thanksgiving was one week ago already. We have already had a few snowfalls here in Wisconsin and while I don't like shoveling, I do think that there is something beautiful about a fresh coat of snow. The winter holidays are still my favorite and while at times it can be hectic...I secretly LOVE it! The upcoming holidays will afford all of us some well-deserved rest and meaningful time spent with friends and family.

On behalf of NATCO, I would like to say thank you to all Kidney/Pancreas, Liver, and Thoracic committee members. These new committees have been hard at work since forming just a couple of short months ago. I was impressed with the thorough research that each committee completed to write the detailed responses. I feel strongly that our public comment responses are critical to elevating NATCO as an organization. A huge thank you to the leaders and members of these important committees!

When this letter arrives, we will have just finished the annual NATCO Introductory Course in Tempe, AZ. Fun NATCO fact: Did you know that the first NATCO Introductory Course took place 37 years ago in Andover, MA? I still remember when I attended this meeting 15 years ago as a new coordinator (seems like just yesterday!). I hope that this year's attendees were energized and motivated heading back to their respective institutions after learning about the amazing field of donation and transplantation.

One of the new programs we are launching in 2020 is the [Emerging Leaders Program](#). All NATCO members are eligible to participate in this inaugural leadership course. This is an incredible opportunity for both donation and transplant professionals to learn, practice and master the skills to be a leader.

We have so much to look forward to in the next year. Remember to Save the Date now for NATCO 2020! NATCO's 45<sup>th</sup> Annual Meeting will take place August 4-7<sup>th</sup>, 2020 in Kansas City. I look forward to seeing many of you.

I am so grateful for the opportunity to serve as your NATCO President. I enjoyed meeting some of you in Tempe in early November and I look forward to getting to know more of our incredible NATCO membership throughout my term. Together, we



**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](#)

### CCTC Review Courses

[For More Information](#)

### WEBINARS:

[For More Information](#)

### ONLINE LEARNING:

**Online version of the Introductory Course for Transplant Professionals**

[For More Information](#)

**Fundamental Critical Care Support (FCCS) Self-directed Online Course**

[For More Information](#)

**Clinician's Guide to Donation and Transplantation**

[For More Information](#)

can make a difference in the lives of donor and transplant families. Please reach out to me with ideas or feedback. My email is [slerret@chw.org](mailto:slerret@chw.org).

Sincerely,

Stacey Lerret

## NATCO NEWS

### 44th Annual Meeting Poster Presentation Highlights

by Jennifer Reese,  
BSN, MSN, ANP-BC, APRN-CNP, CCTC

The Board of Directors at NATCO is proud to continue to showcase some of our poster presentations and presenters from the 44th Annual Meeting in Bellevue, Washington in August 2019.

#### ***How a Strong Coroner Relationship Assisted in Excellent Family Care***

Presenter: Kristin Eachus

Engagement of CME office & hospital in providing an exceptional experience for family in the midst of incredible /personal loss. The OPO experienced two brain dead donors due to MVA where siblings were deceased at the site of the accident and transported to the coroner's office. While providing family care for the donors, additional family support and outreach to the coroner office was done to assist with providing recognition of the additional losses. The OPO wanted to acknowledge the bond the siblings shared by honoring not only the organ donor but also the sibling that did not have the opportunity to become an organ donor. Best practice of family care for the OPO provide keepsakes of the donor and guidance with funeral arrangements and body transportation. In addition to hand printing the donors, through collaboration with the coroner, OPO staff was able to handprint the deceased siblings at the coroner office and arrange transport for siblings to travel together to the funeral home.



Each family was provided with handprints of the donor and their sibling, along with arranging with the coroner for siblings to be transported to the funeral home together. Family provided feedback of appreciation of the acknowledgment of the additional loss and helped them with their grief process. Coroner and hospital relationships strengthened, acknowledgment to the OPO engaging in processes that provided care for the entire loss of the family. Maximized partnerships result in increased levels of family care. Since the collaboration of the OPO with coroner to honor the family's additional losses, there has been increased partnering with the coroner and hospital staff to continue to honor the family's losses. Increased engagement has been seen with hospital taking lead to provide more ways to honor the donor (i.e. donor honor walk) and the coroner has a welcome environment for the OPO to provide additional family care as needed.

#### ***Self-Care Sessions Improve Work Life Balance and Stress Management in Transplant Coordinators***

Presenter: Melissa Nugent, BSN, RN, CCTC

The need for a self-care program to improve the perception of work-life balance and stress levels of Transplant Coordinators in a busy pediatric transplant center was determined by employee engagement survey results and from feedback given by the transplant coordinators and the transplant leadership team. Transplant staff were

polled to determine their interest in attending self-care sessions targeted to improve work life balance and stress coping skills. Class topics included mindfulness training, empathy training, vision boarding, and other team building sessions. The participants completed a survey to compare their perception of work life balance and ability to handle stress at work before and after the introduction of self-care sessions.

Results: All survey participants answered that their ability to handle stress while at work and their perception of work-life balance has improved since attending the self-care sessions. Results indicate that the self-care sessions positively impacted our transplant staff's stress levels and perception of work-life balance.

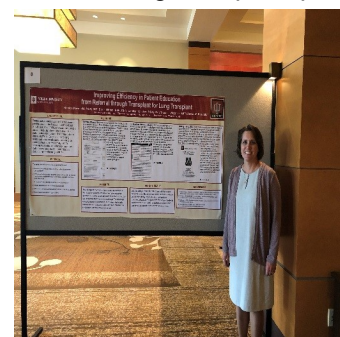


### ***Streamlining Education for Lung Transplant Candidates***

Presenter: Brenda Kowinski, MSN, RN

During their quality meetings, lack of understanding was noted in lung transplant patients immediately post-op. Through performance improvements, the transplant team opted to start post-op education during the listing phase to increase the amount of retained teaching.

After the initiation of post-op teaching during the listing phase, the patients started to retain more and became more interactive with the post-transplant teaching. By involving the post-transplant education during the listing phase of transplant candidates, more information can be retained and learning is enhanced for post-transplant patients.



### ***Psychosocial Stratification for Kidney Transplant***

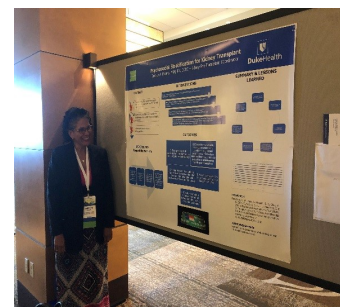
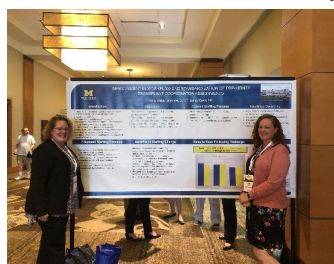
Presenter: Carolyn A. Boone, MSN, RN, CCTC

All potential kidney transplant candidates are vetted by Social Workers for Caregiving plan with Psychosocial Assessment of Candidates for Transplantation (PACT) at Duke Health. The lower the PACT scores helped identify patients that will have difficulty postoperatively. These scores helped the team with successful Caregiving planning that lead to improved outcomes post kidney transplant.

### ***Improvement in Workflow and Standardization of Pre-Kidney Transplant Coordinator Assignments***

Presenters: Tonya Walder, BSN, RN, CCTC & Tammy Cavin, RN

There is constant difficulty in managing coordinator assignments due to fluctuating acuity and individual physician practices. A need was identified at University of Michigan to improve workload equitability and further standardize practices. Individual coordinator assignments were evaluated for number of open evaluations, number of actively listed patients, the number of





patients on hold, as well as the overall trends in patient assignments. Based on the information collected, a coordinator pairing system was developed. Coordinators with a heavier patient assignment were partnered with a coordinator with a lighter load. Sharing of responsibilities as well as rotating clinic and meeting responsibilities provided additional time at the desk to manage waitlists as well as provide improved patient care.

The evaluation of assignments and coordinator pairing resulted in improved waitlist management, improved staff satisfaction, and minimized the previous working style that attributed to some variations in standardization.

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## Updates in Transplant Nutrition

**By: Daniel Pieloch MS, RD, CPHQ, CCTC, Transplant Nutrition Executive Work Group Chair**



The 8th Annual 2019 NATCO Transplant Nutrition Conference this summer in Bellevue, WA was attended by transplant dietitians from all over the country and continues to be the gold standard for transplant nutrition education. This forum often serves as the launching pad for initiatives to advance the transplant dietitian profession. Several of these were realized in the past year and highlighted below.

1) A formal transplant dietitian practice group was established with several working subgroups created to help tackle key issues (social media, research, pediatrics, education and newsletter). 2) A transplant nutrition list serve was created in early 2019 and now has over 400 transplant dietitian members. The list serve can be found via this [link](#).

3) Instagram: Transplant RD, Twitter: @TransplantRD, and Facebook: Transplant\_RD accounts were made to disperse information and enhance community for dietitians practicing in transplantation.

4) A Transplant Dietitian Survey was performed and captured data from 320 dietitians working at 196 different transplant centers. This research updates older metrics and establishes a plethora of new organ specific benchmarks for most things transplant nutrition/dietitian related including productivity metrics, obesity criterion, and even how programs measure functional status just to name a few.

5) A NATCO sponsored Transplant Dietitian of the Year Award will be implemented starting in 2020.

Special thanks goes to Asa Eliasson MS, RDN, LDN (UF Health), Anne Marie Rivard MPH RD CSR CDN (Yale New Haven), Tom Pietrowski RD (Henry Ford), Marian Glickbauer MS, RD, CDN, CSR, CNSC (Northwell Health), AJ

Horvath RD (Sentera), and Jodi Mettel MS, RD, LDN (UNC) for their hard work in making these initiatives successful.

Special acknowledgement goes also to members of the Transplant Nutrition Executive Work Group who not only facilitate and oversee these initiatives but are responsible for planning the Transplant Nutrition Conference. Members include Jeanette Hasse PhD, RD, LD, FADA, CNSC (Baylor University Medical Center), Linda Ulerich RDN, CNSC (IU Health), Stacey Beer MPH, RD, LD, CSP (Texas Childrens), Sara DiCecco MS, RDN, LD (Mayo Rochester) and Summer Van Arsdale RD CSR (Banner Health).

Lastly.....a **BIG ANNOUNCEMENT** for transplant dietitians is expected soon! Stay tuned.

## FOCUS ON 2020

As we look ahead to 2020, NATCO will be rolling out some new and exciting programs aimed at providing you with the tools needed to be successful in your careers.

At our Introductory Course for Procurement and Transplant Professionals in Tempe, AZ last month, we introduced a new opportunity to help define your professional goals and objectives. We invited each attendee to a one-on-one session designed to outline short and long-term goals to help define your personal path for professional development. This opportunity was met with great enthusiasm and success.



We would like to extend this invitation to each NATCO member. If you would like to arrange a 20-minute, no cost, consultation to discuss your personal professional goals and objectives, we invite you to contact the NATCO Executive offices for an appointment. Please email us at [info@natco1.org](mailto:info@natco1.org).

## IN THE SPOTLIGHT

### Colts Mascot Partners with Indiana Donor Network in 'Mascots4Life' Campaign

By: Mark Back, Media Relations and Communications Specialist



*The Indianapolis Colts and Indiana Donor Network will work together to raise awareness around the need for organ, tissue and cornea donors.*

Indiana Donor Network has entered into a partnership with the Indianapolis Colts to raise awareness around organ, tissue and cornea donation and transplantation. Blue, the official mascot for the Indianapolis Colts, will help Indiana Donor Network reach thousands of football fans with the donation message through a new Mascots4Life campaign.

The campaign website can be found at <https://registerme.org/campaign/colts>.

Blue, who was voted the 2019 NFL Mascot of the Year, will help educate people of all ages about the importance of donation at Colts games, through media and in other events.

## DONATE LIFE AMERICA

By: Lida Pieterman, Communications and Outreach Coordinator, Donate Life America

### National Donate Life Month 2020 Artwork - Garden of Life

For National Donate Life Month 2020, Donate Life America was inspired by the springtime scene of a garden. A garden and the insects in it serve as symbols of hope, courage and transformed life - themes repeatedly found within the donation and transplantation journey.

The Donate Life Garden is an ecosystem of plants, insects, and other components working together to form an interconnected living system. We each have the potential to nurture and enrich our communities through organ, eye and tissue donation. This National Donate Life Month, we ask you to be a part of this lifesaving and healing garden by registering as an organ, eye and tissue donor, becoming educated about living donation, being a caregiver, and championing the Donate Life cause.

Please join us **Wednesday, January 9 from 2:00-3:00pm ET** for the National Donate Life Month Webinar to get ideas from the Donate Life Community (registration will open in December). Printed materials and resources will be available to order and download from [DLACommunity.net](http://DLACommunity.net) in December/January. In the meantime, start planning your beautiful Donate Life Gardens now so that they will be in full bloom this April!



### Save the Date - National Donate Life Blue & Green Day 2020

**April 17, 2020 is National Donate Life Blue & Green Day.** In past years, we have seen some terrific blue and green office décor and lunch spreads. What can you do to take your celebration to the next level? It is never too early to start thinking about how to show your Donate Life spirit in blue and green! You can also participate in DLA's annual Blue & Green Day Photo Contest. Please mark your calendars now and stay tuned for photo contest details in early 2020.

### Donate Life Art Contest Winner

During August and September, DLA and the Donate Life Store (managed by Boost) hosted the first-annual Donate Life Art Contest - prompting participants to illustrate what *Donate Life means* to them. We received many beautiful, thoughtful and inspirational pieces. The winning artwork was created by Brigette McKern of Tampa, Florida. Explaining her creative process, Brigette said, "Reflecting on five years post double lung transplant, [for this piece] I wanted to use words that describe what an organ donor has given me."

To read more and see the limited-edition items featuring the artwork available to purchase, visit the [Donate Life Store](http://DonateLifeStore.com). We hope you will share this information with your patients and their families. Please watch for upcoming opportunities to get them involved with Donate Life outreach!



## ADVANCING PUBLIC POLICY

By: Wade Delk



We are still anxiously waiting for the introduction of Immunosuppressive Drug Coverage legislation. Recent events are occupying much of the legislator's time and taking all of the oxygen away from other issues. There are still many of them very interested in this issue, but they cannot get the leadership to focus on it at this time, which unfortunately means it will sit for a little longer. Those in the transplant community still believe the immunosuppressive legislation can be passed in this Congress, and I am one of them.

On October 31, CMS sent a press release on finalized changes to the Medicare rules for Durable Medical Equipment Prosthetics, Orthotics, and Supplies, ESRD Prospective Payment system, and the ESRD Quality Incentive Program. The rule changes are intended to support the development and use of innovative technologies, provide greater access to new treatments in kidney care and modernize the program to combat waste, fraud and abuse in the Medicare program. You can find a fact sheet on this final rule here:

<https://www.cms.gov/newsroom/fact-sheets/cy2020-end-stage-renal-diseasedurable-medical-equipment-final-rule-cms-1713-f>

This past April, Congressman David McKinley (R-WV) sent a letter to Dr. Norman Sharpless, the Acting Commissioner of the FDA, requesting an update on the status of their interest in taking regulatory action to limit access of over-the-counter (OTC) acetaminophen greater than 325 mg. The concern is that if the FDA does take such an action, it will create a barrier to safe over-the-counter pain relief for patients, including those with a kidney transplant, who are not able to take other pain medications like NSAIDs. Not to mention that OTC acetaminophen is a cost effective way for patients to manage their pain.

In early October, the FDA responded that they share the concerns regarding preserving access, and are mindful of the need to balance benefit and risk to protect public health. They stated that their original notice asking that manufacturers limit the amount of acetaminophen to no more than 325 mg in each tablet or capsule was only intended for prescription medication. The letter concluded by them saying that patient access to OTC acetaminophen is something they take seriously. They did not officially say that they would not limit it at some point in the future though. This is something we will be watching to see what if the FDA takes any future action.

Pre-existing condition elimination is back in the news. In October of 2018, guidance was issued to the states by CMS allowing them to use subsidies to purchase cheaper plans that some say can affect patients with pre-existing conditions. As of this writing no states have done this. It may be an effort to bring the Affordable Care Act (ACA) back in to focus as we gear up for a Presidential election year, but I want you to be aware of it, since it is something we worked very hard on to have included in ACA.

The Living Donor Protection Act (H.R. 1224/S. 511, identical bills), is now up to 80 House, and 15 Senate co-sponsors. We are getting closer to the 100 co-sponsor threshold that we are seeking in the House.

We will keep you updated on issues of importance in Congress, or state legislatures that may affect organ donation and transplantation. If you have questions or would like additional information please contact me at [wadebdelk@gmail.com](mailto:wadebdelk@gmail.com) or 202-253-7862.

-Wade

## OPTN/UNOS



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

**By: Christopher L. Wholley & Anne Paschke**

This quarterly update briefs transplant coordinators on important news and available resources.

### **Policy Changes Pending Implementation**

*Heart Allocation Changes* - Replacing Donation Service Area (DSA) with a 250 nautical mile distance from a donor hospital will be effective in January 2020 ([OPTN Policy Notice](#)). A PDF explaining how this will affect existing classifications will be available on UNOSConnect on December 5, 2019.

See all approved pending policy changes and their targeted implementation dates [here](#).

### **Winter/Spring 2020 Regional Meetings**

See dates and locations below to help you plan to attend your next regional meeting. To better prepare you for what will be discussed at these meetings, we'll post webinar recordings on [this page](#), when available.

Date	Region	Location
January 30	4	Dallas, TX
February 5	6	Portland, OR
February 6	8	Kansas City, MO
February 13	5	San Diego, CA
February 14	2	Baltimore, MD
February 28	3	Atlanta, GA
March 2	1	Waltham, MA



March 3	7	Chicago, IL
March 12	10	Toledo, OH
March 13	11	Charlotte, NC
March 18	9	New York, NY

### Forthcoming Policy Proposals

The next OPTN public comment cycle is fast approaching in January 2020. The following proposals are targeted for public comment (*policies appearing in public comment subject to change*):

Guidance on the Use of Social Media by Transplant Candidates and Potential Donors	Updates to HLA Equivalency Tables (candidate-donor antigen equivalencies, and candidate-donor unacceptable antigen combinations)
Increasing Access to High MELD and Status 1 Candidates in Hawaii and Puerto Rico	Update to National Liver Review Board (NLRB) Operational Guidelines
Updates to VCA Recipient Data Collection	Modifications to Pediatric Heart Allocation Policy
Lung Allocation Score (LAS) Refinements	Considerations in ABO Testing
Continuous Distribution of Lungs	Creation of Heart and Lung Transplantation Committees
Defining Kidney Medical Urgency	Modifications to Pancreas Import Back-up

### Educational Resources

Access UNOSConnect for a comprehensive collection of learning modules that will teach you about policy changes, system updates, and other topics. This free educational resource offers free CEPTCs and also maintains your transcript when re-certifying your ABTC credentials.

- If you're logged onto UNet<sup>SM</sup> - Resources tab → *UNOSConnect*
- If you don't have access to UNet - <https://unosconnect.unos.org/> → *How to Login*

New modules are in development on site survey preparedness, stay tuned!

### Other Helpful Info

- The TCC ListServ has moved! Use LinkedIn for access to the *UNOS Transplant Coordinators group*.
- Access [UNet University](#) for a series of 101 training modules that will orient you to all the applications within UNet and hear what your fellow coordinators have to say about it.
- Find OPTN Transplant Coordinators Committee meeting summaries [here](#) on the OPTN website.
- [Subscribe to the monthly Transplant Pro eNewsletter](#) for the latest updates about policy and newly available resources.

### UNOS: Improving their technology Infrastructure

Back in the summer, the president signed an executive order calling for a number of key improvements in care for people with end stage kidney failure. As part of that broad initiative, the Department of Health and Human Services is asking for ideas and information about how to improve the national information technology system for matching transplantable organs and managing detailed, confidential medical data on transplant patients and organ donors. Read a [note](#) from United Network for Organ Sharing Chief Executive Officer Brian Shepard on the request and ways UNOS is improving its technology infrastructure.

Questions? Contact [member.questions@unos.org](mailto:member.questions@unos.org).

## ABSTRACTS

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

## [Kidney transplant practice patterns and outcome benchmarks over 30 years: The 2018 report of the NAPRTCS](#)



The NAPRTCS has collected clinical information on children undergoing renal transplantation since 1987 and now includes information on 12 920 renal transplants in 11 870 patients. Since the first data analysis in 1989, NAPRTCS reports have documented marked improvements in patient and allograft outcomes after pediatric renal transplantation in addition to identifying factors associated with both favorable and poor outcomes. The registry has served to document and influence practice patterns, clinical outcomes, and changing trends in renal transplantation and also provides historical perspective. This report highlights current practices in an era of major changes in DD kidney allocation and continuing steroid minimization. This report presents outcomes of the patients in the NAPRTCS transplant registry up to end of 2017. In particular, an increase in the cumulative incidence of late first AR has occurred in the most recent cohort, while all prior cohorts had a lower cumulative incidence of late first AR.

## [Interactions between anti-infective agents and immunosuppressants-Guidelines from the American Society of Transplantation Infectious Diseases Community of Practice](#)

These updated guidelines from the Infectious Diseases Community of Practice of the American Society of Transplantation provide an update on potential drug-drug interactions between anti-infectives and immunosuppressants, which are most notable with calcineurin and mTOR inhibitors. Drug-drug interactions may occur through pharmacokinetic mechanisms leading to altered drug concentrations of either the anti-infective or immunosuppressive drug, or by pharmacodynamic interactions increasing or decreasing the efficacy or toxicity of the medications. Many of the significant pharmacokinetic interactions occur through inhibition or induction of the cytochrome 3A4 system by anti-infective agents leading to increased or decreased immunosuppressive agent levels, respectively. The membrane transporter P-glycoprotein is also often involved in drug interactions. Since the last iteration of these guidelines, multiple new hepatitis C virus direct-acting antivirals have become available for use in SOT recipients. Of these agents, some are substrates of cytochrome and drug transporter systems, while others inhibit these systems and may affect immunosuppressive agents. Due to the high risk for drug-drug interactions in the solid organ transplant population, practitioners must be aware of potential interactions and be vigilant in monitoring and adjusting drug dosing when appropriate.

## [Strategies for Safe Living Following Solid Organ Transplantation](#)

Infections remain a risk to the recipients of solid organ transplantation, long after the initial posttransplant period. Factors that affect risk include the recipient's net state of immunosuppression, epidemiologic exposures and the consequences of the invasive procedures to which the recipient has been subjected (1-4). Infections can be due to endogenous organisms that reactivate during periods of excess immunosuppression, donor-acquired organisms that are discussed in Section 3 of these Guidelines, or from the environment, whether it be in the hospital setting or the community after discharge. They may also develop opportunistic infections with exogenously acquired organisms if exposed to a high inoculum or particularly virulent microbes, even during periods of minimal or maintenance immunosuppression. A major goal of transplantation is to be able to lead as healthy and normal a life as possible; accordingly the risk of exposure to infectious agents will always be present. However, various measures can be taken to reduce high-risk epidemiologic exposures in the hospital and in the community, and transplant recipients should be counseled in ways to minimize the risk of infection. Furthermore, strategies for safe living must be carefully woven with the transplant recipient's attempts to regain normal function and return to an active and productive life.

## [Association Between Liver Transplant Wait-list Mortality and Frailty Based on Body Mass Index](#)

### Importance

Among liver transplant candidates, obesity and frailty are associated with increased risk of death while they are on the wait-list. However, use of body mass index (BMI) may not detect candidates at a higher risk of death owing to the fact that ascites and muscle wasting are seen across transplant candidates of all BMI measurements.

**Objective** To evaluate whether the association between wait-list mortality and frailty varied by BMI of liver transplant candidates.

**Design, Setting, and Participants** A prospective cohort study was conducted at 9 liver transplant centers in the United States from March 1, 2012, to May 1, 2018, among 1108 adult liver transplant candidates without hepatocellular carcinoma.

[Sex-mismatch influence on survival after heart transplantation: A systematic review and meta-analysis of observational studies](#)

Heart transplantation (HT) is the treatment for patients with end-stage heart disease. Despite contradictory reports, survival seems to be worse when donor/recipient sex is mismatched. This systematic review and meta-analysis aims to synthesize the evidence on the effect of donor/recipient sex mismatch after HT.

### 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](http://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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