



TRANSPLANT QUALITY CORNER

RELEVANT QUALITY-FOCUSED TOPICS IN TRANSPLANTATION

SEPTEMBER 2024 ISSUE 1



UNRAVELING THE COMPLEXITIES OF COMPLIANCE: OPTN Infectious Disease Policy Review

To align with the changes in the U.S. 2020 Public Health Service (PHS) Guideline, the OPTN updated its policies for monitoring transplant recipients for HIV, HBV, and HCV infections. This document offers education on policy background and compliance requirements, reviews lessons learned by transplant programs, outlines strategies for OPTN survey readiness, and provides a centralized location for tools and resources.

EDUCATION: Understanding OPTN Policy

WHAT: PRE-TRANSPLANT PHS TESTING	WHEN
Unless testing would violate state or federal laws, all transplant candidates must be tested for: - HIV (per CDC recommended laboratory HIV testing algorithm) - Hepatitis B surface antigen - Hepatitis B core antibody - Hepatitis B surface antibody - Hepatitis C antibody - Hepatitis C RNA by NAT	For candidates 12 years or older, blood samples must be collected during the hospital transplant admission prior to anastomosis of the first organ.
	For candidates less than 12 years old on the date of transplant, blood samples can be collected/tested any time before transplant and do not need to be repeated prior to transplant.

WHAT: POST-TRANSPLANT PHS TESTING	WHEN
Transplant programs must test all recipients post-transplant for: - HIV RNA by NAT - HBV DNA by NAT - HCV RNA by NAT	Blood sample must be collected for all transplant recipients at least 28 days, but no later than 56 days post-transplant.
Transplant programs must test all liver recipients for: HBV DNA by NAT	Blood sample must be collected for liver recipients at least 335 days but no later than 395 days post-transplant.

ACTION: What can transplant programs do to improve compliance?

Changes in process workflow	a) Leverage EMR order sets b) Create notification process with inpatient transplant team for inpatients needing testing c) Schedule post-transplant follow-up clinic visits within testing window of post-transplant PHS testing
Monitoring	a) Leverage EMR Functionality b) Utilize institutional data analytics services to create a dashboard to monitor policy compliance
Disseminating information to transplant teams	a) Maintain a regular audit schedule and share results with the transplant team b) Identified areas of noncompliance and needed policy education is sent to nurse managers to review with organ specific teams

TOOLS & RESOURCES

- Educational Offerings in OPTN Learning Management System (UNOS Connect): PHS and Disease Transmission Playlist
- SFT127: PHS Guidelines in OPTN Policy
- QLT141: Infectious Disease Testing of the Deceased Donor, Candidate, & Recipient
- [OPTN Toolkit: OPTN Policies to Align with 2020 U.S. Public Health Service Guideline](#)
 - [2020 PHS Guideline](#)
 - [PHS FAQs](#)
 - [Lab Testing FAQs](#)
- [OPTN Policies and Evaluation Plan](#)
- [CDC Clinical Guidance for Transplant Safety](#)



The Transplant Quality Corner offers a series of publications that focus on the latest metrics, data collection and monitoring methods for improving transplant center outcomes. Each issue includes an executive summary, background information, essential tools, action items to implement, references and resources

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Equipping a Modern Profession of Lifesavers
in Organ Donation & Transplantation

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