



# TRANSPLANT QUALITY CORNER

ESSENTIAL QUALITY-FOCUSED TOPICS FOR TRANSPLANTATION

SEPTEMBER 2024 ISSUE 1



UNRAVELING THE  
COMPLEXITIES OF COMPLIANCE

# OPTN Infectious Disease Policy Review



**THE Alliance**

*Equipping a Modern Profession of Lifesavers  
in Organ Donation & Transplantation*



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## EDITOR'S NOTE

The Transplant Quality Corner presents a series of publications dedicated to enhancing transplant center outcomes through the utilization of the latest metrics, data collection techniques, and monitoring methods. Each publication encompasses an executive summary, background information, essential tools, actionable steps, references, and downloadable resources in the form of a concise one-page summary.

This edition focuses on breaking down the complexities of compliance with a review of the OPTN Infectious Disease Policy.



*Deanna*

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We extend our deepest gratitude to our contributors for their tireless efforts in bringing Transplant Quality Corner to life. Their dedication and expertise have been invaluable to the success of this project, and we are truly appreciative of their hard work and commitment.

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# UNRAVELING THE COMPLEXITIES OF COMPLIANCE

## OPTN Infectious Disease Policy Review



In March 2021, the OPTN aligned its policies with the U.S. 2020 Public Health Service (PHS) Guideline for assessing solid organ donors and monitoring transplant recipients for HIV, HBV, and HCV infection, as required by the Final Rule.



### EDUCATION

| POLICY INTERPRETATION   OPTN POLICY 15.2: CANDIDATE PRE-TRANSPLANT TESTING REQUIREMENTS                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| WHAT                                                                                                                                                                                                                                                                                                                                                                                                                                                 | WHEN                                                                                                                                                                                                                                                                                                                                                                     | EXCEPTIONS                                                                                                                               | CONSIDERATIONS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <p>Unless testing would violate state or federal laws, all transplant candidates must be tested for:</p> <ul style="list-style-type: none"><li>HIV (per CDC recommended laboratory HIV testing algorithm*See resources)</li><li>Hepatitis B surface antigen (HBsAg)</li><li>Hepatitis B core antibody (total anti-HBc)</li><li>Hepatitis B surface antibody (HBsAb)</li><li>Hepatitis C antibody (anti-HCV)</li><li>Hepatitis C RNA by NAT</li></ul> | <p>For candidates 12 years or older, blood samples must be collected <b>during the hospital transplant admission prior to anastomosis of the first organ.</b></p> <p><u>For candidates less than 12 years old on the date of transplant</u>, blood samples can be collected/tested any time before transplant, and does not need to be repeated prior to transplant.</p> | <p><b>If candidate is known to be infected with HIV, HBV, or HCV, then testing for the known viral infection(s) is not required.</b></p> | <p>*Candidates who test positive for HIV, HBV, or HCV must be offered appropriate counseling by the clinical team.</p> <p>*Blood sample must be collected during required timeframe; but results do not have to be available prior to anastomosis.</p> <p>*When drawing a Hepatitis B core antibody, a TOTAL is required rather than just drawing an IgM or IgG alone.</p> <p>* *Re-testing is needed for patients who experience a “dry-run” (admitted for a transplant, but transplantation doesn’t occur) and are discharged- even if readmitted on the same day.</p> <p>Consider a strategy to ensure that candidates who “age out” of the pediatric provision are re-tested upon transplant admission.</p> |
| <p><b>HIV: Human immunodeficiency virus; HBV: Hepatitis B Virus;<br/>HCV: Hepatitis C Virus; NAT: nucleic acid test; RNA: ribonucleic acid</b></p>                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |



POLICY INTERPRETATION | OPTN POLICY 15.3.C: REQUIRED POST-TRANSPLANT INFECTIOUS DISEASE TESTING

| WHAT                                                                                                                                                                                            | WHEN                                                                                                                                    | CONSIDERATIONS                                                                                                                                                                                                                                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Transplant programs must test all recipients post-transplant for:</p> <ul style="list-style-type: none"> <li>• HIV RNA by NAT</li> <li>• HBV DNA by NAT</li> <li>• HCV RNA by NAT</li> </ul> | <p>Blood sample must be collected for all transplant recipients <b>at least 28 days, but no later than 56 days</b> post-transplant.</p> | <p><b>*Post-transplant testing needs to be completed even in the event of graft failure.</b> If a patient is then re-transplanted, testing is still required for both transplanted organs. If the required testing windows overlap, one set of testing is sufficient.</p> |
| <p>Transplant programs must test all liver recipients for:</p> <ul style="list-style-type: none"> <li>• HBV DNA by NAT</li> </ul>                                                               | <p>Blood sample must be collected for liver recipients <b>at least 335 days but no later than 395 days</b> post-transplant.</p>         |                                                                                                                                                                                                                                                                           |



## ACTION

### 1. Improving Compliance Through Changes in Work Flow Processes

- Create order sets for pre-transplant testing placed by inpatient transplant team at time of transplant admission
  - Pre-check/select labs on admission order sets
  - Create lab panel (i.e., Pre-Transplant PHS Labs) that is 'locked-down' to ensure that all testing is completed, and end-users are not able to delete any required testing.
- Opportunities to improve post-transplant testing compliance
  - Order Sets: As part of the discharge process, transplant clinician places the post-transplant PHS testing order
  - Create notification process: if the patient is still inpatient during post-transplant testing period. Communication with your inpatient team is key.

|                                                                                                                                                                                                                                                                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>HIV 1/2 Antibody &amp; P24 Antigen Assay<br/>STAT, ONCE, today at 1408, For 1 occurrence<br/>Tube: Lavender &amp; Yellow Serum Separator Tube<br/>The lab performs p24 Antigen testing when the HIV 1/2 Antibody test is ordered.</p>                                          |
| <p>HIV-1 Quantitative Viral Load Assay, Plasma - See Instructions<br/>STAT, ONCE, today at 1408, For 1 occurrence<br/>Tube: - See Instructions<br/>UCSD Collection: One 6mL Lavender  </p>                                                                                        |
| <p>Hepatitis C Antibody<br/>STAT, ONCE, today at 1408, For 1 occurrence<br/>Tube: Yellow serum separator tube</p>                                                                                                                                                                 |
| <p>Hepatitis C RNA, Quant Blood - See Instructions<br/>STAT, ONCE, today at 1408, For 1 occurrence<br/>Tube: - See Instructions<br/>UCSD Collection: Yellow Serum Separator tube   Requires separate 10mL blood sample in Serum Separator Tube, transport to Lab immediately.</p> |
| <p>Hepatitis B Surface Ag. Blood<br/>STAT, ONCE, today at 1408, For 1 occurrence<br/>Tube: Yellow serum separator tube</p>                                                                                                                                                        |
| <p>Hepatitis B Surface Antibody, Quant<br/>STAT, ONCE, today at 1408, For 1 occurrence<br/>Tube: SST</p>                                                                                                                                                                          |
| <p>Hepatitis B Core Antibody Total<br/>STAT, ONCE, today at 1408, For 1 occurrence<br/>Tube: - See Instructions<br/>UCSD Collection: SST  </p>                                                                                                                                    |
| <p>Hepatitis B Virus (HBV) Quantitative Viral Load Assay - See Instructions<br/>STAT, ONCE, today at 1408, For 1 occurrence<br/>Tube: - See Instructions<br/>UCSD Collection: Yellow Serum Separator tube  </p>                                                                   |



- III. Scheduling: Post-transplant team will schedule the patient's follow-up clinic visits, and one visit to correspond to the closest weekday that is at least 28 and no more than 56 days post-transplant.

Post Transplant Donor Risk Labs [Manage User Versions](#)

▼ POST TRANSPLANT SCREENING

▼ Post Transplant Monitoring of Recipients for HIV, HBV, HCV - Month #1

☒ HIV-1 Quantitative Viral Load Assay, Plasma - See Instructions

Routine, Expected: 5/15/2024, Expires: 5/29/2024, Blood

Tube: - See Instructions

UCSD Collection: One 6mL Lavender |

Resulting Agency - UCSD LABORATORY SYSTEMS

☒ Hepatitis C RNA, Quant Blood - See Instructions

Routine, Expected: 5/15/2024, Expires: 5/29/2024, Blood

Tube: - See Instructions

UCSD Collection: Yellow Serum Separator tube | Requires separate 10mL blood sample in Serum Separator Tube, transport to Lab immediately.

Resulting Agency - UCSD LABORATORY SYSTEMS

☒ Hepatitis B Virus (HBV) Quantitative Viral Load Assay - See Instructions

Routine, Expected: 5/15/2024, Expires: 5/29/2024, Blood

Tube: - See Instructions

UCSD Collection: Yellow Serum Separator tube |

Resulting Agency - UCSD LABORATORY SYSTEMS

▼ Post Transplant Monitoring of Liver Recipients for HBV - Month #12 (LIVER RECIPIENT ONLY)

☒ Hepatitis B Virus (HBV) Quantitative Viral Load Assay - See Instructions

Routine, Expected: 3/4/2025, Expires: 4/3/2025, Blood

Tube: - See Instructions

UCSD Collection: Yellow Serum Separator tube |

Resulting Agency - UCSD LABORATORY SYSTEMS

## 2. Improving Compliance Through Monitoring

### a. Leverage Epic EMR: Create checklist task to monitor testing completion

- I. Post-transplant Coordinator to create checklist task as soon as the transplant notification is received.
- II. The testing order can be linked to the checklist task for auto completion of the task.

☐ FEB 07 2024 HBV PCR Quant PHS Risk Screening

Use This Hepatitis B Virus (HBV) Quantitative Viral Load Assay - See Instructions - Collected on 1/22/2024 (Final)

Use This Hepatitis B Virus (HBV) Quantitative Viral Load Assay - See Instructions - Collected on 12/19/2023 (Final)

☐ FEB 07 2024 HCV RNA Quant PHS Risk Screening

Use This Hepatitis C RNA, Quant Blood - See Instructions - Collected on 1/22/2024 (Final)

Use This Hepatitis C RNA, Quant Blood - See Instructions - Collected on 12/19/2023 (Final)

☐ FEB 07 2024 HIV-1 RNA Quant PHS Risk Screening

Use This HIV-1 Quantitative Viral Load Assay, Plasma - See Instructions - Collected on 1/22/2024 (Final)

Use This HIV-1 Quantitative Viral Load Assay, Plasma - See Instructions - Collected on 12/19/2023 (Final)



- b. Create an automated tracking report- can be utilized by coordinators as part of standard work to monitor completion of ordered labs.

Transplant OPTN Serologies - 57 Days Post Transplant [49216660] as of Wed 2/28/2024 5:22 PM

✓ Mark as Reviewed / Top Info / Scores / Checklist / Chart / Telephone Call / Encounter / Orders Only / Committee Review / Letter / More +

Filter / Clear All Filters / Re-run Report / Refresh Selected / Select All

| ✓ Serology b Appt Status | HIV Serology Last Lab Value | HIV NAT Lab Appt Status | HIV NAT Last Lab Value         | HEP B Lab Appt Status | HbsAg Last Lab Value | HBV Core Antibody Last Lab Value | HbsAB Last Lab Value | HBV NAT Lab Appt Status | HBV NAT Last Lab Value         | HCV Serology Lab Appt Status |
|--------------------------|-----------------------------|-------------------------|--------------------------------|-----------------------|----------------------|----------------------------------|----------------------|-------------------------|--------------------------------|------------------------------|
|                          | Non-Reactive 1/27/2024      |                         | Target Not Detected 1/27/2024  |                       | Negative 1/27/2024   | Negative 1/27/2024               | 129.42 1/27/2024     |                         | Target Not Detected 1/27/2024  |                              |
|                          | Non-Reactive 2/20/2024      |                         |                                |                       | Negative 2/20/2024   | Negative 2/20/2024               | 249.94 2/20/2024     |                         |                                |                              |
|                          | Non-Reactive 12/31/2023     |                         | Target Not Detected 12/31/2023 |                       | Negative 12/31/2023  | Negative 12/31/2023              | 123.19 12/31/2023    |                         | Target Not Detected 12/31/2023 |                              |

Reporting Example of Lab Values & Transplant Date

UCSD TXP Lung PHS High Risk Labs Due Within 2 Weeks [88016140] as of Fri 4/5/2024 7:50 AM

Checklist / Chart / Encounter / Orders Only / Letter / Patient Station / Appts / Send Multi-Patient Message / Generate Letters / HM Modifiers / Complete / Edit Task / Assign Me

Detail List / Explore

Filter

| Patient Name | MRN | DOB | Coordinator | Txp Date   | Task                             | Comments | Due        |
|--------------|-----|-----|-------------|------------|----------------------------------|----------|------------|
|              |     |     |             | 12/20/2023 | HBV PCR Quant PHS Risk Screening |          | 02/07/2024 |

Reporting Example Based off Utilization of Checklist Tasks

HEALTH UNIVERSITY OF UTAH

Trending Labs / Trending Orders

PHS LAB COMPLIANCE

Refreshed: 4/5/2024

YES / ACTIVE / PRE WINDOW

DECISION SUPPORT / Click for Filters

HIV, HBV, HCV NAT TESTING IN PATIENTS WITHIN 28-56 DAY POST TX TESTING WINDOW

Hover over colors for compliance definitions

| Tx Class | Coordinator Name | Patient Name | MRN | Tx Surg Date | Start Date | End Date | Days Left | Orders? | HIV, HBV, HCV Compliant? |
|----------|------------------|--------------|-----|--------------|------------|----------|-----------|---------|--------------------------|
| KIDNEY   |                  |              |     | 3/9/24       | 4/6/24     | 1        | Partial   | No      |                          |
| LIVER    |                  |              |     | 3/9/24       | 4/6/24     | 1        | In Time   | Yes     |                          |
| KIDNEY   |                  |              |     | 3/11/24      | 4/8/24     | 3        | By Goal   | Yes     |                          |
| LIVER    |                  |              |     | 3/16/24      | 4/13/24    | 8        | In Time   | No      |                          |
| LUNG     |                  |              |     | 3/16/24      | 4/13/24    | 8        | In Time   | Yes     |                          |
| KIDNEY   |                  |              |     | 3/17/24      | 4/14/24    | 9        | By Goal   | Yes     |                          |
| KIDNEY   |                  |              |     | 3/25/24      | 4/22/24    | 17       | By Goal   | Yes     |                          |
| KIDNEY   |                  |              |     | 3/26/24      | 4/23/24    | 18       | By Goal   | Yes     |                          |
| KIDNEY   |                  |              |     | 3/27/24      | 4/24/24    | 19       | By Goal   | Yes     |                          |
| KIDNEY   |                  |              |     | 3/28/24      | 4/25/24    | 20       | By Goal   | No      |                          |
| KIDNEY   |                  |              |     | 3/28/24      | 4/25/24    | 20       | By Goal   | Yes     |                          |

- c. Creation of a dashboard to monitor compliance by post-transplant team and quality team

- I. Here is an example of a Tableau report built to allow for proactive tracking for required post-transplant testing.
1. Start and end date of testing window and number of days left in testing window are shown.
  2. Color coding is utilized to mark patients compliant w/ testing requirements (green), within the testing window but testing not complete (yellow), and patients coming into the testing window (gray).
  3. This report can be filtered by transplant organ, transplant coordinator.



### 3. Compliance is a team effort: Dissemination to transplant teams

- a. Maintaining a regular audit schedule that is conducted by the quality team and results are sent out to the transplant center.
- b. Identified noncompliance and policy education is sent to nurse managers to review with organ specific teams.



## LESSONS LEARNED ON THE JOURNEY TOWARD COMPLIANCE

### 1. Collaboration and education of all multidisciplinary team members is key

- a. Several transplant programs have developed “double-checks” throughout the pre-transplant admission process to ensure labs are collected. Some strategies for consideration:
  1. Fast tracking samples to lab to allow enough time for reminder for collection /re-collection if needed
  2. Use EMR reports to ensure that all ordered labs have been collected/resulted. If blood sample isn’t collected/resulted, coordinate with lab to have labs re-run on extra blood samples from patient collected prior to transplant.
  3. Real-time follow up and education with the team when noncompliance is noted, including any residents, fellows, bedside nurse, etc., depending on the circumstance.
- b. Some laboratories and payors have testing algorithms and timeframes that prohibit collection and/or coverage for specific tests. These cases may require additional follow-up and education to ensure all testing has been completed.
- c. TIEDI Reporting Requirements

| REPORTING PRE- AND POST-TRANSPLANT PHS LABS IN TIEDI |                                           |                                                                                                                                                                                                                                                             |                                                                                                                                                              |
|------------------------------------------------------|-------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| TIEDI FORM                                           | WHAT TO REPORT                            | WHERE TO REPORT                                                                                                                                                                                                                                             | CONSIDERATIONS                                                                                                                                               |
| Transplant Recipient Registration (TRR)              | Pre-Transplant Testing for All Recipients | <b>Viral Detection:</b><br>HIV Serostatus:* (HIV Antibody)<br>HBV Surface Antibody Total<br>HBV Core Antibody:*<br>HBV Surface Antigen:*<br>HCV Serostatus:*(HCV Antibody)<br>EBV Serostatus:*<br><b>NAT Results</b><br>HIV NAT:*<br>HBV NAT:*<br>HCV NAT:* | Enter all available pre-transplant testing results. <b>Not all testing on the TRR is required per OPTN policy.</b> If testing is not completed put NOT DONE. |



| REPORTING PRE- AND POST-TRANSPLANT PHS LABS IN TIEDI (CONT.) |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                           |
|--------------------------------------------------------------|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| TIEDI FORM                                                   | WHAT TO REPORT                                                         | WHERE TO REPORT                                                                                                                                                                                                                                                                                                                                                                 | CONSIDERATIONS                                                                                                                                                                                                                                                                                                                                                            |
| Transplant Recipient Follow-Up (TRF)<br><br>6 Month Form     | Post-Transplant Testing (28-56 Days) for All Recipients                | <b>Viral Detection:</b><br>HIV Serology:*<br>HIV NAT:*<br>HbsAg:*<br>HBV DNA:*<br>HBV Core Antibody:*<br>HCV Serology:*<br>HCV NAT:*<br><br><b>For all recipients, documentation on 6-month TRF should be completed if lab results were within the 28- 56 days post-transplant range. Unlike the TRRs, if testing was outside this range or not completed, select NOT DONE.</b> | For results that are originally equivocal (or indeterminate): <ul style="list-style-type: none"><li>• Repeated testing changes to either positive or negative: change the result to the newer more specific value even though it may be a different test date.</li><li>• Repeated testing remains equivocal (or indeterminate): record as “UNK/cannot disclose”</li></ul> |
| Transplant Recipient Follow-Up (TRF)<br><br>1 Year Form      | Post-Transplant Testing (335-395 Days) for Liver Transplant Recipients | <b>Viral Detection:</b><br>CMV IgG:*<br>CMV IgM:*<br>HIV Serology:*<br>HBV DNA:*<br>HBV Core Antibody:*<br>HCV Serology:*<br>HCV NAT:*<br><br><b>If testing of highlighted field is not completed within the 335-395 days post-transplant testing window, select NOT DONE</b>                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                           |



## OPTN SURVEY READINESS

### 1. Pre-Transplant Testing: Provide documentation that shows required testing was completed after transplant admission & prior to anastomosis of first organ. Documentation Requirements:

- Admission Date and Time
- Anastomosis time
- Lab Results, including collection time

| Encounter | Hospital Account | Episode    | Order      |      |
|-----------|------------------|------------|------------|------|
| Episode   | Opt Out          | Status     | Date       | Time |
| Admission | No               | Discharged | 05/26/2022 | 0537 |

Confirmation of Admission Time

Confirmation of Lab Collection Time

|                             | Latest Reference Ranges & Units | 5/26/22 08:24 |
|-----------------------------|---------------------------------|---------------|
| HBSAb                       | IU/L                            | <3.10         |
| HBSAg                       | Negative                        | Negative      |
| HCV Qnt by NAAT Interp      | Not Detected                    | Not Detected  |
| HCV Qnt by NAAT (IU/mL)     | IU/mL                           | Not Detected  |
| HCV Qnt by NAAT (log IU/mL) | log IU/mL                       | Not Detected  |
| Hep B Core Abs, Total       | Negative                        | Negative      |
| Hep C Ab Index by CIA       | IV                              | 0.07          |
| Hep C Ab Interp by CIA      | Negative                        | Negative      |
| HIV 1,2 Combo Ag/Ab         | Negative                        | Negative      |

Event times

Confirmation of Anastomosis Time

Patient in room: Thu May 26, 2022 07:18 MDT

Organ in room: Thu May 26, 2022 09:31 MDT

Anastomosis start: Thu May 26, 2022 10:11 MDT

### 2. Post-Transplant Testing: Provide documentation that testing was completed within 28-56 days post-transplant for all recipients and 335-395 days post-transplant for liver recipients.

|                                   |                                 |                  |                                     |
|-----------------------------------|---------------------------------|------------------|-------------------------------------|
|                                   | Latest Reference Ranges & Units | 07/27/22 12:42   | Confirmation of Lab Collection Time |
| HBSAb                             | IU/L                            | 20.41            |                                     |
| HBSAg                             | Negative                        | Negative [A]     |                                     |
| HBV Qnt by NAAT (IU/mL)           | IU/mL                           | Not Detected     |                                     |
| HBV Qnt by NAAT (log IU/mL)       | log IU/mL                       | Not Detected     |                                     |
| HBV Qnt by NAAT Interp            | Not Detected                    | Not Detected [A] |                                     |
| HCV Qnt by NAAT Interp            | Not Detected                    | Detected ! [A]   |                                     |
| HCV Qnt by NAAT (IU/mL)           | IU/mL                           | 19,694,567       |                                     |
| HCV Qnt by NAAT (log IU/mL)       | log IU/mL                       | 7.29 [A]         |                                     |
| HIV-1 Qnt by NAAT (log copies/mL) | log cpy/mL                      | Not Detected     |                                     |
| HIV-1 Qnt by NAAT (copies/mL)     | cpy/mL                          | Not Detected     |                                     |
| HIV-1 Qnt by NAAT Interp          | Not Detected                    | Not Detected [A] |                                     |



## TOOLS & RESOURCES

- [OPTN policies to align with 2020 U.S. Public Health Service Guideline - Toolkit](#)
- [CDC PHS Guideline](#)
- [CDC Guidelines for Organ Transplants](#)
- [OPTN Policies and Evaluation Plan](#)
- [Notice of OPTN Policy Changes](#)
- [PHS – FAQs](#)
- [Lab testing FAQs](#)
- [UNOS Connect](#): search for the PHS Playlist
- [CDC Vaccination Schedule 2024](#)
- [Hepatitis B Foundation - Vaccination Schedule and Guidelines](#)



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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in Organ Donation & Transplantation*

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