

3.0 ORGAN DISTRIBUTION

The following policies apply to the allocation of organs for transplantation.

3.11 INTESTINAL ORGAN ALLOCATION. The following policies apply to intestinal organ allocation which may include the stomach, small and/or large intestine or any portion of the gastro-intestinal tract as determined by the medical needs of individual patients.

3.11.1 Degree of Medical Urgency. Each patient shall be assigned one of the following status codes which correspond to the medical condition of the patient.

Status 7 A patient listed as a Status 7 is temporarily inactive; however, the patient continues accruing waiting time up to a maximum of 30 days. Patients who are considered to be temporarily unsuitable transplant candidates are listed as Status 7.

Status 1 A patient listed as a Status 1 has liver function test abnormalities and/or no longer has vascular access through the subclavian, jugular or femoral veins for intravenous feeding, or has other medical indications that warrant intestinal organ transplantation on an urgent basis.

Status 2 All patients awaiting intestinal organ transplantation who do not meet the criteria for Status 1 will be classified as Status 2.

3.11.2 Geographic Sequence for Intestinal Organ Allocation. Intestinal organs shall be allocated first to transplant candidates who are size compatible and have a blood type that is identical to that of the organ donor. These patients will be followed by candidates who have a blood type that is compatible to that of the organ donor. Allocation shall be based on length of time waiting and in accordance with the following sequence:

- To local Status 1 patients first;
- Local Status 2 patients;
 - Status 1 patients in the Host OPO's region;
 - Status 2 patients in the Host OPO's region;
 - Status 1 patients in all other regions; and
 - Status 2 patients in all other regions.

3.11.3 Justification Form. A Status 1 Justification Form must be received by the UNOS Organ Center within 24 hours of a submitted in UNetSM for the patient's original listing as a Status 1 and each renewal as a Status 1.

NOTE: The amendment to Policy 3.11.3 (Justification Form shall be implemented following programming on the UNOS System. (Implemented June 29, 2004)

3.11.4 Combined Intestine-Liver Organ Candidates. For patients awaiting a combined intestine-liver transplant, the liver may be allocated by the local OPO to a local or regional intestine recipient based upon priority for receipt of the intestine using the intestine Waiting List unless there is a Status 1 liver patient locally or regionally. If the liver is voluntarily shared with the intestine regionally, a liver of identical blood type shall be paid back to the Host OPO from the next acceptable donor procured by the recipient OPO.

3.11.4.1 Waiting Time Accrual for Combined Liver-Intestinal Organ Candidates. Waiting time accrued by a patient for an isolated intestinal organ transplant while waiting on the UNOS Patient Waiting List also may be accrued for a combined liver-intestinal organ transplant, when it is determined that the patient requires the multiple organs.

3.11.5 Removal of Intestinal Transplant Candidates from Intestine Waiting Lists When Transplanted or Deceased. If an intestinal organ transplant candidate has received a transplant, or has died while awaiting a transplant, the listing center, or centers if the patient

is multiple listed, shall immediately remove that patient from all intestinal organ waiting lists and shall notify UNOS within 24 hours of the event. Except as specified in UNOS Policy 3.11.5.1, if the intestinal organ recipient is reinstated to an intestinal organ waiting list, waiting time shall begin as of the date and time the patient is relisted.

3.11.5.1 Waiting Time Reinstatement for Intestinal Organ Transplant Recipients. In those instances when there is immediate and permanent non-function of a transplanted intestinal organ, the patient may be reinstated to the waiting list and retain the previously accumulated waiting time without interruption for that transplant only. For the purpose of this policy, immediate and permanent non-function shall be defined as an intestinal organ graft failure resulting in removal of the organ within the first 7 days following transplantation. Waiting time will be reinstated-upon receipt by the UNOS Organ Center of a completed Intestinal Organ Waiting Time Reinstatement Form and documentation, including but not limited to, the patient operative report. UNOS will notify the OPO serving the recipient transplant center of the relisting and forward a copy of the relisting form to that OPO.

3.11.6 Waiting Time for Intestinal Organ Transplant Candidates in an Inactive Status. Patients shall be allowed to accrue an aggregate of 30 days inactive status waiting time. A patient's waiting time accrued during each occurrence of inactivation shall be calculated on a cumulative basis so that once the 30 day aggregate limit is reached no additional waiting time shall accrue on further occurrences of inactivation.