

## **John C. Magee, MD - Written Testimony**

---

Members of the committee, thank you for the opportunity to share this testimony with you on behalf of the Organ Procurement and Transplantation Network (OPTN).

At the beginning of this month, I began my term as the President of the OPTN board of directors. In addition to this new role, I am a transplant surgery faculty member at the University of Michigan, and I have served in many leadership positions within my institution. I have also worked with local, regional, and national organizations to advance the care of children and adults, with a specific focus on those needing transplantation. Aside from being a clinician, I am involved in national research efforts and have also committed a great deal of energy over my career to education and training. I have experience partnering with industry, foundations, and federal agencies to effectively work as a team.

I have spent more than 25 years as a surgeon focused on transplantation and organ donation. I chose this path because it embodies the endless potential of humanity and the best of healthcare in the United States. The guiding principles for our nation's donation and transplant system are respect for the life and dignity of potential organ donors and transplant candidates. Respect for the autonomy of donor heroes and their families to make their decisions is first and foremost.

Deceased donation is central focus of this hearing. It is remarkable that every day around this country, donation and transplant teams meet as strangers in operating rooms and turn tragedy

into healing. They partner with other health care professionals working in hospitals across every state in our nation to respect the wishes of the donor and their loved ones. As a team, they represent the best of our healthcare system. All involved are professionals and collectively devoted to healing families and saving lives through donation. The total effort required to realize the desire of a donor or their family to move forward with donation can require more than 100 professionals working under pressure yet they work as a team. The operating room environment can be intense with many people across different disciplines, yet all are focused on respecting the potential donor. The responsibilities of each person are very clearly delineated and understood. Each person grasps the seriousness of their mission to both honor the donors' wishes and to save lives.

I recognize that there are individuals and families who left their interactions with the organ donation process experiencing a lack of respect for the dignity of donors and their families that should be the foundation of donation. Some of those incidents have been the subject of significant public attention and scrutiny. For all of us involved in donation and transplantation, we must ensure that, despite often tragic circumstances, every family that interacts with the organ donation ecosystem leaves that interaction with the knowledge that their loved one's dignity and safety was at the forefront for every professional involved in a possible donation. The national trust in our organ donation system depends upon it.

The National Organ Transplant Act of 1984 established the OPTN with the sole purpose of creating an infrastructure that would effectively develop and continuously refine processes to

respect life. It allows us to serve patients who need transplants as well as the donors and families who help save these patients. It is a public private partnership that is at the epicenter of our transplant system. It is a system with defined roles and responsibilities. Hundreds of volunteer experts across our country are brought together, along with transplant patients, living donors, and donor families, in a partnership with the federal government. It is a unique model, and I believe it is a large part of how we have accomplished all we have in transplantation.

Through the OPTN, our country has created a system that has saved more than one million people, has demonstrated substantial growth, and continues to serve as a model of best practices for the world. The entire donation and transplantation community are stewards of our guiding principles, and it is our collective responsibility to acknowledge areas of improvement and necessary change. This is our path towards ensuring that our system continues to increase the number of patients that benefit from transplantation.

Our transplant ecosystem has undergone dramatic growth and transformation, far beyond the imagination of its founders over 40 years ago. Our allocation policies have matured with a focus on fairness and efforts to maximize the precious gift of donation. Technology has advanced, allowing providers to review potential donors and recipients on their smartphone. The development of donation after circulatory death (DCD) has increased our ability to fulfill the wishes of more individuals who wish to help others in the event of their death. Advancements in organ perfusion have allowed us to successfully utilize more organs and share these organs over greater distances in efforts to optimize equity. In total, these advances have allowed us to

save thousands of more lives, and this ability is growing. Our system, while remarkable, needs to accelerate ongoing targeted improvements to effectively address systemic challenges. We must constantly respect our values and ethics as sacred and address these issues as a community.

It is time to accelerate improvements in our systems and our policies. I accepted the role as President of the OPTN believing there is a clear opportunity for a future in which we continue to embrace transparency, accountability, and oversight, while rethinking the nature of our partnerships to best serve the public. We must ensure concerns are addressed in real time by impartial experts in an effective manner that leads to improvement in the system. Patient safety is not unique to transplantation, and we need to incorporate best practices from across our health care system. We must hold all components of our system to the highest standards. It is the only path to maintaining the trust of all involved.

We have already noted significant improvements to the system made possible by the passage of the Securing the U.S. Organ Procurement and Transplantation Network Act and HRSA's engagement through the OPTN Modernization Initiative. The community commends Congress and HRSA for their work to jumpstart systemwide improvements. Congress' legislative changes created a multi-vendor system, which supports modernizing the system through the ability to involve additional, much-needed expertise. The seating of the new OPTN Board of Directors is another opportunity to see new opportunities. True reform and improvement are only possible

through the convergence and collaboration of clinical experts, patients, living donors, donor families, regulators, legislators, and system leaders.

The OPTN has identified several priorities to address immediately. The first is to advance the refinement of policies related to donation after circulatory death (DCD) and clarify policies and oversight related to the increase in out-of-sequence allocation. We need to codify the integration of normothermic regional perfusion (NRP) into clinical practice. We need to thoughtfully integrate new contractors and partners into the system in a manner that seeks to maximize efficiency and minimize disruption that could impact care of donors and patients. We need to support the creation of standardized educational resources for all parties within the system. Finally, we need to identify and rectify gaps in policy, including clarifying roles and responsibilities of the many people involved in the transplant process. Other needs and priorities will arise, and we need to be more nimble and responsive in the face of change. And we need to work on all these issues while ensuring our current system works safely for donors and transplant patients today.

As we move forward to better our system, we must be mindful that our patients need us to do so carefully and with constant awareness of what is at stake. Disruption and unintended reactions can risk lives. Our collective goal is to constantly improve the system without losing or dismantling the principles upon which it was built. We must constantly continue to embrace transparency, accountability, and oversight.

I look forward to working alongside each of you and express my gratitude to the Committee for the opportunity. Thank you.