



January 3, 2025

Ms. Joella Roland
HRSA Information Collection Clearance Officer
Health Resources and Services Administration
5600 Fishers Lane
Room 14NWH04
Rockville, MD 20857

Submitted Electronically: paperwork@hrsa.gov

RE: Information Collection Request Title: Process Data for Organ Procurement and Transplantation Network, OMB No. 0906-xxxx-New

Dear Ms. Roland,

Thank you for the opportunity to provide feedback and comment related to the Health Resources and Services Administration (HRSA)'s Information Collection Request (ICR) related to "Process Data for Organ Procurement and Transplantation Network, OMB No. 0906-xxxx-New" on behalf of Commonspirit – Baylor St. Luke's Medical Center Transplant Institute.

Baylor St. Luke's is a multi-organ transplant center in Houston, TX. As part of our mission, we provide care to the local community as well as national and international transplant candidates and recipients. Our programs have been active for decades, and we are proud to have been the site of the first successful heart transplant in the United States. We continue to perform heart, lung, liver, and kidney transplantation.

The data directive mandates that transplant centers must collect information related to referrals, evaluation results, and candidate selection in order to expand the current OPTN data pool, with a goal of gaining insight into who gets referred, by whom, who gets evaluated, and who is placed onto transplant waitlists. Simply put, the goal is to address disparities, improve access, and evaluate the overall performance of the transplantation process. As you know, HRSA has requested feedback related to the proposed information collection.

The pre-waitlist data collection will involve the gathering of 59 data points related to referrals and evaluation. It would seem more logical to task dialysis centers with this data collection, as that is the major source of referrals. Transplant centers would have no access to information about the patients who were NOT referred, and could have no certainty about data integrity.

The additional workload created will certainly increase strain on transplant centers. The required data elements are not consistently available to the transplant centers, and would certainly require additional personnel and expense to perform the additional tasks. An alternate means of collecting the data is recommended, including updating electronic health records used in dialysis centers to obtain and submit the data.



Thank you for the opportunity to provide feedback and to collaborate toward the goal of greater access and improved care. If I may provide any clarification, it would be my pleasure to do so.

Respectfully,

A handwritten signature in cursive script that reads "Susan Bourgeois".

Susan Bourgeois, MSN, RN, CCRN, CPHQ, CENP, CCTN
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