

ASTS Analysis of *Out of Sequence Allocation of Donor Organs for Transplant*

The recent *New York Times* article (“*Organ Transplant System ‘in Chaos’ as Waiting Lists Are Ignored*”) highlights the urgent need to address the rapid rise in allocation out of sequence of deceased donor organs (AOOS) to ensure fairness and transparency to waitlisted patients and maintain public trust in the transplant system as a whole while optimizing the benefit of a scarce resource. Multiple ethical principles are relevant to allocation of deceased donor organs for the purpose of transplantation and the [American Society of Transplant Surgeons \(ASTS\) Ethics Committee has provided an ethical framework in which to evaluate AOOS](#).

It is critical to analyze the systemic pressures driving the extraordinary increase in this unprecedented practice. The recent explosion in AOOS is an excellent example of the unanticipated consequences of uncoordinated and conflicting regulatory policies, including new minimum donor volume requirements for OPOs, changes in allocation processes intended to share organs more broadly, and transplant program performance standards that disincentivize programs from accepting medically complex organs at risk of non-use. It is with this lesson in mind that we have expressed serious concerns about HRSA’s marginalization of transplant community voices as part of OPTN modernization. The solution to complex challenges in transplantation requires a collaborative public private partnership infrastructure that facilitates cooperation and collaboration. [Read more here](#).

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