

**ATTACHMENT I
TO APPENDIX B OF UNOS BYLAWS**

Designated Transplant Program Criteria

- III. Reporting Key Personnel Changes.** Designated transplant programs must have key personnel – specifically a primary transplant surgeon and a primary transplant physician- who meet certain minimum levels of commitment to and knowledge of organ procurement and transplantation as specified below. All programs should develop a succession plan that addresses changes in key personnel staffing. When a designated transplant program is informed of a key personnel change it must notify UNOS within 7 business days in writing, as described below in “Reporting Key Personnel Changes. The member must also follow the procedures for applications that are described in the Bylaws, Appendix A, Section 1.03A. Designated programs are also responsible for maintaining Program Coverage Plans as described below in Section VI. The Program Coverage Plan should address instances when key personnel are unavailable to perform their transplant duties for short periods of time.

Reporting Key Personnel Changes:

- (1) The primary transplant surgeon and/or primary transplant physician is no longer involved with the program:

When the Transplant Hospital is informed that one or more of these individuals plans to leave, or otherwise cease their active participation in the transplant program, UNOS must be notified within 7 business days in writing. (“UNOS Notification Date”)

No less than 30 days prior to the end of the individual’s active participation in the program, the Transplant Hospital is required to submit to UNOS a complete Key Personnel Change Application, which documents that the proposed new primary surgeon or physician meets the requirements specified in the Bylaws, Appendix B, Attachment I and applicable subsections.

If the Transplant Hospital receives less than 60 days advance notice of the key personnel change taking place, then the Transplant Hospital must submit a complete application (see paragraph above) to UNOS within 30 days from the UNOS Notification Date.

If a programs is unable to verify or propose through a complete Personnel Change Application that it has on site both a transplant surgeon and a transplant physician who meet the requirements for primary transplant surgeon and physician the Transplant Hospital must inactivate the program’s membership, or relinquish or terminate its Designated Transplant Program Status as described in Appendix B, Section II, C of the Bylaws.

- (2) The primary transplant surgeon and/or primary transplant physician remains involved in the program as an additional transplant surgeon or physician:

When the Transplant Hospital plans to change the individual designated as the primary transplant surgeon or primary transplant physician, UNOS must be notified within 7 business days in writing. At least 30 days prior to the change in the individual’s status, the Transplant Hospital shall submit a complete Personnel Change Application to UNOS, which documents that the individual meets the requirements specified in this Appendix B, Attachment I, Section VI, and applicable sub-attachments.

No less than 30 days prior to the change in the individual’s status, the Transplant Hospital is required to submit a complete Personnel Change Application to UNOS. This Personnel Change Application documents that the individual meets the requirements specified in the Bylaws, Appendix B, Attachment I, Sections VII and XIII and applicable sub-attachments.

The transition to the new designated primary transplant surgeon or physician becomes effective after the application has been reviewed and approved by the Membership and Professional Standards Committee (MPSC) or an Ad hoc Subcommittee of the MPSC, as described below in the Processing Applications section of the Bylaws.

- (3) The primary transplant surgeon and/or primary transplant physician will not be involved with the program on a temporary basis such as periods of military or medical leave: (Temporary here is defined as greater than 30 days but less than 1 year.)

When the Transplant Hospital learns that one or more of these individuals must take a temporary leave of absence or otherwise temporarily cease their active participation in the transplant program, UNOS must be notified within 7 business days in writing.

At least 30 days prior to the end of the individual's active participation in the program, the Transplant Hospital is required to submit to UNOS a complete Personnel Change Application. This application documents compliance with UNOS criteria for a designated transplant program and indicates that the proposed new primary transplant surgeon or physician meets the requirements specified in the Bylaws, Appendix B, Attachment I, Sections VII and XIII and applicable sub-attachments.

If the Transplant Hospital receives less than 60 days notice of that the key personnel change will take place, the Transplant Hospital must submit a complete application (see paragraph above) to UNOS within 30 days from the UNOS Notification Date.

If a program is unable to verify or propose through a complete Personnel Change Application that it has on site both a transplant surgeon and a transplant physician who meet the requirements for primary transplant surgeon and physician, the Transplant Hospital must inactivate the program's membership, or relinquish or terminate its Designated Transplant Program Status as described in the Bylaws, Appendix B, Section II, C.

- (4) Option for Reinstatement: If the previously named primary transplant surgeon or primary transplant physician returns to the same organ transplant program within 1 year of his/her departure date the individual can be considered for reinstatement as the primary transplant surgeon or physician if the Transplant Hospital submits a written reinstatement request to UNOS. This written reinstatement request must include the following documentation:
- (a) A letter from the transplant program director, department chair, or chief of the division, attesting to the individual's current working knowledge; and
 - (b) A letter from the individual confirming his/her commitment to the program and on site availability.
 - (c) A current letter from the hospital credentialing committee verifying that the individual meets the requirements and is qualified and able to resume their previous role.

The Membership and Professional Standards Committee (MPSC) or an Ad hoc Subcommittee of the MPSC, as described below under Processing Applications, will review Requests for Reinstatement. In cases where reinstatement of an individual surgeon or physician may affect the program's status, the MPSC will recommend the appropriate new program status and any special conditions as indicated.

- (5) Failure to Provide Notification:
- (a) Failure to inform UNOS of a change in primary transplant surgeon and/or primary transplant physician within the time frames specified above may result in the MPSC imposing a sanction on the member. A sanction may include a Notice of Uncontested Violation, Letter of Warning, or Letter of Reprimand, as described in detail in the Bylaws, Appendix A.

- (b) Failure to inform UNOS of any changes in primary transplant surgeon and/or primary transplant physician or to submit the required Personnel Change Application shall result in a recommendation to the Board of Directors (Board) that the Board take appropriate action in accordance with Appendix A of the Bylaws. Potential adverse actions that the Board may choose to take are defined under Section 3.01A of the Bylaws. Additionally, the Board of Directors may notify the Secretary of HHS of the situation.
- (5) **Processing Applications:** For processing of applications to change key personnel, the Membership and Professional Standards Committee (MPSC) Chair is authorized to appoint an Ad hoc Subcommittee of at least two committee members, other than the MPSC chair, to review the credentials of the proposed new key personnel. The Subcommittee is empowered to provide, with the concurrence of the MPSC Chair, interim approval effective until review by the full MPSC as its next meeting. Such interim approval shall not extend beyond the next meeting of the full MPSC and shall automatically expire if the full MPSC does not approve the interim action. Designated transplant programs are responsible for maintaining qualified key personnel for the program, without regard to the status of applications for change in key personnel.