

Normothermic Regional Perfusion (NRP)

Workgroup: Meeting Summary

Meeting Information: Agenda and Attendees

Monday, July 13, 2026 | 1:00–2:00 p.m. ET | Location of Event: Teams

The following are meeting minutes from the Normothermic Regional Perfusion (NRP) Workgroup meeting, which took place on **July 13, 2026, 1:00–2:00 p.m. ET**.

Agenda

- Opening Remarks
- Updates on Progress
- Discussion of Terminology: “Authorization” vs. “Informed Consent”
- Next Steps
- Adjourn

Attendees

Attendee Name(s)	Affiliation
PJ Geraghty, John Magee, Lori Markham, Rachel Beekman, Steve Weitzen, David Foley, Sarah X. Koohmaraie	NRP Workgroup
Annie Tor, Susan Brockmeier	HRSA
Christine Jones, Rachel Shapiro, Taylor Melanson, Anna Sanderson, Amy Lin, Becca Fritz, Sophie To, Colin Zick	OPTN Board Support

Meeting Summary

Opening Remarks

NRP Workgroup Chair PJ Geraghty opened the meeting by reviewing the agenda and stating that the purpose of the session was to hear from an invited guest from Board Support legal counsel to learn about the distinction between “authorization” and “informed consent.”

Update on Progress

The workgroup chair shared that the draft NRP policy language is close to being finalized for OPTN Board review. The remaining item for revision is ensuring the correct use of “authorization” and “informed consent” in the context of NRP.

Legal difference between the two terms. OPTN Board Support legal counsel clarified the difference between authorization and informed consent in organ donation, emphasizing that authorization is the relevant legal concept postmortem, while informed consent applies to living individuals undergoing procedures.

- Authorization of organ donation is akin to an individual making out their will, which is an authorization that personal property can be distributed according to the individual’s wishes and state laws after that individual has passed. In the context of organ donation, authorization answers the question of whether there is legal permission to proceed with this anatomical gift.
- Informed consent in the medical field most commonly applies to whether the individual or their guardian understands the material information about medical procedure and voluntarily agrees to proceed. The Uniform Anatomical Gift Act (UAGA) governs organ donation, using the term 'authorization' extensively and not requiring informed consent for deceased donors, reinforcing the legal framework for donation decisions.

Confirmation of which post-mortem scenarios require authorization. The workgroup discussed different post-mortem scenarios to confirm whether authorization or informed consent is needed. In response to a question about whether family consent is required for non-registered donors, Board Support legal counsel clarified that only authorization is applicable once an individual is deceased. Informed consent does not apply to any post-mortem procedures such as NRP, as donors are legally declared dead.

- **Considerations for donation after circulatory death (DCD).** The workgroup discussed what happens when there is a potential DCD donor. A potential DCD donor is alive when the authorization for donation is given, but the authorization is to allow donation after death. If the potential donor does not die, then donation does not occur. OPTN President John Magee explained that DCD follows first-person authorization and there are standard procedures of approaching the consent-giver if the patient has not indicated donation. Workgroup members raised a scenario in which a family member is comfortable with donation but objects to NRP. Legal counsel clarified that there is no legal need for a separate authorization of NRP; however, NRP authorization could be interposed into the process.
- **Proof of authorization.** Workgroup members discussed the option of an opt out or an assent protocol. The workgroup discussed whether proof of authorization should be written or could include recorded conversations. The workgroup agreed that any form of documented proof is acceptable, if it is clear and accessible.
- **Granting authorization when a donor has not registered and provided authorization.** A workgroup member asked what individual could grant authorization if the donor has not registered and provided authorization. Other workgroup members referenced the UAGA hierarchy of surrogates who can authorize a gift and similar autopsy consent processes that appoint the next of kin or a legally authorized representative who is responsible for authorizing donation and related procedures.

Disclosure of information to families. Workgroup members discussed the importance of disclosing information about NRP and donation procedures to families. One workgroup member advocated for disclosing information for the purposes of family members to make informed decisions. Legal counsel responded that while disclosure is not legally required, disclosure is important for public acceptance and awareness. The workgroup decided to include a list of minimum disclosure requirements for NRP in NRP policy language, building on the disclosure requirements outlined in DCD policy. One workgroup

member asked that NRP policy language specify that all disclosed risks must be described in plain language.

Next Steps

The Board Support team will revise the draft NRP policy language based on meeting discussion and updated DCD policy language and will circulate the revised draft to the workgroup for review. The next workgroup meeting will take place on July 27 from 1 to 2 p.m. ET.

Action Items:

- **Board Support:** Distribute post-meeting materials (meeting summary and recording) to workgroup members.
- **Board Support:** Revise NRP policy language and share with the workgroup.
- **NRP Workgroup:** Review revised draft policy language after it is circulated.