

# Allocation Score Exception Application Form Liver and Liver/Bowel Special Case Committee

The Liver and Liver-Bowel Special Case Committee (SCC) provides a fair and neutral review of requests for patient listings and changes to allocation scores. Decisions are made based on the information submitted to support the medical need for the patient listing or increased allocation score as well as the case presentation. SCC members will review the material submitted and vote on the case presented.

#### When submitting an Allocation Score Exception Application Form, please consider the following:

- Applications, both urgent and non-urgent, submitted outside of usual business hours (i.e. evenings, overnight, and on weekends or statutory holidays) will be acknowledged next business day.
- When a patient's condition requires an urgent high-status (3F/4F) listing outside of regular business hours, please use the *Status Change, Urgent Listings, and Listings After Hours Form Liver*

### **Allocation Score Exception Decisions Process**

SCC decision deadlines will be based on when submissions are distributed to committee members. The SCC will aim to provide their decision using the following timelines:

- 2 business days for urgent\* submissions, and
- 10 business days for non-urgent submissions.

If the SCC approves an application, the effective date of the allocation score will be the date the application was submitted to OH-TGLN.

<u>Example</u>: A non-urgent application is received by OH-TGLN on March 10, 2025. The decision deadline is March 24, 2025. The application received approval on March 14, 2025. The effective date of the new exception score would be March 10, 2025.

Should a transplant program wish to request a different effective date for the approved score, they must indicate so within this application. For Allocation Score Exceptions requests pertaining to automatic exceptions not yet implemented into Organ Allocation and Transplant System (OATS) the effective date of approval will be the listing date of the patient.

<u>Example:</u> A patient is listed for re-transplant on February 28, 2025. An Allocation Score Exceptions Application is submitted for the automatic approval of 22 points on March 5, 2025. OH-TGLN will automatically approve and implement 22 points, back-dated to February 28, 2025.

#### Allocation Score Exception Decisions Follow Up

Once the SCC has reached a decision, the transplant centre will be notified immediately. Adjustments will be made by OH-TGLN if a higher allocation score is approved. Transplant centres will be notified of the SCC review and decision via email. This notification will be sent to the individual who submitted the request. Upon receipt, transplant centres will need to confirm receipt and verify that the patients listing information has been accurately captured in OATS.

#### The Allocation Score Exception Application Form can be completed in the following ways:

- 1. Electronically by entering information directly onto the form and emailing, OR
- 2. Manually by printing the form, entering the information, and scanning the document into email.

Submit form or scanned PDF to <a href="mailto:oh-tgln\_specialcasecommittee@ontariohealth.ca">oh-tgln\_specialcasecommittee@ontariohealth.ca</a>, cc: Lucy Truong at <a href="mailto:lucy.truong@ontariohealth.ca">lucy.truong@ontariohealth.ca</a>.



<sup>\*</sup>Urgent is defined as high risk of mortality within the next 2 weeks and requesting ≥ 35 exception points, including high-status (3F/4F) where the patient does not meet standard criteria and is not eligible for national sharing. All other cases outside of this criteria are considered non-urgent.

## **Allocation Score Exception Application Form Liver and Liver/Bowel Special Case Committee General Information Patient TGLN Number Date of Application Submission Name of Transplant Centre Responsible Physician Name Case Presenter for SCC Review Urgent Decision Required (within 2 business days)** High risk of mortality within 2 weeks and requesting ≥ 35 exception points Contact Email (SCC decision will be sent to this address) **Contact Phone Number** Adult or Paediatric MELD/PELD Adjustment Type of **Requested Exception Points Exception** Request (fill in **Automatically Accrue 3 Points Every 90 Days** all that apply): Other Request (specify) **Patient Information** Gender: ABO: Height: Weight: Age: Date(s) of Previous **Primary Liver Transplant** Transplant(s) Background (dd-mmm-yyyy) Has living donation been explored? **Listing Date History of Encephalopathy History of Ascites**



	Past Medical History			
Please complete the most recent results and test date				
Assessment		Date	Result	
	Albumin			
	Bilirubin			
	Creatinine			
	INR			
	Sodium (Na)			
	Current MELD			
	Please indicate the impression from any pertinent imaging studies, if applicable			
		Date	Result	
	CT Abdomen/Pelvis			
	U/S			
	Pathology Biopsy Report			
	Other Imaging			



Other information of interest					
	Number of hospitalizations in past 6 months				
	Number of days spent in critical care in past 6 months				
	Current Medications				
Please complete <b>ONLY</b> if application is for pruritus					
Assessment for Pruritus	Is the patient experiencing intractable pruritus that is secondary to an underlying cholestatic liver disease?				
	Does the patient have documentation of elevated serum bile acid levels?  If yes, enter value.				
	Is the patient's pruritus refractory or intolerant to all standard medical therapies, including pharmacologic and non-pharmacologic therapies?				
	Does the patient have a severely impacted/impaired quality of life?				
Sponsoring physician requesting medical priority due to the following key factors					
Recommendation	Clearly describe the rationale for requesting SCC approve	ral, and information on risk factors if denied			

