



Thank you, Chairman McClain, Vice Chairman Dobos, Ranking Member Grim, and the members of the House Transportation Committee for allowing my colleague and I to speak in support of HB 224.

According to a recent Lifeline of Ohio Impact Report, there are over 105,000 people waiting for life-saving organ transplants.<sup>1</sup> As of last week, there were 2,715 candidates on the organ waiting list in Ohio.<sup>2</sup> The same Lifeline of Ohio report states that, “once every 48 hours, an Ohioan dies waiting for a life-saving organ transplant—in the last 10 years, more than 3,500 Ohioans have died waiting”.<sup>1</sup> In part these statistics demonstrate the need for more organs for transplantation, but beyond this need, safely and effectively getting organs to their candidates once the organs are available is also critically important.

Under current Ohio law, only ambulances have the ability to move organs, tissues, and medical procurement teams with the use of lights and sirens. However, let us consider the primary role of ambulances, which is to service 911 emergencies. Ambulances are called away to assist with life-threatening traumatic injuries that need immediate response. Our office heard from NORA, the Nationwide Organ Recovery Transport Alliance, about situations where surgeons have exited a hospital where an organ has been recovered from a donor only to find the ambulance had been called away to service a 911 emergency. Once an organ has been procured, it can only last outside of the body for a short time, leaving surgeons to scramble to call taxis, Ubers, or Lyfts. As we all know from taking transportation like this, drivers do not always take the most efficient route, nor are they equipped to transport these life-saving materials.

Additionally, even when surgeons are able to utilize an ambulance, there are safety issues for both the surgeon and organ. Surgeons must sit on benches with no seat belts, where the organ is not securely fastened, often being placed on the floor. This is a concern for all parties involved if the driver must brake quickly or an accident occurs.

Putting measures in place to ensure that organs can move swiftly to the recipient is essential to saving the lives of Ohioans. The bill authorizes flashing lights and sirens to be used on a

dedicated organ recovery vehicle, or a DORV. Not just any vehicle can become a DORV, all of the following stipulations must be fulfilled:

- being dedicated to or contracted with an organ procurement organization;
- clearly labeled with the words “Organ Recovery Vehicle”;
- used for transporting human organs;
- operated by qualified driver

You may ask what makes a qualified driver? How do we know this person is equipped to handle such an important job, not only keeping the surgeon, medical team, and organ safe and secure but also ensuring all others on the road are safe?

It is explicitly stated in the bill that the driver successfully completes the emergency vehicle operations course approved by the National Highway Traffic Safety Administration or an equivalent course to be approved by the State Board of Emergency Medical, Fire, and Transportation Services. In addition, the driver must have at least 3 years of experience in the use and operation of emergency lights and sirens. HB 224 works to remedy these issues and provide a proactive solution to the organ transportation problems within our current system.

I will now turn it over to Representative Lightbody.

Thank you, Rep. Miller.

To continue explaining the proposed change in law, a qualified Designated Organ Recovery Vehicle (DORV) driver would be exempt from certain traffic laws while engaged in the collecting and transport of human organs. Examples include the laws governing the overtaking and passing of other vehicles, driving left of center or left of a roadway, one directional traffic, driving outside of marked lanes, space between moving vehicles, divided roadways, turns at intersections and in roadways, the turning and backing of vehicles, and parking on a highway.

Under current law, a coroner, deputy coroner, and coroner's investigator are exempt from these laws while operating a coroner's vehicle responding to a fatality. The bill's exemption does not relieve the DORV driver from the duty to drive with due regard for safety of all persons and property on the highway.

Additionally, the bill would add DORVs to existing law that prohibits any person from failing to stop, yield, and move over for moving public safety and coroner's vehicles using their flashing lights and sirens.

According to Lifeline of Ohio, as of 2010 about fifty percent of Ohioans opted in to register as an organ donor.<sup>3</sup> However there are a limited number of circumstances in which organ donation is possible, and only one percent of the population is able to donate organs after their death.<sup>4</sup> When donor organs become available, several factors are taken into consideration in identifying the best-matched recipient(s). These include medical compatibility of the donor and potential recipient(s) on such characteristics as blood type, weight and age. Urgency of need, and length of time on the waiting list are also factors in the allocation process. In general, preference is given to recipients from the same geographic area as the donor because timing is a critical element in the organ procurement process.<sup>5</sup>

This cause is very personal to me. My late husband received a donor kidney in the fall of 1993, after 13 years of home hemodialysis treatments and many years on the waiting list. The transplant extended his life by 16 years and added more flexibility to our lives, given that we were no longer tied to a dialysis machine 3 times a week for 5 hours each session

Given the floor to speak on this bill, I can not let the opportunity slip by without making a request. If you have not yet had a conversation with your family about the possibility of being an organ donor, I encourage you to do so and to join the list. There are not enough organs available, as the statistics Rep Miller cited show, although success rates are higher and more lifesaving and health restoring transplants are possible, the need remains great.

I hope that by passing this bill, more families like mine will be able to receive lifesaving care for their loved ones. Thank you for the opportunity to testify in support of this important piece of legislation. We would be happy to answer any questions from the committee.



## References

<sup>1</sup>[https://lifelineofohio.org/wp-content/uploads/2022/03/Lifeline-of-Ohio-Impact-Report\\_2022.pdf](https://lifelineofohio.org/wp-content/uploads/2022/03/Lifeline-of-Ohio-Impact-Report_2022.pdf)

<sup>2</sup><https://optn.transplant.hrsa.gov/data/view-data-reports/state-data/#>

<sup>3</sup><https://lifelineofohio.org/wp-content/uploads/State-of-Donation-Report-Card-lowres.pdf>

<sup>4</sup><https://lifelineofohio.org/get-the-facts/>

<sup>5</sup><https://lifelineofohio.org/get-the-facts/faqs/>

