(A) Policy Statement

Initial screening of all potential living kidney donors to determine appropriateness for donation.

(B) Purpose of Policy

To identify potential living kidney donors.

(C) Procedure

1. Interview with potential donor either in person or via telephone. All potential candidates will be considered until ruled out medically.

2. Contraindications to donation include but are not limited to:
   a. Heart disease
   b. Diabetes mellitus
   c. Active cancer or incomplete treatment of malignancy
   d. History of cancer is subject to further discussion by the donor surgeon and the kidney transplant committee
   e. Kidney disease
   f. Hypertension with treatment of two anti-hypertensives, uncontrolled HTN, or HTN with evidence of end stage organ damage
   g. BMI > 40%
   h. Chronic kidney infections
   i. Active kidney stone disease
   j. Lupus/autoimmune disorders. This will be discussed on a case by case basis
   k. Hepatitis C
   l. HIV infection
   m. Other medical/psychosocial issues deemed inappropriate by donor committee including diagnosable psychiatric conditions requiring treatment before donation, including any evidence of suicidality
n. Incapable of making an informed decision, <18 years of age or any of the combination
o. High suspicion of donor coercion, high suspicion of illegal financial exchange between donor and recipient
p. Evidence of acute symptomatic infection until resolved

3. Potential donor will be screened for above and informed if they are able to continue with the kidney donor transplant process (See Living Renal Donor policy).

4. All potential living donors will be considered for donation until medically ruled out by donor surgeon.

Approved by:

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Policies Superseded by This Policy: