


<b>Name of Policy:</b> Selection Criteria for Renal Transplant Candidates  <b>Policy Number:</b> 3364-140-38  <b>Approving Officer:</b> Chief Executive Officer, Chief Nursing Officer, Medical Director, Renal Transplant Program  <b>Responsible Agent:</b> Medical Director, Renal Transplant Program, Medical Director, Pancreas Transplant, Program, Director, Transplant Administration, Transplant Coordinator  <b>Scope:</b> University of Toledo Medical Center		  <b>Effective date:</b>  <b>Original effective date:</b> 10/23/2007	
Key words: Selection Criteria, Renal Transplant Candidates, Waiting List, Suitability for Transplantation			
<input type="checkbox"/>	New policy proposal	<input checked="" type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input type="checkbox"/>	Reaffirmation of existing policy

**(A) Policy Statement**

Patients will be selected or declined for listing on the Renal Transplantation Waiting list using specific, defined criteria.

**(B) Purpose of Policy**

To provide a consistent and objective method of determining a potential candidate's suitability for Renal Transplantation.

**(C) Scope**

This policy applies to members of the medical staff performing transplantation procedures at the University of Toledo Medical Center, UTMCI Personnel and any other persons involved in the transplantation programs of the University of Toledo.

**(D) Procedure**

- (1) Potential candidates will be presented to the Renal Transplant Committee when their evaluation/work-up is complete, or at the discretion of the Transplant Coordinator if there are circumstances that need discussion prior to completion of the evaluation.
- (2) The following selection criteria will be used to evaluate the candidate's suitability for listing:
  - a. Progressive renal insufficiency as evidenced by deteriorating renal function, or ESRD as defined by UNOS as  $GFR \leq 20 \text{ ml/min}$ .
    - May be listed for a 0 antigen mismatch only if  $GFR > 20 \text{ ml/min}$ .

- b. Acceptable Cardiac Status-must receive clearance from a cardiologist if there are pre-existing disease or risk factors.
    - All Diabetics over the age of 50 will need cardiac clearance
  - c. Zero to Moderate peripheral vascular disease.
    - CT of Abdomen and pelvis on candidates >45 years, or at the discretion of the Transplant Surgeon
  - d. Free of Malignancy: The NED (No Evidence of Disease) interval should be a function of site of origin: e.g., melanoma, 5 years.
  - e. Tobacco-abstinence preferred, individualized based on surgeon preference.
  - f. Substance Abuse: Compliant with the Substance Abuse requirements of the UPMC Transplant Program.
  - g. BMI-Individualized based on body habitus. Targeted BMI:  $\leq 40$  for all deceased donor and living donor recipients. If BMI >40 with comorbid conditions, Bariatric surgery in the form of least restrictive procedures will be recommended at the discretion of the surgeon in consultation with Registered Dietician.
  - h. Potential candidates who have received Bariatric surgery will be reevaluated by the Surgeon and Registered Dietician prior to listing.
  - i. HIV-positive patients must meet criteria in policy on HIV + candidates (3364-140-37 Renal Transplantation in HIV Positive Patients).
  - j. TB or TB exposure: Must receive clearance from Infectious Disease.
  - k. History of psychiatric illness: Must receive clearance from psychiatrist/clinical psychologist.
  - l. Financial resources: appropriate to support long term success of transplanted kidney. (Policy 3364-100-50-21 Financial Policy for Organ Transplant Recipients)
  - m. Patients must be willing to accept blood/blood products during all phases of the transplant process
- (3) Candidates who fail to meet one or more of these criteria may be considered for placement on the waitlist if the physician presents his/her justification for the exception to the transplant committee.
- a. After hearing the justification, the committee may choose to make an exception to the criteria on an individual basis.
  - b. The reason for the exception is to be documented clearly in the patient record prior to the candidate being listed with UNOS.

<p>Approved by:</p> <p>_____</p> <p>Daniel Barbee Chief Executive Officer</p> <p>_____</p> <p>Date</p> <p>_____</p> <p>Kurt Kless Chief Nursing Officer</p> <p>_____</p> <p>Date</p> <p>_____</p> <p>Michael Rees, MD Medical Director, Renal Transplant Program</p> <p>_____</p> <p>Date</p> <p>_____</p> <p>Kunal Yadav, MD Medical Director, Pancreas Transplant Program</p> <p>_____</p> <p>Date</p> <p><i>Review/Revision Completed by:</i> <i>Transplant Program</i> <i>Hospital Administration</i></p>	<p><b>Policies Superseded by This Policy:</b></p> <p>Initial effective date: 1/5/2009</p> <p>Review/Revision Date: 1/12/2010 8/31/2012 5/26/15 4/23/2018 11/20/2020 9/25/2023</p> <p>Next review date:</p>
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