


<b>Name of Policy:</b>	<b><u>Psychosocial Evaluation of Potential Living Kidney Donors</u></b>	 <p><b>Effective Date:</b> May 1, 2024</p> <p>Initial Effective Date: December 14, 2007</p>
<b>Policy Number:</b>	3364-140-05	
<b>Department:</b>	Kidney Transplant Administration (Nursing Service)	
<b>Approving Officer:</b>	Chief Nursing Officer Director, Renal Transplant Program	
<b>Responsible Agent:</b>	Transplant Coordinator	
<b>Scope:</b>	The University of Toledo Medical Center	
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy		<input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy

**(A) Policy Statement**

All potential living kidney donors will have a psychosocial evaluation prior to kidney donation.

**(B) Purpose of Policy**

To ensure that all potential living kidney donors receive a psychosocial evaluation by a qualified health care professional prior to kidney donation.

**(C) Procedure**

1. Psychosocial evaluations of potential living kidney donors may be completed by licensed social workers, psychologists or psychiatrists.
2. Psychosocial evaluations will be done on all potential living kidney donors prior to any donation.
3. If potential kidney donor doesn't donate within a year's time frame, a repeat psychosocial evaluation must take place.
  - a. Psychosocial evaluation will address the following:
    - 1) Social, personal, housing, vocational, financial, PHS Guideline questionnaire and environmental support.
    - 2) Coping abilities and strategies (including bereavement).
    - 3) Understanding of the risks of donation, identify any factors that warrant educational or therapeutic intervention prior to final donation decision.
    - 4) Ability to adhere to a therapeutic regimen.
    - 5) Mental health history, including substance or alcohol use or abuse and how it may impact the success or failure of organ donation.
    - 6) Donation is free of inducement, coercion and other undue pressures.

4. Psychosocial evaluations may be done at any time prior to donation. If a concern is voiced, it may be repeated as needed. If a living donor is from out of town/state a phone interview can be conducted by the social worker prior to potential donor arriving for donor nephrectomy.
5. If a potential living kidney donor requires referrals to outside agencies in regard to psychosocial issues, those referrals will be initiated by the transplant social worker or donor transplant coordinator. Follow up on referrals will be done by whoever initiated the referral and follow up information will be documented in the medical record.

<p><b>Approved by:</b></p> <p>_____        /s/        Kurt Kless, MSN, MBA, RN, NE-BC        Chief Nursing Officer/CNO        _____        Date</p> <p>_____        /s/        Michael Rees, MD        Director, Renal Transplant Program        _____        Date</p> <p><i>Review/Revision Completed By:        Transplant Coordinator        Transplant Administrator</i></p>	<p><b>Review/Revision Date:</b></p> <p>1/1/2009        1/12/2010        8/7/2012        10/10/12        5/21/15        5/1/2018        5/4/2021        4/4/2024</p> <p><b>Next Review Date:</b> 5/1/2027</p>
<p><b>Policies Superseded by This Policy:</b></p>	