SELECTION CRITERIA FOR POTENTIAL TRANSPLANT RECIPIENTS

1. All patients referred for consideration for renal transplant will be screened by the transplant assistant to ensure that all required documentation is received for the referral. The transplant assistant will review each referral to ensure that the patient’s age and weight are within the center’s requirements for these areas. The transplant assistant will notify the referring dialysis unit/nephrologist in writing if the patient is not a candidate based on absolute contraindication.

2. After all required documentation is received; all other referrals will be reviewed by the pre-transplant coordinator. The pre-transplant coordinator will facilitate in writing informing the dialysis unit/nephrologist of any patient who falls into the center’s absolute contraindications. The pre-transplant coordinator will consult with the transplant surgeon/nephrologist with any questions related to the absolute contraindications.

3. On all other referrals, the pre-transplant coordinator will initiate the work-up process. The pre-transplant coordinator will renew with the transplant surgeon/nephrologist with any questions related to the patient medical history.

4. Indications: Diagnosis of end stage renal disease or chronic kidney disease.

5. Absolute contraindication: These contraindications include:
   a. Morbid obesity
   b. Active malignancy
   c. Non-correctable, severe coronary artery disease, severe PVD, CHF or cardiomyopathy.
   d. Oxygen dependency
   e. Active infections including positive HIV status or positive Hbsag
   f. Unstable / active psychopathology
   g. Active alcohol or drug abuse
   h. Inadequate psychosocial support
   i. Age: greater than 75 years of age with co-morbidities that preclude transplant.
   j. Recurrent and persistent noncompliance with medications and dialysis treatments.
   k. Co-Morbidities that preclude transplantation

6. Relative contraindications will be reviewed prior to initiation of work-up.
   a. BMI > 40
   b. Age > 70 years of age
   c. Compromised cardiac function/EF <30%
   d. Compromised pulmonary function.
   e. Inability to understand the disease process, medications regimen and follow-up after transplantation.
   f. Prior history of substance abuse
   g. Prior history of noncompliance with medical regimen, medication, and/or follow-up
   h. Untreated Active or Chronic Infection
   i. Prior History of Malignancy
SELECTION CRITERIA FOR POTENTIAL TRANSPLANT RECIPIENTS

7. Patients over the age of 70 years old will be required to be evaluated by a cardiologist to ensure the recipient is not at risk for suffering an adverse cardiac event during or after the transplant prior to the referral.

8. When considering candidacy of elderly recipients, close attention should be paid to co-morbidities that would increase the risk of morbidity and mortality. It is reasonable to exclude patients whose overall condition please them at an excessive risk of postoperative morbidity.

9. Each potential recipient will be seen by the transplant social worker and the transplant financial coordinator. Any issues identified will be addressed during the patient selection committee meeting.

10. The transplant coordinator will communicate with the transplant surgeon any abnormal findings with the pre-transplant testing.

11. When the potential recipient’s work up is complete, the transplant coordinator will present the patient to the transplant selection committee.

12. The transplant selection committee will meet on a weekly basis to review potential candidates for transplant.

13. The kidney transplant candidate selection meeting notes will be utilized as documentation for all patients reviewed as potential transplant recipients.

14. Kidney transplant selection meeting notes for waitlisted patients will be utilized when reviewing potential transplant candidates.

15. For all potential transplant candidates, the selection committee will determine:
   a. The patient is an acceptable candidate and will be placed on the UNOS waiting list.
   b. The patient needs additional testing to determine his/her candidacy for transplant.
   c. The patient is not a candidate for renal transplant.

16. Each potential recipient will be notified in writing or verbally of the transplant selection committee’s decision.

17. Contraindications are carefully evaluated by the transplant team and if present, may result in a candidate not being accepted for transplant at CAMC. Contraindications are transplant program specific. Candidates not accepted at CAMC can be referred to another center for evaluation.