

Selection Criteria for Listing for Renal Transplantation

- 1) Progressive renal insufficiency as evidenced by deteriorating renal function. Patients with a filtration of >20 ml/min can be listed for a 0-antigen mismatch deceased donor kidney.
- 2) End stage renal disease as defined by the United Network for Organ Sharing (UNOS) is a glomerular filtration <20 ml/min.
- 3) Medical Clearance
 - a. Cardiac Disease – cardiac clearance
 - b. Diabetic >50 years – cardiac clearance
 - c. Peripheral vascular disease – CT abdomen and pelvis and if indicated vascular evaluation and clearance
 - d. Malignancy – The NED (No Evidence of Disease) interval should be a function of site of origin; e.g., melanoma, 5 years
 - e. Tobacco – Abstinence for 60 days prior to listing-testing may be done to confirm
 - f. Substance abuse (no alcohol abuse or illegal drug use)-random testing may be done to confirm
 - g. Obesity – Individualized based on habitus at the transplant surgeon’s discretion. Targeted BMI: ≤ 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. AIDS – HIV positive patients must meet Inclusion Criteria as determined by the transplant surgeon.
 - i. TB or TB exposure – Infectious disease clearance
 - j. Psychiatric history – Clearance from psychiatrist/clinical psychologist
- 4) Psychosocial
 - a. Evaluation and clearance by social worker
 - b. Medical compliance – psychosocial evaluation by social worker. Documentation essential.
- 5) Age – Individualized based on co-morbid conditions
- 6) Economics – ability to pay for medications **long term**

The Selection Committee will evaluate other medical/psychosocial/economic issues as it deems appropriate for successful long-term engraftment.