



## Kidney Transplant Selection Criteria

The Kidney Transplant Team at the Penn Transplant Institute has established written patient selection criteria for kidney transplantation. Selection of patients for kidney transplantation is performed without discrimination based upon race, ethnicity, religion, gender, sexual preference, handicap or national origin.

This selection criteria is administered in accordance with Hospital of the University of Pennsylvania's "Patient's Rights and Responsibilities" policy and Organ Procurement and Transplantation Network (OPTN) organ allocation policies.

It is the purpose of this document is to outline current criteria that potential transplant candidates must meet in order to be considered for kidney transplantation at the Hospital of the University of Pennsylvania.

Kidney transplantation is an evolving field, and consequently, selection criteria may change over time.

### **Current selection criteria for kidney transplant includes:**

- Any patient with Chronic Kidney Disease (CKD) who has a Glomerular Filtration Rate (GFR) less than or equal to 20 ml/min should be referred for evaluation for a transplant.
- Etiology of disease is important to the team in determining prognosis for the patient (risk during and after transplant) and selection of an appropriate donor.

Certain conditions may exclude a patient as a suitable candidate for renal transplant and will be discussed on a case-by-case basis at the Patient Selection Committee Meeting (PSCM).

### **Absolute contraindications to kidney transplantation:**

- Active and untreated *current* opportunistic infection
- Advanced irreversible chronic lung disease
- Advanced decompensated liver disease where the patient is not a candidate for a simultaneous liver-kidney transplant
- Advanced heart failure where the patient is not a candidate for a simultaneous heart-kidney transplant
- Current recreational drug abuse
- Uncontrolled HIV infection
- Active and unstable psychiatric illness
- The presence of incurable metastatic cancer



## Relative contraindications to kidney transplantation:

- Recent or metastatic malignancy
- Uncorrectable coronary artery disease
- Documented non-adherence to medical regimen or transplant team recommendations
- Recurrent native kidney disease with recurrence in a prior transplant
- Unresolvable loss of insurance coverage
- Active bacterial infection, unresponsive to therapy
- BMI > 40. BMI of 35-40 will result in transplant team recommendation for patient to enroll in weight loss program. This must include established weight loss goals and BMI monitoring by the transplant team.

## Transplantation of More than One Organ

Patients with co-existing organ failure are considered for kidney transplant on a case-by-case basis. Transplant evaluations will be conducted by each respective organ team. Patient candidacy will be determined by each respective organ team. A combined team patient selection meeting will be conducted as needed.

## Multidisciplinary Patient Selection

- All patients will be presented at the Patient Selection Committee Meeting (PSCM) after their initial evaluation visit and anytime thereafter as needed. This is a multidisciplinary forum attended by transplant nephrologists, transplant surgeons, transplant coordinators, fellows, social workers, nutritionist, and financial counselors. Other medical and surgical consultants may attend as necessary.
- The purpose of the PSCM is to review and discuss patients that have undergone a kidney transplant evaluation. This group is responsible for decisions on patient listing for kidney transplantation; re-review of patients already listed as needed, and discussion of listing parameters with United Network Organ Sharing (UNOS). All disciplines have an opportunity to contribute to the discussion regarding this decision.
- The results of the PSCM discussion will be conveyed to the patient and referring physician in a timely fashion.