

**APPENDIX B**

**Criteria for Candidacy for Kidney Transplantation  
Summary for Patients, Providers, Dialysis Units**

The following are the criteria to be utilized by the renal transplant team at WVU Medicine Transplant Alliance to screen renal transplant candidates. Final decisions regarding candidacy rest with the KTSC.

- Patients ages 18 and above with end-stage renal disease or progressive renal insufficiency. No upper age limit exists; see below for physiological criteria.
- Creatinine clearance equal to or less than 25mL/min at the time of evaluation. A transplant would not be performed until clearance is much lower. Begin evaluation when GFR  $\leq$ 21, GFR 21-25 clinical staff will determine appropriateness to start evaluation,  $>$ 26 evaluation deferred until GFR  $\leq$ 25.
- No active or ongoing cancers. Patients with prior treated malignancies are evaluated on a case-by-case basis.
- No active infections except HIV positive and chronic viral infections. Patients with active Hepatitis B and C are candidates, but require investigation of their liver status and may not have cirrhosis (in which case they may be candidates for combined liver-kidney transplantation).
- In evaluating other vital systems (particularly cardiovascular), the general guide is that the potential candidate's physiology must be adequate such that survival for 5 years post-transplant is considered likely.
- In a patient with known cardiovascular disease or over age 50, reasonable cardiac function and risk as determined by a cardiologist.
- In a patient with known pulmonary disease, a history of occupational exposure, or a significant history of smoking, reasonable pulmonary function as determined by a pulmonologist.
- Weight that exceeds a BMI of 40 precludes transplantation. Assessment of BMI is individualized based on body habitus. Lower BMI may preclude transplant depending on body habitus.
- Financial resources appropriate to support long term success of a transplanted kidney.

- Smoking is strongly discouraged, abstinence preferred. Individualized based on physician preference. Smoking with cardiovascular or pulmonary disease precludes transplantation.
- Substance abuse and alcohol abuse are both contraindications to candidacy; such determination is made in conjunction with social work and, when appropriate, a psychiatrist or psychologist.
- Documented compliance with existing treatment modalities.

