STANDARD DONOR SELECTION CRITERIA

LIVING KIDNEY DONOR

The multidisciplinary transplant committee uses these criteria to determine whether a patient can safely donate a kidney. These criteria guide decision-making, but every donor is evaluated individually.

The following conditions must be met for a candidate to be listed for living kidney donation at this center:

- Age > 18 years old.
- Donor in good general health.
- Donor's sole reason for donating must be an unselfish wish to help the recipient.
- Donating does not cause significant financial hardship for the donor.
- No monetary gain for the donor.

In addition, the following criteria must be met:

- A comprehensive medical and psychosocial evaluation demonstrates the donor to be a reasonable risk for surgery and post-operative long-term follow-up.
- Donor has been judged by a mental health and/or social work professional, including the ILDA, to be willing and able to comply with the post donation regimen.
- Demonstration of the ability to comply with the post donation regimens.

The following conditions may prevent someone from being a candidate for living kidney donation at this center:

- Inability to give informed consent.
- Unwillingness to donate.
- Suspicion of coercion to donate.
- Uncontrolled hypertension requiring >2 blood pressure agents, or hypertension with target-organ damage.
- Type 1 diabetes at any age and selected cases of type 2 diabetes.
- Obesity:
  - BMI $\geq$ 35 kg/m^2
  - BMI < 35 kg/m^2: case-by-case decision.
- Nephrolithiasis: case-by-case decision.
- Significant urological abnormalities of donor kidney.
- Initial screening eGFR by CKD-EPI 2021 (race-neutral) and confirmed by mGFR (iothalamate/iohexol/Tc99m DTPA) or timed creatinine clearance:
  - <70 mL/min/1.73 m^2
  - 70–90 mL/min/1.73 m^2 case-by-case individualized by age/projected lifetime ESKD risk
- Proteinuria > 300 mg/24 hours (excluding orthostatic proteinuria).
- Timed albumin excretion rate (AER):
  - > 100 mg/24 hours
  - 30-100 mg/24 hours: case-by-case decision.
- Significant heart, heart-vessel and/or lung disease.
- Human immunodeficiency virus (HIV) infection: except HIV positive donor to HIV positive recipient under an approved HOPE Act living donor research protocol.
- Active Hepatitis B or C (HCV/HBV) infection.
- History of malignancy (except certain types of skin cancer).
  - Case-by-case decision based on type of malignancy, stage, treatment, and time since resolution.
- History of bleeding disorders.
- Uncontrollable psychiatric illness.
- Inadequate support system.
- Other surgeries and illnesses will be evaluated on an individual basis.
- Genetic risk assessment: Counsel and offer as clinically indicated.

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