Basic Criteria for Kidney/Pancreas Transplant Evaluation

The purpose of this criteria is to help with the evaluation of potential kidney and/or pancreas transplant recipients. Each transplant candidate is unique with different medical and psychosocial issues that must be considered.

The patient is an appropriate candidate for transplantation if he or she:
- Can safely undergo a major surgical procedure
- Has no medical, psychosocial or other risk factors that cannot be safely corrected before transplantation
- Has a likely chance of benefiting from renal and/or pancreas transplantation over the long-term
- Will be able to obtain and is likely to be compliant with taking post-transplant immunosuppression and concomitant medications; and returning for clinic visits

There are absolute and relative contraindications to kidney and pancreas transplantation, such as:

**Absolute contraindications:**
- Uncontrolled malignancy
- Active bacterial and fungal infection (exclusive of minor infection such as urinary tract)
- Severe, uncorrectable cardiovascular disease
- Inability or unwillingness to comply with the expected medical regimen
- Severe, uncorrectable peripheral vascular disease
- BMI > 50
- Tobacco use by diabetics

**Relative Contraindications**
- Active illicit drug use
- BMI > 40 in kidney transplant recipients
- BMI > 30 in pancreas transplant recipients
- Medical non-compliance
- Lack of psychological/social support
- Use of tobacco products when combined with other medical issues

**Other considerations include:**
- **Age:** There is no upper or lower age limit as long as the candidate has a good chance to withstand a major surgical procedure, is able to tolerate post-transplant immunosuppression and has a life expectancy of greater than three years.
- **Cancer:** As immunosuppression therapy may favor the growth of cancer, there should be a wait time of two years between the last evidence of some types of cancer. The wait time may vary with different tumors or histology. In some situations, patients can be evaluated and listed as inactive for transplant, prior to the required wait time, due to the long waiting times on the deceased donor list.

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Other considerations include (continued):

- **Obesity**: Transplant candidates should have a body mass index (BMI) less than 40 before transplantation. Consideration is given to body habitus. Transplant evaluation can be completed on a candidate with a BMI greater than 40. An appointment with the UF Health Bariatric Program is encouraged and offered to those requiring weight loss for transplantation.

- **Cardiovascular disease (CV)**: Renal disease is a risk factor for CV disease. Cardiac evaluation is critical in this population. Transplant candidacy will be based on cardiac risk stratification. Individuals deemed high-risk will be denied candidacy. Annual cardiac testing will be required of most patients. UF Health offers this testing.

- **Diabetes and pancreas transplantation**: Pancreas recipients usually have Type I diabetes with absence/very low levels of C-peptide, whose diabetes is difficult to control despite aggressive treatment. As per OPTN/UNOS policy, some transplant candidates with Type II diabetes may be considered for pancreas transplant with strong consideration to body habitus and daily insulin requirements.

- **Social support**: Transplant management is a complex treatment plan. Recipients must have a support system to learn the treatment plan with the patient and be a resource for the patient. The support system will need to provide reliable transportation to the transplant center as the recipient will be unable to drive for an extended period after the transplant event.

- **HIV**: UF Health offers kidney transplant to qualifying HIV-positive patients. The patient would need to meet with UF Health HIV infectious disease team to determine if their disease is such they could safely receive a transplant and the required immunosuppression therapy.

**Evaluation testing:**

During the two-day evaluation at UF Health, multiple tests are scheduled. Testing required on all candidates includes general and specialized transplant lab work, chest X-ray and EKG. The candidate and support person will meet with the transplant team and attend a required education class to learn about the transplant process.

Additional testing will be required, if not already completed. This may include nuclear medicine cardiac stress test, cardiac echo, ultrasound or abdominal CAT scan to assess pelvic vasculature patency and presence of acquired cystic disease of dialysis. Testing to be provided by the patient include routine American Cancer Society recommended screenings such as pap smear, mammogram, colonoscopy and prostate exam.

**Annual requirements:**

The patient listed for transplant with UF Health will be required to return to the transplant center on an annual basis to assess their continued candidacy. Updated testing will be scheduled as appropriate. Routine cancer screenings will be provided by the patient. Education will be reiterated with the patient and support system in attendance. Online education will be offered and required while awaiting transplant.

**Testing requirements:**

At UF Health, we are pleased to offer the required testing to be completed at our facility. Our team can work with the patient to complete the needed testing in a short amount of time, thereby decreasing wait time to the actual listing for transplant.

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**UF Health**

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Revised 07/25/16 PS120255-1114