# Kidney Minimum Acceptance Criteria

OPTN Policy requires kidney transplant programs to report minimum acceptance criteria for their kidney candidates annually. The acceptance criteria kidney section contains a list of criteria questions specific to renal transplant at your center.

The questions will be used by the UNOS Organ Center to efficiently place the placement of kidneys from donors with unusual or extraordinary circumstances. They should be answered so as to accurately reflect the acceptance criteria used by the kidney transplant program for imported kidneys.

The kidney minimum acceptance criteria do not apply to offers from within 250 NM or imported zero antigen mismatch (0-ABDR) offers or offers to highly sensitized candidates.

## Donor History & Management

**What is the maximum donor age your center will consider?:** Enter the maximum donor age in years.

**Will your center consider kidneys from a donor with an unknown cause of death?:** Select **Yes** or **No**.

**Will your center consider kidneys from a donor with a history of cancer (other than a primary brain tumor):** Select **Yes** or **No** for each of the following:

* less than one year ago?
* 1 to 5 years ago?
* 6 to 10 years ago?
* more than ten years ago?

**Will your center consider kidneys from a donor with a primary brain tumor that is:** Select **Yes** or **No** for each of the following:

* malignant (i.e. Glioblastoma, Astrocytoma, Medulloblastoma)?
* non-malignant (i.e. Meningioma, Ependymoma, Neuroblastoma)?

**Will your center consider kidneys from a donor with meningitis as the cause of death?:** Select **Yes** or **No**.

**Will your center consider kidneys from a donor with any of the following exposures within the last 30 days:** Select **Yes** or **No** for each of the following:

* sex (i.e., any method of sexual contact, including vaginal, anal, and oral) with a person known or suspected to have HIV, HBV, or HCV infection
* man who has had sex with another man
* sex in exchange for money or drugs
* sex with a person who had sex in exchange for money or drugs
* drug injection for nonmedical reasons
* sex with a person who injected drugs for nonmedical reasons
* incarceration (confinement in jail, prison, or juvenile correction facility) for ≥72 consecutive hours
* child breastfed by a mother with HIV infection
* child born to a mother with HIV, HBV, or HCV infection
* unknown medical or social history

**Will your center consider kidneys from a donor with a positive result from any of the following infectious disease tests:** Select **Yes** or **No** for each of the following:

* Hepatitis B Surface Antigen?
* Hepatitis B Core Antibody with no IGG/IGM testing?
* Hepatitis B Core Antibody with IGM testing?
* HBV NAT?
* Anti-HCV?
* HCV NAT?
* HTLV I or II?
* Syphilis?

**What is the maximum Levophed dosage and duration your center will consider?:** Enter the dosage in mcg/kg/min and the duration in hours.

**Averaging the Dopamine dosage over the last 12 hours, what is the highest dosage your center will consider?:** Enter the dosage in mcg/kg/min.

**What is the maximum amount of warm ischemic time your center will consider?:** Enter the time in minutes.

**Will your center consider kidneys from a donor with:** Select **Yes** or **No** for each of the following:

* signs of infection that include elevated WBC (final > 17000) and temperature (greater than or equal to 100 degrees for 12 hours)?
* a perforated colon, small bowel, or stomach?

**Will your center consider kidneys from a donor with DIC that was:** Select **Yes** or **No** for each of the following:

* corrected?
* not corrected?

**For the following durations, will your center consider an adult kidney donor with prolonged hypotension (<70 mm/Hg systolic):** Select **Yes** or **No** for each of the following:

* less than 1 hour?
* 1 to 3 hours?
* 4 to 8 hours?
* 9 to 12 hours?
* more than 12 hours?

**What is the minimum donor creatinine clearance level either measured or estimated based on serum creatinine upon donor's admission your center will consider?:** Enter the value in mL/min corrected to 1.73 M2.

## Anatomy

**Will your center consider an adult kidney donor with any of these abnormalities:** Select **Yes** or **No** for each of the following:

* horseshoe kidney?
* polycystic kidney disease?
* infarcted kidney (>20%)?
* decapsulated kidney (complete)?

**Will your center consider a kidney from a donor with soft plaque in the renal artery described as:** Select **Yes** or **No** for each of the following:

* mild
* moderate
* severe

**Will your center consider a kidney from a donor with hard plaque in the renal artery described as:** Select **Yes** or **No** for each of the following:

* mild
* moderate
* severe
* ulcerative

**Based on the length of the kidney, will your center consider a donor kidney that is 2 or more centimeters smaller than the kidney on the opposite side?:** Select **Yes** or **No**.

## Donation after Circulatory Death (DCD)

**Will your center consider a kidney recovered from:** Select **Yes** or **No** for each of the following:

* a controlled DCD donor?
* an uncontrolled DCD donor?
* a DCD donor with no kidney biopsy report?

**What is the maximum duration of hypotension (<90 systolic) prior to cardiac arrest that your center will consider?:** Enter the duration in minutes.

## Age Specific (Donor Age)

Questions within this section should be answered for each of the 4 donor age groups (<45 years, 45–54 years, 55–64 years, and >64 years).

**Identify the duration for which your center will consider donor kidneys for the specified circumstance:**

* With a history of hypertension and compliant with medication?
* With a history of hypertension and period(s) of non-compliance within the last 5 years?
* Who is an insulin dependent diabetic?
* With diabetes and requires oral medication?

**will not consider**

**0–5 years**

**6–10 years**

**11–20 years**

**>20 years**

**Identify the maximum acceptable amount of cardiac arrest (downtime) for which your center will consider donor kidneys:**

* With CPR?
* Without CPR?

**will not consider**

**<10 min**

**10–15 min**

**16–20 min**

**21–30 min**

**>30 min**

**What is the maximum acceptable peak serum creatinine level?:** Enter the value in mg/dL.

**What is the maximum cold ischemic time (based on arrival time) on cold storage?:** Enter the value in hours.

**What is the maximum acceptable percentage of sclerotic glomeruli for a biopsied kidney?:** Enter the percentage value.

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