

Measurable Elements of COP.10.01

1. ⑩ Informed consent for living donation is obtained by trained staff and is in a language the prospective living donor can understand. (*See also* PCC.03.00, MEs 1 and 2)
 2. The transplant program informs the prospective living donor of potential complications, risks (including psychological risks), and future health problems associated with living organ donation.
 3. The transplant program informs the prospective living donor of alternative treatments for the transplant candidate.
 4. The transplant program informs the prospective living donor of the donor's right to opt out of donation at any time during the donation process.
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Standard COP.10.02

Transplant programs that perform living donor transplants use clinical and psychological selection criteria to determine the suitability of potential living donors.

Intent of COP.10.02

Organ donors must be evaluated for suitability, both physical and psychological, as an organ donor. The medical evaluation determines the donor's physical ability to donate and identifies any immediate health risks and possible future health risks. The psychological evaluation will be conducted by a psychiatrist, psychologist, or social worker with experience in transplantation to determine decision-making capacity, screen for any preexisting psychiatric illness, and evaluate any potential coercion. The donor must also be evaluated for their ability to comprehend the donation process and the potential outcomes, including possible adverse outcomes.

Measurable Elements of COP.10.02

1. ⑩ The transplant program documents defined organ-specific living donor selection criteria.
 2. The transplant program's living donor selection criteria are consistent with laws and regulations and the principles of medical ethics. (*See also* GLD.07.00, ME 1)
 3. The results of a medical evaluation related to the living donor's own physical health are included in the determination of suitability for donation.
 4. The results of medical tests identifying infectious diseases or malignancies are included in the determination of suitability for donation.
 5. The results of a psychological evaluation conducted by a psychiatrist, psychologist, or social worker with experience in transplantation are documented in the living donor's medical record and included in the determination of suitability for donation.
 6. The transplant program documents organ compatibility confirmation in the living donor's medical record.
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Standard COP.10.03

Individualized patient care plans guide the care of living donors.

Intent of COP.10.03

The living donor has unique treatment and health care needs that require specific consideration. Individualized care plans are developed and implemented for all living donors. Live donor transplants are guided by living donor guidelines. However, donors have individual needs that must be addressed through careful care planning. The care of the donor is coordinated by a physician and carried out by a multidisciplinary team to ensure that the donor's needs are met prior to, during, and following donation.

Measurable Elements of COP.10.03

1. ⑩ Transplant programs performing living donor transplants are guided by documented living donor guidelines for care in the evaluation, donation, and discharge phases of donation.
2. Transplant programs performing living donor transplants provide interdisciplinary care by a team coordinated by a physician to each donor throughout the donor evaluation, donation, and discharge phases of donation.
3. The living donor candidate receives ongoing psychological support following donation.