



Lung Deceased Donor Criteria

Provincial Lung Working Group

Absolute Donor Exclusion Criteria for Lung Transplantation		
#	Factor	Criteria
1	Malignancy	<ul style="list-style-type: none"> • Donors with active cancer (donors receiving chemotherapy or radiation therapy or palliative cancer care within the last 5 years); excluding skin and primary brain tumours and prostate cancers (see below). • Donors with a history of the following malignancies are not acceptable for lung donation: <ul style="list-style-type: none"> ○ Choriocarcinoma ○ Colon Cancer within the last 10 years
2	Age	<ul style="list-style-type: none"> • DCC neonatal donors < 36 weeks gestational age • DCC donors ≥75 years of age (exception MAID >75 years of age) • Donors >70 years of age with a history of: <ul style="list-style-type: none"> a) COPD b) Significant smoking history (defined as 40pack/year)
3	Infection / Communicable Diseases	<ul style="list-style-type: none"> • Positive HIV, HbsAg, HTLV-I/II test results • West Nile Virus (WNV PCR) • Rabies diagnosis or within the last 6 months bitten by an animal proven to have rabies • Active Endocarditis • Active encephalitis or meningitis of unknown etiology • Active disseminated tuberculosis • Viral Hemorrhagic Fever, including Ebola or known exposure to person with Ebola
4	Extracorporeal Membrane Oxygenation (ECMO)	<ul style="list-style-type: none"> • Donor on ECMO for respiratory failure
5	Pulmonary Pressures	<ul style="list-style-type: none"> • Clinical diagnosis of pulmonary hypertension prior to admission

Relative Donor Exclusion Criteria for Lung Transplantation		
#	Factor	Criteria
1	Age	<ul style="list-style-type: none"> • Lungs should be offered for transplant regardless of age. However, the currently accepted “ideal” lung donor age is < 55 years.
2	Malignancy	<ul style="list-style-type: none"> • Malignancy is not an absolute contraindication in donors with the following:

		<ul style="list-style-type: none"> ○ Primary tumors of central nervous system <ul style="list-style-type: none"> • If there are risk factors for metastases consider organs as marginal, including: <ul style="list-style-type: none"> • High-grade histology • Glioblastoma and medulloblastoma • Previous craniotomy • Ventricular shunts • Tumor radiation • If there is recurrent disease in the brain, or a long interval from primary therapy ○ Carcinoma in situ of organs such as the uterine cervix ○ Low-grade skin cancer (basal cell and squamous cell) • <i>Prostate Cancers may proceed under ExD if:</i> <ul style="list-style-type: none"> ○ <i>No evidence of metastases</i> ○ <i>Gleason 6 PSA under 10 under active surveillance</i> ○ <i>If Gleason 7 or less and current PSA less than 2 treated by rad</i> ○ <i>If Gleason 7 and psa undetectable after prostatectomy</i> • <i>Avoid Gleason 8 or greater and all PSA over 20. PSAs between 10-20 is controversial and should be discussed with a urologist.</i>
3	Smoking History	<ul style="list-style-type: none"> • The generally accepted criterion for an ideal donor is a tobacco history of < 20 pack-years.
4	Clear Chest X-ray	<ul style="list-style-type: none"> • Ideal donor requirements include a “clear” chest X-ray (CXR), even though it is well recognized that plain radiology may underestimate structural abnormalities. However, there are no adequate data to provide firm guidelines regarding utilization of donors with abnormal CXRs
5	Arterial Blood Gases	<ul style="list-style-type: none"> • The ideal limit of acceptability for donor arterial blood gases is PaO₂ > 300 on FIO₂ = 1.0, PEEP 5 cm H₂O. There is inadequate data regarding the risk/benefit ratio for the lower limit of acceptability for donor arterial blood gases.
6	Prior Surgery	<ul style="list-style-type: none"> • Ideal donor requirements include no prior cardiopulmonary surgery
7	Chest Trauma	<ul style="list-style-type: none"> • Ideal donor requirements include the absence of chest trauma
8	Infection/Communicable Diseases	<ul style="list-style-type: none"> • Documented fungal sepsis • Severe untreated sepsis or sepsis with undermined etiology; • Sepsis due to Multi-drug resistant organism such as MRSA or CRE • Active untreated Respiratory virus • For donors whose COVID-19 upper and lower respiratory tract PCRs are currently negative AND patient has history of COVID-19 in the last 28 days, review with TSP-ID • COVID-19 positive donors to be reviewed with TSP-ID
9	Vaccine-Induced Thrombotic Thrombocytopenia (VITT)	<ul style="list-style-type: none"> • Consult TSP-ID and CMO Transplant prior to proceeding if potential donor has a suspected diagnosis of vaccine-Induced thrombotic thrombocytopenia (VITT)
10	Extracorporeal Membrane Oxygenation (ECMO)	<ul style="list-style-type: none"> • Donors on ECMO for heart failure

Transplant Hospital Specific Donor Exclusions

These transplant programs have established the following absolute exclusions for offers of exceptional distribution.

Transplant Hospital Specific Lung Donor Exclusions	
Site	Criteria
Toronto General Hospital	<p>NPOD donation:</p> <ul style="list-style-type: none">• ≥ 65 years of age• Active COVID-19 Positive• If arrest was unwitnessed – time last seen alive was > 1 hour prior to being found VSA• Smoking history > 20 pack-years• COPD• Active cancer or history of cancer in the last 5 years (except basal cell carcinoma skin cancer)• Deaths related to asthma or COVID-19• Major chest trauma leading to massive hemothorax
The Hospital for Sick Children	<ul style="list-style-type: none">• None

United States (U.S.) Specific Donor Exclusions

Absolute Donor Exclusion Criteria for Lung Transplantation		
#	Factor	Criteria
1	Operating Room (OR) Timing	<ul style="list-style-type: none">• OR is scheduled within 6 hours of offer notification.

QUALITY ASSURANCE:

The Provincial Lung Working Group will review and approve the Lung Deceased Donor Criteria annually as a means of quality assurance.