

## ISGD Centers of Excellence in Glomerular Disease Criteria

This is a living and breathing document. The ISGD Centers of Excellence in Glomerular Disease Criteria (ISGD COE-GD) are continuously evolving. To ensure their relevance, the criteria will be adjusted to reflect the most recent scientific and technological advancements; the criteria will undergo periodic reviews and updates by project leaders, ISGD COE-GD evaluators, and the ISGD Peer Support Committee. Final revisions to criteria will incorporate feedback from key stakeholders, including existing ISGD COE-GDs and GD patients. During the evaluation of applying centers, considerations will be made for regional differences and their ability to fulfill all elements of individual criterion.

<i><b>Criteria</b></i>	<i><b>Mission Area</b></i>	<i><b>ISGD Center of Excellence in Glomerular Disease</b></i>	<i><b>ISGD Partner Center</b></i>
<i>Level of physician experience in GD</i>	Clinical Expertise	Cohorted specialized GD clinics.  Manages GD patients referred from other nephrologists.	Physicians with GD specialist interest.  Manages GD patients referred from other nephrologists; or  Initiates treatment and manages per guidelines but may refer for second opinion.
<i>Diagnostics: Kidney pathology</i>	Clinical Expertise	Kidney pathologist is available, preferably on site, with regular MDTs for diagnostic and educational purposes.	Kidney pathologist available in-house or virtually for discussion of challenging cases; or  Kidney pathologist opinion available virtually or through referral to an external center.
<i>Diagnostics: biopsy practices</i>	Clinical Expertise	Routine and advanced tissue diagnostics (EM, Molecular Diagnostics, AI etc.) available.	Able to perform routine tissue diagnosis when indicated.

<i>Diagnostics: genetic testing available to patients</i>	Clinical Expertise	Genetic diagnosis and counseling are available in house or through external referral for applicable clinical scenarios.	Genetic diagnosis and counseling are available in house or through external referral for applicable clinical scenarios.
<i>Treatment options</i>	Clinical Expertise	Center is familiar with currently available therapeutics and investigational medications; conducts regular MDTs.	Center is familiar with currently available therapeutics; conducts regular MDTs.
<i>Treatment options: availability of IV infusions</i>	Clinical Expertise	Available within the clinic or at the same geographic location (e.g. same hospital campus or medical office building). GD clinic staff can schedule appointments for patients.	Available within the same system (hospital, clinical network, etc.) but at a different geographic location. Patients must schedule appointments separately; or  Patients must be referred outside the system of your clinic for infusions.
<i>Allied health/additional support services</i>	Clinical Expertise	At least 5 support services are required.  The clinic has on staff, or has regular access to, specialized allied health and support services: <ul style="list-style-type: none"> <li>- kidney nurses,</li> <li>- pharmacists,</li> <li>- dietitian,</li> <li>- social worker,</li> <li>- patient navigator,</li> <li>- other services/providers (genetics, etc.)</li> </ul>	1-3 of the listed support services.
<i>Continuity of Care</i>	Clinical Expertise	Centers recognize and address the challenges throughout different stages of life course, including established protocols to coordinate the transition from pediatric to adult care.	Centers recognize and address the challenges throughout different stages of life course, including established protocols to coordinate the transition from pediatric to adult care.

<i>Opportunities for patients to participate in clinical trials</i>	Research	Actively participating in at least 3 ongoing GD clinical trials (including investigator initiated trials and industry sponsored trials).	Familiar with current clinical trial options and have at least one GD trial available to patients in the last 3 years; have a standing plan for referring patients to centers who participate in clinical trials.
<i>Conducting clinical, translational, and/or basic research</i>	Research	Actively conducting translational and/or basic research on glomerular diseases.	Actively contributing to clinical research on glomerular diseases.
<i>Disseminating research results</i>	Research	Consistently publishes original research as lead authors in peer-reviewed journals.	Contributes regularly to peer-reviewed original research papers.
<i>Research data sharing &amp; collaboration</i>	Research	The center maintains a biorepository, clinical database, and data analytic techniques aiming to make this available to the community.	The center collaborates with investigators across institutions and disciplines using data and/or resources from your center combined with data and resources from other centers.
<i>Opportunities to review kidney biopsies with kidney pathologists</i>	Education	Regular educational sessions with a pathologist specializing in kidney pathology and attended by trainees and fellows.	On-demand educational sessions with a kidney pathologist to educate trainees.
<i>Advanced training program in glomerular disease management for clinicians and scientists</i>	Education	Centers provide a GD educational program with a defined curriculum involving active GN clinics.	Provides regular GD education to patients, staff and local community.

<i>Participation in multi-institution collaborative programs and/or consortia for education</i>	Education	Formal collaborative program(s) in place with other institutions and national and international networks (e.g. ERKNet, PNRC etc.)	Collaborates informally with other institutions and/or national and international networks.
<i>Support healthcare equity and healthcare accessibility</i>	Advocacy	Publicly endorses healthcare equity (e.g. in center policies, on website, etc.) and has specific programs/projects in place to improve access for underserved patient populations (depending on local context, this could include minoritized racial populations, patients in poverty, rural patients, etc.). Has demonstrated success in reaching underserved patients. Engages in regular self-evaluation and analytics to characterize success of equity programs.	Endorses healthcare equity/accessibility and has some degree of policies or programs in place.
<i>Work with patient panels, private foundations, government agencies, and traditional and social media</i>	Advocacy	Works with governmental agencies and private foundations for approval of new medications and/or works with ICER or similar organizations, and/or holds leadership roles or frequently participates in SME capacity with patient advocacy groups.	Works with patient advocacy groups, or takes referrals from foundations who help patients in their area connect with experts for care.
<i>Opportunities for patients to interact with other similarly affected individuals</i>	Advocacy	In-house patient support programs and referral of patients to disease foundations and patient advocacy groups. Proactively inform patients of these resources.	In-house patient support groups available upon occasion, or referral to other resources in the community.

Abbreviations: AI, artificial intelligence. CME, continuing medical education. EM, electron microscopy. ERKNet, The European Rare Kidney Disease Reference Network. GD, glomerular disease. ICER, Institute for Clinical and Economic Review. ISGD, International Society of Glomerular Disease. MDTs, multidisciplinary teams. PNRC, The Pediatric Nephrology Research Consortium. SME, subject matter expert.