

The decision to donate a kidney is not always an easy one, and it is not always right for everyone.

There are many physical, emotional and financial matters to consider. You should discuss this with your family members, as they will also be affected by your decision. Talking to others who have been through the donation process may be of help to you. The transplant coordinator can arrange a meeting for you and someone who has previously donated. The decision to donate a kidney is a personal one to make, and whatever your choice, it must be the right one for you. On behalf of your potential recipient, we certainly thank you for your interest.



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B E C O M I N G A *Living Donor*

K i d n e y D o n a t i o n

To consider donating one of your kidneys to a friend or family member is an unselfish act that could result in changing the life of someone with kidney failure.

WERE IT NOT FOR LIVING DONORS, many patients awaiting kidney transplantation would never receive a kidney. There is a very long waiting list for cadaver kidneys, which are donated at the time of death. Since 1972 the Sentara Norfolk General Kidney Transplant Program has performed over 1200 transplants. More than 200 patients have received their kidney from a living person.

A living donor
may be a blood relative,
spouse or a friend.

It is hoped that this brochure
will answer many of the questions
that you might have about
the process.

Is my information confidential?

At the time you express an interest in being considered for kidney donation, you will be interviewed by one of the transplant coordinators, who will ask questions about your medical history. This coordinator will also answer all of your questions and guide you through the process from the first phone call or meeting, to the transplant itself. There are many aspects to your evaluation as a potential kidney donor, and there can be many reasons why you may be turned down as a donor, even if you volunteer. Our first and foremost consideration is for your health and safety. All discussions and test results are held in confidence by the medical team members. The decision to donate a kidney is a voluntary one. Should you decide at any point against donation, the coordinator will respect the privacy of your choice.

What are the benefits of being a living donor?

For most living donors there is a personal reward that results from the act of giving the precious gift of good health to someone with kidney failure. Without kidney transplantation there will be no hope for recovery of kidney function. How fortunate it is that your generosity and today's medical science makes this form of transplantation successful in over 90% of the recipients. For the recipient there are many benefits, including a high success rate, a low complication rate, the ability to plan for the transplant procedure and most importantly the opportunity for a healthier, happier life with your kidney. Past experience has shown that long after kidney donation, our living donors continue to feel internally rewarded.

What are my risks?

Before you become a kidney donor, we perform many tests to be certain that you are in good health and that you have two healthy kidneys. Although serious complications can occur from any major operation, life threatening complications from kidney donation are very rare. You will not be allowed to donate if the evaluation reveals you that have risk factors which may lead to complications from the surgery, or if you are at risk for developing kidney problems in the future. People live normally with one kidney and resume all of their normal activities without restriction following the donation procedure. The ability to obtain insurance coverage after you have become a kidney donor is not restricted by most insurance companies.

What is the cost of donating a kidney?

The costs of all medical testing and appointments with physicians are covered by the transplant center. The actual costs of your hospital admission and surgery, should you be selected as a kidney donor, will be covered in part by both the recipient's health insurance and the transplant center. You will not be billed for any charges related to your evaluation and donation.

How do I get started?

The transplant staff will perform the initial screening by asking questions about your medical history and obtaining information as needed from your family physician. You may be excluded as a donor without further testing if you have a medical history of diabetes, high blood pressure, heart disease, or if you have a risk of developing kidney disease in yourself in the future.

Blood Testing

If you appear to be in good health from the initial screening, a blood sample will be obtained to determine if you are compatible with the intended recipient. You must have the proper A, B or O blood type. You will be considered eligible to donate if your blood type is O no matter what your intended recipient's blood type is. If you are compatible on the basis of ABO testing, then the tissue match will be determined. The most critical test is called the cross match in which your blood and the recipient's blood are mixed together to be certain that your tissue typing is compatible with the recipient. If these tests are compatible, you will proceed to the next steps. The results of a cross match can change over-time. For this reason, this test is repeated near the date of the scheduled transplant surgery.

Evaluation and Testing

If the initial screening and blood testing show that you might be a suitable donor, additional testing will be performed. This will include more blood tests, urine testing, a 24 hour urine collection, chest x-ray, electrocardiogram, and ultrasound of your kidneys. A PAP smear and mammogram will be required for females. If all of this testing is suitable, you will then undergo a complete physical examination and consultation with a nephrologist (a kidney specialist). The purpose of this thorough testing is to be certain that you have a minimal risk from donation, and that your loved one will receive a healthy kidney. After approval by the nephrologist, a special CT scan of the kidneys will be performed to be certain that both kidneys are normal in appearance and anatomy. Occasionally, additional testing or consultation may be required. The costs of these additional evaluations may be billed to your own health care insurance if the condition is a medical problem that has previously been diagnosed.

While being considered as a possible kidney donor, it is also required that you meet with the Transplant Social Worker. The social worker will talk with you to determine the family, friends, and support systems that you have to assist you through the donation process and recuperation period after surgery. He or she will also discuss issues related to absence from work, lost wages, travel



expenses, and child care expenses that you may incur. The social worker will also determine if there are any potential psychological problems that would interfere with your decision to donate a kidney. If there are any concerns, you may be referred to a psychologist or a psychiatrist for further testing.

The final step before the donation and transplant take place is a meeting with one of the transplant urologists. This is the surgeon who will remove your kidney. He will review your records, and explain the operative procedure and its risks.

When do I get admitted to the hospital?

When all of your tests and medical evaluations are completed, and you are cleared as a kidney donor, the surgery date will be scheduled at a date convenient for both you and the recipient. In any case, the earliest date may not be for several weeks, depending on the availability and coordination of operating room schedules. You will need to have preoperative blood testing done a few days before surgery to ensure that your health status has not changed. In addition, the cross match test with your recipient will be repeated to ensure that you are still compatible for transplantation. You will also be instructed not to eat or drink anything after midnight on the night before surgery and you will be admitted to the hospital on the morning of the scheduled surgery. The transplant coordinator will keep you informed with all of the final details.

What happens during surgery?

There are two types of surgical procedures that may be used to remove the donated kidney. The anatomy of your kidneys will determine the type of surgery that will be most appropriate. The transplant urologist will make this decision during your office visit and will describe the procedure to you in further detail. Both types of surgical procedures are performed under a general anesthetic, which means you will be asleep during the entire 4-6 hour operation.

The first type of surgery is the laparoscopic procedure. This surgery requires 3-4 small, one-half inch incisions on the abdomen through which a miniature camera and surgical instruments are inserted. In addition, a 4-inch incision is made on the lower abdomen through which the kidney is removed.

The second type of surgery is the open nephrectomy (surgical removal of the kidney). This surgery is performed through a 6-8 inch incision on the upper abdomen and side.

What are the potential complications?

As with all major surgical procedures, you will experience pain that can be readily controlled with medications. You may also have nausea or vomiting, and bloating. Other complications which can occur include, but are not limited to, infection, bleeding, pneumonia, blood clots or allergic reactions to medications. All of these complications are infrequent, and are associated with any major operation. Blood transfusions are usually not necessary during or after the surgery to donate a kidney.

Over 95% of the time the donated kidney begins to function immediately and no further dialysis is needed. Rarely there may be delayed function of the transplant requiring temporary dialysis.

While it is true that bleeding, clotting, or obstruction of the kidney can cause early failure, this rarely happens and most of our recipients leave the hospital with a functioning transplant. It is important that both you and your recipient are aware that failure can occur. If this does happen it is certainly beyond your control. It will be our job to minimize any chance of failure by careful testing and planning.

How long will I be in the hospital?

The usual length of hospital stay for kidney donors is 3-4 days regardless of the type of surgery that you have. You will be cared for on a floor that specializes in the nursing care of patients who have had recent surgery. Recovery from kidney donation is a gradual process and different individuals recover at different rates. Most patients are able to return to normal activities within a few weeks.

What happens when I go home after surgery?

After discharge from the hospital you may walk and climb stairs, but you should not do any heavy lifting for about 3-4 weeks. You should not drive a car for 2 weeks. You will not be able to return to work for 2-4 weeks depending on the type of surgical procedure that you have, and the type of work that you do. You may find that you need frequent naps for the first few weeks after surgery while you recuperate. Walking is considered good exercise, and is encouraged. Simply, you should not do anything that feels uncomfortable.

What medical follow up is required after surgery?

You will need to see the urologist who performed your surgery approximately 2 weeks after you are discharged from the hospital, and again at 6 months.



The cost of this visit will be covered by the transplant center, or the recipient's health insurance. It is then recommended that you follow up with your regular physician every year thereafter for a routine physical examination, as covered by your own health care insurance.