

Evaluation Process

Our goal is to make the donor evaluation process as easy as possible. We will guide you every step of the way. The process involves:

- **Initial Inquiry**
To begin the process, complete the living liver donor inquiry on our website at nyp.org/livingdonorliver or call **(212) 305-9381** for an initial phone interview.
- **Initial Paperwork**
If you meet the general requirements to become a living donor, you will be sent initial paperwork, which includes an intake form and patient questionnaire.
- **Preliminary Testing**
You will be sent a requisition for preliminary testing, which includes blood type testing and liver function testing. This can be done at a local Quest Diagnostics lab anywhere in the United States at no cost to the donor.
- **Donor Evaluation**
If blood tests are normal, you will be able to move forward with the donor evaluation. This involves meeting with the living donor team and completing required testing at NewYork-Presbyterian Hospital.

Required Consultations

Your evaluation process requires consultations with:

- Donor Surgeon
- Financial Coordinator
- Hepatologist
- Psychiatrist
- Independent Doctor
- Social Worker
- Transplant Coordinator

You will need to select a Care Partner who will help take care of you after surgery. This Care Partner is required to accompany you to your consultations with the psychiatrist and social worker. The individual you choose as your Care Partner must demonstrate the ability to care for you after surgery and cannot be the same person as the recipient's Care Partner.

Required Testing

The donor evaluation process also includes the following tests:

- MRI/MRA or CT angiogram of the abdomen with and without contrast
- Chest X-ray
- Electrocardiogram (EKG)

These tests may also be required:

- Liver biopsy
- Pap smear
- Stress echocardiogram
- Colonoscopy/endoscopy
- Mammography

Decision to be an Approved Donor

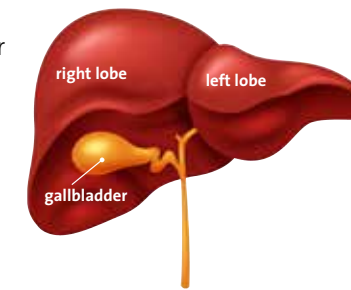
After you have completed the evaluation, our donor team reviews your case. They will make one of three determinations: approved, denied, or deferred.

- If you are approved, you will be notified and given at least 24 hours to process the information before any plans are made and before anyone is told. If you want to proceed, the living donor specialist will reach out to the recipient's liver team.
- If the committee finds concerns in your evaluation that would be a contraindication for you to be the donor, then you may be denied. You will be advised of the reason that the team determined that you cannot be the donor.
- If there are any concerns that are raised during the meeting, additional testing or psychosocial requirements may be indicated. Your case will be deferred for presentation at a later meeting once specific requirements have been met.

Between 1988 and today, the Center for Liver Disease and Transplantation has performed the highest cumulative volume of living donor liver transplants in the nation, making our program the largest and most experienced in the country.

The Donor Operation

After you have been cleared as a donor, the living donor specialist will schedule preoperative testing and surgery. Living liver donor operations differ depending on the size of the recipient. The donor surgeon determines whether you will have a left lateral hepatectomy (25 percent), left hepatectomy (40 percent), or right hepatectomy (60 percent).



Laparoscopic Liver Removal

As pioneers in laparoscopic liver removal, the Center for Liver Disease and Transplantation continues research in techniques to make the surgery less invasive and safer for the donor, including removing less of the liver by using the left lobe for transplantation rather than the traditional right lobe.

Today, most of the Center's living donors have only their left lobe removed – 40 percent of their liver – usually with a laparoscopic approach. The enormous clinical benefits of left lobe living donor liver transplantation to donors include shorter length of stay, reduced morbidity, accelerated recovery, and improved quality of life.

With the laparoscopic approach, five ports are placed into the upper abdomen and one incision is made near the bikini line. The incisions for the ports are less than half of an inch and the incision made near the bikini line is about three inches. The donor's liver is carefully split into two segments and one portion is removed for the recipient. The surgeon then closes the incision either with self-absorbing sutures or staples, which must be later removed during a follow-up visit.

Recovery

Typically after surgery, you remain in the hospital for four to seven days. You spend your first night after surgery in the Surgical Intensive Care Unit for close monitoring by specialized nursing staff. The following day, you are usually transferred to the transplant floor where the nurses are specifically experienced in caring for liver donors.

Every donor's recovery time is different but, typically, donors spend at least four weeks recuperating after surgery. Your recovery rate and type of occupation dictate how soon you can return to work, but the average is three to six weeks after surgery.

Follow-up appointments for donors are scheduled as follows:

- 1 week post discharge
- 6 weeks post donation
- 3 months with MRI
- 6 months - phone interview optional
- 1 year with MRI

Donors then have appointments yearly, with phone interviews optional, up to 5 years post donation.

Risks

Risks to the donor include, but are not limited to, bleeding, infection, hernia, bile leakage, and possible death. Donors in The Center for Liver Disease and Transplantation's living donor liver transplantation program have experienced few complications after surgery and during recuperation. All are currently alive and well.

Healthcare Costs for the Donor

The donor's medical expenses, including the costs of the evaluation, doctors' fees, surgery, and hospitalization, are customarily covered by the recipient's health insurer. The National Living Donor Assistance Fund provides reimbursement of travel and subsistence expenses for living organ donors to travel to the transplant center to donate an organ. Approved applicants receive a controlled value card, which is like a credit card, to pay for approved transportation, food, and lodging expenses up to \$6,000.

Why Is Living Donor Liver Transplantation Desirable?

Living donor liver transplantation provides immediate organ availability to those awaiting transplantation. Thus, patients can avoid long waits for scarce donor organs. Statistics show that more than 15,000 people nationwide are waiting for donor livers, while only 6,000 deceased donor organs become available each year. What this means is living donor liver transplantation offers the possibility of earlier transplantation to those in need, avoiding progression of liver disease and lowering the risk of life-threatening complications that may accompany severe liver disease. Moreover, having a liver donor enables the surgical team and patient to plan for the transplant surgery, rather than having to time the transplant operation around the availability of a donor organ.

Who Can Become a Donor?

A person between the age of 20 and 60 may be considered to be a directed or non-directed donor. In order to be evaluated for living donation the potential donor must:

- be medically healthy, physically fit, and have a body mass index less than 35
- be free of liver disease or active hepatitis
- be in good mental health and not abusing drugs or alcohol

The decision to donate should be completely voluntary. Donors do not receive compensation of any kind.

Center for Liver Disease and Transplantation

For More Information

For more information on becoming a living donor, visit nyp.org/livingdonorliver.

The Center for Liver Disease and Transplantation

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Register to become a living donor at
nyp.org/livingdonorliver

Center for Liver Disease and Transplantation



The Center for Liver Disease and Transplantation has pioneered and perfected the use of living donor liver transplantation, first in children, and now in adult patients with serious liver disease. Find out how you may be eligible to become a living liver donor.

Living Donor Liver Transplantation

The Center for Liver Disease and Transplantation has an international reputation for living donor liver transplantation for adults and children, enabling our patients to have quicker access to liver transplantation. We encourage living donation whenever possible, allowing greater numbers of patients to receive livers that function better and last longer.

Living donor liver transplantation involves the removal of a portion of the donor's healthy liver for transplantation into a recipient in need. This procedure is made possible by the liver's unique ability to regenerate. After transplantation, the partial livers of both the donor and recipient will grow and remodel to form complete organs.

Living donation lowers the risk of dying before getting a transplant by 50 percent with the right recipient and donor selection.

Living donation has dramatically expanded hope for those awaiting a lifesaving transplant, and has created an opportunity for others to give the gift of life to a loved one, friend, or even someone they don't know.

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