1. What are the advantages of living liver donation?
- Surgery can happen when it is most convenient for the recipient and the donor
- All donors get a very thorough medical evaluation to make sure it is safe to donate
- Living donation decreases recipient time on the wait list
- Surgery happens simultaneously so the liver is transplanted shortly after being removed from the living donor

2. Can anybody donate?
Individuals must be at least 19 years old. People interested in donating a portion of their liver are evaluated on a case-by-case basis by a team dedicated to ensuring their safety. A potential living donor may be turned down due to significant medical or psychosocial problems that would result in increased risk for the donor.

3. What if I do not have the same blood type as the person I want to donate to?
You do need to have a blood type that is compatible with the intended recipient. Individuals with blood type O are considered “universal donors” as that blood type is compatible with all other blood types.

4. Who pays for the living liver donor work up and surgery?
The recipient’s insurance will pay for the cost of the donor’s medical expenses for the evaluation, surgery and two-week follow up clinic visit and tests. If an abnormality is found during the evaluation, costs associated will be the responsibility of the donor’s insurance.

There is an assistance program called The National Living Donor Assistance Fund (NLDAC) that offers grants to living donors to help offset expenses.

It is a federal crime for a donor to receive payment for donation.

5. What if I do not have any relatives who can donate a portion of their liver?
A living donor does not have to be a relative. We have evaluated friends, co-workers and spouses as potential donors. There has also been an increase of altruistic, non-directed organ donation, in which individuals donate to a recipient that they do not know.

6. How is the surgery performed?
The surgery requires a large incision across your abdomen. This is necessary for the surgeon to mobilize or move the liver for best exposure. The right or left lobe (smaller portion) of the donor’s liver is then removed for transplantation into the intended recipient.

7. What is the normal recovery time for a living liver donor?
The living donor is typically in the hospital for five to seven days. Many donors are able to return to work after three to four weeks if they do not have a physically demanding job. We do not want our donors to lift more than 10 pounds for six weeks after surgery, or to drive while they are taking narcotic pain medication (usually about two weeks). Most donors are back to their baseline functional status in two to three months and continue to do well thereafter.

8. Is there any long-term follow up for donors?
It is mandatory for us to obtain donor information for submission to United Network of Organ Sharing (UNOS) at regular intervals for all donors. At six months, 12 months and 24 months after donation, United Network for Organ Sharing (UNOS) recommends repeat lab studies which can be done through your local doctor’s office. You will also receive a call from our living donor coordinator to check on your health. At three months, six months, one year and two years post-donation, we will contact you to complete a questionnaire.

We strongly encourage donors to continue a healthy lifestyle and to follow up with their primary care physician yearly for a physical exam. This follow-up care with the donor’s primary care physician is the responsibility of the donor’s insurance.

9. Can female donors become pregnant after donating a portion of their liver?
Women can get pregnant after donation. We recommend that they do not attempt to get pregnant for a year after donation, and that they follow up closely with their OB/GYN.

10. What if a donor feels pressured to donate?
The multidisciplinary living donor team is in place to advocate for the living donor. If the donor feels any pressure or coercion to donate they should communicate that to a member of the team and the evaluation or transplant will be stopped. The potential donor can withdraw from consideration at any time throughout the process.

11. What are the short and long-term outcomes following living liver donation?
Most living liver donors are back to their preoperative baseline approximately two to three months following donation. Post-operative limitations include not lifting more than 10 pounds for the first six to eight weeks and not driving while taking narcotic pain medications. Donors are able to return to their preoperative lifestyle with essentially no restrictions over the course of time, although they will have a scar at the healed incision site.

12. How do donors get started if they are interested in donating?
If a person is interested in becoming a living liver donor, they should call Nebraska Medicine at one of the numbers listed below to talk to one of our donor coordinators. These coordinators will discuss the evaluation process and mail information to the individual. We welcome any questions from our potential or past donors.

Contact us at 402.559.5000 or 800.401.4444. Visit us online at NebraskaMed.com/Transplant.