Facts about Organ Transplantation

What is organ transplantation?

If you have a medical condition that may cause one or more of your vital organs to fail, transplantation may be a treatment option. A transplant is a surgical operation to give a functioning human organ to someone whose organ has stopped working or is close to failing. In some cases, a living person can donate all or part of a functioning organ. In other instances, the donor would be someone who has recently passed away.

Which organs can be transplanted?

The organs that can be transplanted are:

- liver
- kidney
- pancreas
- kidney/pancreas (can be transplanted at the same time)
- heart
- lung
- heart/lung (can be transplanted at the same time)
- intestine
- vascularized composite allografts (VCAs), such as face and hand transplantation

Are there age limits or medical conditions that rule out organ transplantation?

There is no standard age limit to be transplanted. Each transplant program sets its own practice. For example, one program may not accept anyone older than 80 years of age; another may have no age limit.

A few medical conditions might rule out a transplant. The transplant team will discuss these with you when you start your evaluation. In general, health issues that may keep you from having surgery or taking long-term medication may be reasons not to list you.

Examples can include current or recent cancer diagnosis or morbid obesity. Depending on the medical issues involved, the program may have another specialist examine you and advise whether transplantation would be a safe option.

In some cases, even if a transplant program doesn't accept you immediately for a transplant, it may reconsider you later if your condition improves (for example, you lose weight as directed, or your cancer goes into remission). You might also consider applying to a different transplant center, since each hospital has its own criteria for accepting transplant candidates.

What policies apply to the transplant I need? How do I learn about potential new policies?

Organ Procurement and Transplantation Network (OPTN) policies are rules that govern operation of all UNOS member transplant hospitals, organ procurement organizations (OPOs) and histocompatibility labs in the U.S. Policies are made through a collaborative process involving committees, the OPTN/UNOS board of directors and the public.

As new policy proposals are developed by the OPTN for consideration, they will be circulated for public comment. As part of HHS' consideration of policy proposals advanced by the OPTN, additional public comment may be sought through the Federal Register or other means; this site will also give notice of those actions.

Are there organizations that can help patients afford the cost of transplantation?

Some transplant candidates and recipients have difficulty affording the cost of a transplant or related expenses such as travel, lodging and post-transplant medications. There are a number of local, regional and national organizations that provide some assistance through grants or services. In individual cases, local community organizations or faith groups may be able to help, and friends and families may solicit funds through public events or appeals. Every transplant program has a social worker or financial coordinator who can work with you and advise you on insurance and funding options.

Do transplant hospitals in the U.S. only perform transplants on U.S. citizens?

No. Patients from other countries may travel here to receive transplants. Once accepted by a UNOS transplant center, international patients receive organs based on the same policies as U.S. citizens.

What factors are considered in organ matching and allocation?

Many different medical and logistical characteristics are considered for an organ to be distributed to the best-matched potential recipient. While the specific criteria differ for various organs, matching criteria generally include:

- blood type and size of the organ(s) needed
- time spent awaiting a transplant
- the relative distance between donor and recipient

For certain organs other factors are vital, including:

- the medical urgency of the recipient
- the degree of immune-system match between donor and recipient
- whether the recipient is a child or an adult

How does the matching process work?

The matching process contains five steps:

- An organ is donated. When the organ becomes available, the OPO managing the
 donor sends information to UNOS. The OPO procurement team reports medical
 and genetic information, including organ size, and condition, blood type and
 tissue type.
- 2. UNOS generates a list of potential recipients. The UNOS computer generates a list of potential transplant candidates who have medical and biologic profiles compatible with the donor. The computer ranks candidates by this biologic information, as well as clinical characteristics and time spent on the waiting list.

- 3. The transplant center is notified of an available organ. Organ placement specialists at the OPO or the UNOS Organ Center contact the centers whose patients appear on the local list.
- 4. The transplant team considers the organ for the patient. When the team is offered an organ, it bases its acceptance or refusal of the organ upon established medical criteria, organ condition, candidate condition, staff and patient availability and organ transportation. By policy, the transplant team has only one hour to make its decision.
- 5. **The organ is accepted or declined.** If the organ is not accepted, the OPO continues to offer it for patients at other centers until it is placed.

To understand how patients are matched on the national waiting list, it's helpful to think of the list as a "pool" of patients. Each time an organ becomes available, UNet_{sm} searches the entire "pool" for the patients who are a match for the organ. A new list is made from those who match.

The patients on this new list are ranked in order of their level of match to that donor organ. The organ is offered to the transplant hospital where the first patient is listed. Other factors which may be considered are the patient's current medical status, geographical location, and time on the list. If the organ is refused for any reason, the transplant hospital of the next patient on the list is contacted. This process continues until a match is made.

What do I need to do to be considered for a transplant?

A transplant program must evaluate anyone who may wish to have a transplant, and it would make the final decision about whether to accept that person as a candidate. You are not automatically listed for a transplant just because you've had some contact with a transplant program.

Each transplant program makes its own decision about whether to accept someone for a transplant. The transplant team at each program has its own standards for accepting candidates. Each team may view the same facts and information different ways and make

different decisions about listing a person for a transplant. So if one program is not willing to accept you as a candidate, a different program may accept you.

How do I get on the waiting list?

To get on the national waiting list, you should follow these steps:

- Receive a referral from your physician.
- Contact a transplant hospital. Learn as much as possible about the 200+ transplant hospitals in the United States and choose one based on your needs, including insurance, location, finances and support group availability.
- Schedule an appointment for evaluation to determine if you are a good candidate for transplant.
- During the evaluation, ask questions to learn as much as possible about that hospital and its transplant team.
- The hospital's transplant team will decide whether you are a good transplant candidate. Each hospital has their own criteria for accepting candidates for transplant.
- If the hospital's transplant team determines that you are a good transplant candidate, they will add you to the national waiting list.

How do I know that I am listed?

UNOS does not send patients written confirmation of their placement on the waiting list. Instead, patients should find out if they have been placed on the national waiting list through their transplant hospital. If you have questions about your status on the list, you should ask the team at your transplant hospital.

Can I list at more than one hospital?

Yes. This is called "multiple listing." UNOS policy permits patients to be considered for organs that become available in other areas by being evaluated and listed at more than one center. This may reduce your waiting time in some cases, but not always. There is no advantage to listing at more than one transplant center in the same Organ Procurement

Organization local area. Each center has its own criteria for listing transplant candidates, and each center can refuse to evaluate patients seeking to list at multiple centers. If you wish to list at more than one center, inform your primary center and other centers you contact.

What questions should I ask the transplant team?

- What kind of medical tests are done in an evaluation?
- What medical conditions might rule me out for a transplant listing?
- Who are the members of the transplant team and what are their jobs?
- How many attending surgeons are available to do my type of transplant?
- Who will tell me about the transplant process?
- Is there a special nursing unit for transplant patients?
- Can I tour the transplant center?
- Will I be asked to take part in research studies?
- Does the hospital do living donor transplants?
- Is a living donor transplant a choice in my case? If so, where will the living donor evaluation be done?
- What is the organ recovery cost if I have a living donor?
- What part of the transplant cost is covered by my insurance?
- What financial coverage is accepted by the hospital?
- How much will I have to pay?
- What happens if my financial coverage runs out?

How long will I have to wait?

Once you are added to the national organ transplant waiting list, you may receive an organ that day, or you may wait many years. Factors affecting how long you wait include how well you match with the donor, how sick you are, and how many donors are available in your local area compared to the number of patients waiting.

How will they find the right donor for me?

When a transplant hospital adds you to the waiting list, it is placed in a pool of names. When an organ donor becomes available, all the patients in the pool are compared to that donor. Factors such as medical urgency, time spent on the waiting list, organ size, blood type and genetic makeup are considered. The organ is offered first to the candidate that is the best match.

How are organs distributed?

The organs are distributed locally first, and if no match is found they are then offered regionally, and then nationally, until a recipient is found. Every attempt is made to place donor organs.