

What doctors want patients to know about becoming a living kidney donor

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The decision to donate a kidney is not just an act of generosity; it's a lifesaving act that provides hope for someone in need. Every year, thousands of people wait anxiously for a lifesaving transplant, their futures uncertain as they cling to the possibility of finding a match. But amid the statistics and the struggles, there are everyday heroes—people who step forward to share the gift of life, often with a stranger.

Kidney transplants are the most common organ transplant in the U.S. Of the over [120,000 people awaiting a life-saving transplant](#), over 90,000 are waiting for a kidney. Last year, about 28,000 kidney transplants were performed, 6,000 of which were from living donors.

The AMA's What Doctors Want Patients to Know™ series gives physicians a platform to share what they want patients to understand about today's health care headlines.

In this installment, Jennifer R. George, MD, a general and abdominal transplant surgeon at HCA Healthcare's Las Palmas Medical Center in El Paso, Texas, took the time to discuss becoming a living kidney donor. As a leader in living donor kidney transplants, HCA Healthcare performed 351 living kidney donor transplants in 2024, which was 5.5% of living kidney donor transplants performed nationally.

[HCA Healthcare](#) is a member of the [AMA Health System Program](#), which provides enterprise solutions to equip leadership, physicians and care teams with resources to help drive the future of medicine.

Why kidney donation matters

When on the waitlist for a kidney donation, most people wait three to five years for a deceased donor kidney, but a living donor transplant can be scheduled within months if one is available. Dialysis can sometimes also be avoided altogether. A living donor kidney can last between 15 and 20 years, while a deceased donor kidney lasts about eight to 12 years.

“Kidney donation saves lives. Remaining on dialysis leads to cardiovascular health complications,” said Dr. George. “Kidney donation is essential in helping those with kidney disease avoid developing those health complications, allowing them to live longer and healthier lives.”

Whether you are donating a kidney to a loved one, friend, acquaintance or stranger, it is a transformative, lifesaving act. It is the ultimate gift you can give someone.

Being healthy is key for donors

“The most important thing to keep in mind is you shouldn’t rule yourself out from being a donor if it’s something you’re interested in,” said Dr. George. “Don’t hesitate to submit an application to your transplant center because they’re going to do all the workup that’s necessary to make sure that you’re healthy and that you are not going to have any issues after you donate a kidney. Let us do all of the workup to make sure that everything looks good.”



Jennifer George, MD

Additionally, some studies have found that [living donors live longer](#) than the average person because the workup ensures that donors are very healthy people. You can continue to do the same activities you could before donating. It will not alter your lifestyle.

Most donors are healthy and don't require changes to their lifestyle afterward. "There's actually a group of donors who go out to climb mountains together, run marathons and do a lot of extreme sports, which is definitely your decision to do," said Dr. George.

A living donor advocate will help

"You're going to meet a living-donor advocate who is separate from the transplant team," Dr. George said. "Their only interest is making sure that you are staying safe as a donor and that you don't feel pressured and that your interests are being protected."

This is to make sure that "the donor doesn't feel pressured and that you have the support you need after you donate," she added.

The *AMA Code of Medical Ethics* says that "enabling individuals to donate nonvital organs is in keeping with the goals of treating illness and relieving suffering so long as the benefits to both donor and recipient outweigh the risks to both." Learn more with the AMA about [transplantation of organs from living donors](#).

Compatibility testing is the first step

"Once a transplant center receives your application, their living donor coordinator will reach out to you and give you some educational materials," Dr. George explained. This helps to ensure "you're more familiar with the process."

Then, "the first thing that most centers in the country will do is blood work to make sure that you're a match for the person you want to donate to," she said. "If you're not a match, there are other options that you can consider to help your recipient get a kidney, even if it's not your own."

There is kidney paired donation

“People want to donate to a friend or family member or someone they know, but sometimes they are not a match for them, and if that is the case, you can do something called a kidney paired donation,” said Dr. George. “A paired donation is when we find another pair and their donor doesn’t match to their recipient, but that other donor matches to your recipient.”

“So, everyone ends up with a living-donor kidney. It may not be the person who you initially intended to donate the kidney to, but you’re still helping your loved one get a living donor kidney,” she added. “It’s a really good way to help someone get a very good kidney and to get them off dialysis faster.”

Other testing is completed too

More laboratory testing is done to ensure “there are no concerns for any medical issues that you were not aware of before,” Dr. George said. For example, “we do some urine studies to be sure that the kidneys are working the way that we want them to.”

Additionally, “we do some imaging studies to make sure that there’s nothing abnormal in the anatomy and that’s when you meet the surgeon and a kidney specialist,” she said.

There is a review committee

“Our No. 1 concern is you, as a donor, and making sure you stay healthy, so we’re going to make sure that everything looks good and that you’re safe to be a donor,” Dr. George said.

Once the application is submitted and tests completed, “that’s all reviewed by a committee, and that committee is made up of the surgeon, nephrologist and all of the coordinators who work in the transplant center,” she explained. “Then the case is discussed, and if everything looks good medically and from a social standpoint, you’re going to be approved

to be a donor.”

You don’t have to be related

“One of the common misconceptions is that the donors have to be related to each other. Donors don’t have to be related. In fact, it could be a complete stranger,” Dr. George said. “Once in a while, we do have donors who are called nondirected donors. They are people who just feel moved to donate a kidney and they don’t know anyone who is on dialysis, but they just want to donate a kidney to anyone who may be on the list around where they live.”

“So, you can actually submit an application to be a donor, and you don’t have to have someone who you want to donate to,” she said. “There are about 90,000 people who are waiting for a kidney in the country, and you can help one of those people who are on the list waiting for a kidney even if you don’t know them.”

“Being a donor is an incredibly selfless and amazing thing to do in general, but to provide this kind of gift to someone who you’ve never met is especially amazing,” Dr. George emphasized.

Surgery is minimally invasive

“Once that whole process is done and you’re approved, then we talk about scheduling a surgery,” Dr. George said. “And that’s usually done based around the timeline that is requested by the recipient and the donor.”

“This is an elective surgery, so it can be scheduled whenever the donor and the recipient feel comfortable with doing it,” she said, noting that the surgery is and typically done “laparoscopically or robotically with very small incisions and a camera.”

“You’re usually in the hospital 24 hours, maybe 48 hours if you require a little bit more time for recovery,” Dr. George added.

Short-term risks are related to surgery

“The short-term risks are surgically related. So, just as with any surgery, someone who donates the kidney is going to have some discomfort at their incisions, which is normal for anyone who has any kind of surgery,” said Dr. George, adding that “things like getting a hernia after the surgery—which have a very small likelihood—are possible short-term risks.”

Many donors will see a slight rise in their creatinine level, an indicator of kidney function. However, “it’s normal to see your kidney number go up a little bit after donation, but that doesn’t mean that the kidney that is remaining isn’t working appropriately,” she said.

Long-term risks are minimal

“The long-term risks are also very small. The thing that people worry about the most is: If I donate a kidney, am I going to need to be on dialysis in the future?” Dr. George noted. Being a living kidney donor “doesn’t significantly increase your risk of having problems with your one remaining kidney in the long term.”

“Most patients who are donating a kidney will not face a lot of long-term risks after they donate,” she added, noting that some risks, although small, include slightly higher blood pressure and diabetes. There is also a less than 1% risk of living donors developing kidney failure after donation. If you do end up needing a kidney transplant after donating, you will be given higher priority on the waitlist.

There is an increased risk of developing certain kidney-related health issues in Black and Hispanic populations, [according to the National Kidney Foundation](#). Living donation is especially important in these populations that are significantly impacted by the complications of kidney disease.

Recovery will vary

“The recovery for everyone is different. Some people feel comfortable going back to work after a week and some people take six weeks off,” Dr. George said. “But in general, we tell people: No heavy lifting and to take it a little easier for at least the first six weeks. And then after that, back to normal activities.”

“No matter what surgery you have, you’re going to get these recommendations,” she said. “The reasons we say that is ... because it takes about six weeks for those muscles to heal completely, and then after that, there are no restrictions.”

Remember to stay hydrated

“We’re going to recommend that you just stay really well hydrated because even though you can live a nice, long, healthy life with one kidney—especially in the beginning—the body is getting used to filtering everything through that one kidney,” said Dr. George. “So, we want to make sure that you avoid getting dehydrated.

That means “drinking at least 64 ounces of water” a day, she added.

Have your support team ready

“Another really important thing is that you are going to have a surgery and you’re going to need some help after surgery,” Dr. George said. “Anyone who has surgery will need a little bit of support.”

“So, make sure that you have your support team ready for the recovery after the donation process,” she added. “That’s one of the most important things for preparation.”

This is a big decision

While “it is a very safe surgery, it’s still a surgery, so you need to be mentally and physically prepared because it is stressful having surgery for anything,” Dr. George said. “It’s something that you need to make sure you’re prepared for, make sure you have the support that you need during that recovery period.”

“The other thing is it’s OK to change your mind about being a donor. This is a really big decision to make, and it’s great that someone makes this decision,” she said. “But for different reasons, someone might decide they were ready to be a donor and maybe it’s not right for them right now.”

“It’s important to know that no matter what, up until the time that you go back for your donor surgery, you have the right to say you’re not ready to be a donor, and your privacy will always be protected,” Dr. George said. “If you feel unsure about being a donor, you can tell this to your physician and to your living-donor advocate, and we provide a medical out.”

“If you don’t feel comfortable at that time, but later on things have changed and you feel good about it, you can be considered to be a donor in the future,” she said. “We won’t disclose the reason why you can’t donate or the reason why we’re not proceeding because we want to protect you and your privacy.

“It’s OK if you change your mind because we want to make sure that you’re safe and that your interests are being respected,” Dr. George added.