Living Kidney Donation:

ABOUT THE SURGERY
Laparoscopic nephrectomy is the method used most often at our center. This procedure is performed through 2 small abdominal incisions, called “ports.” The surgeon inserts laparoscopic instruments into these incisions to isolate and remove the kidney. A 3-4 inch incision is made on the lower abdomen, just large enough to remove the kidney.
Mini open nephrectomy is an alternative procedure our center uses rarely when the right kidney is chosen for donation. A single 6—8 inch right side incision is made over where the kidney is located. The kidney is removed directly through this incision.
Open nephrectomy site 6 to 8 inches
Most living donors spend 2 days in the hospital, go home, and recover for 3-6 weeks. Recovery time will depend on the type of surgery you had and what type of work you do. Recovery from surgery does not mean complete bed rest. It does mean rest from strenuous physical exertion, exercise, and heavy lifting.
There are risks and possible complications to any surgery, but we will never let you donate if the procedure is not safe for you!

**COMMON RISKS INCLUDE:**
- Constipation (laxatives will be prescribed)
- Bloating
- Nausea

**RARE RISKS INCLUDE:**
- Bleeding
- Hernias or wound infections
- Breathing problems, pneumonia
- Blood clotting
- Heart attack
- Future obesity, hypertension
- Stoke

- Renal failure (estimated at .2% to .3% risk of occurring)
- Death (mortality rate for living donors post donation is estimated to be .03% or 3/10,000)
Our transplant survival rates have consistently met or exceeded national expectations. You may visit the Scientific Registry of Transplant Recipients for more information at www.srtr.org.