Kidney and Pancreas Transplant Surgery

If you are having kidney, pancreas or both a kidney and pancreas transplant, this handout will help you to learn more about the surgery. It is important that the health care team closely monitors your care. Ask questions so that you feel prepared for this surgery.

Preparing for Transplant Surgery

- Bring your ID, insurance card(s), and current medicine lists.
- Bring a change of comfortable clothing for going home, toothbrush and toothpaste, comb or brush, and other items to keep you comfortable.
- Leave all valuables at home, and remove body piercings, and jewelry.
- You may eat light meals the day before surgery.
- You will not be able to eat or drink anything after midnight, except the medicines you need to take with small sips of water.
- **If you are diabetic**, talk with your doctor about how to manage your blood sugar before surgery. You may be told to decrease your insulin or use gel or candy to keep your blood sugar levels balanced.
- **If you use dialysis**, tell the health care team when your last dialysis occurred. You may need one more before surgery.
  - If you have peritoneal dialysis, bring enough supplies for 4 exchanges.
Coming to the Hospital

If you plan a Living Donor surgery, you and the donor will work with the transplant team to set a surgery date. If you are waiting for donor organs, then you will receive a phone call telling you when to come to the hospital.

Before Surgery

When you come to the hospital, the doctor will talk with you about the surgery and have you sign consent forms.

You will be asked to shower if you were not able to before coming in to the hospital. You will have an IV placed into your arm to give you fluids and medicines. Blood work will be sent to the lab. Your heart rate, blood pressure, and temperature (vital signs) will be checked often.

During Surgery

- While under general anesthesia, the transplant surgeon will make incisions on the lower half of the abdomen. In a kidney pancreas transplant, the kidney may be placed on the lower left side and pancreas on the lower right side.

- The transplant surgeon will add or graft a new kidney, pancreas, or both kidney/pancreas. The organ is placed in a space where it can easily connect to your blood vessels and bladder.
  - Your kidneys are not usually removed unless there is repeated infection that can affect your transplant kidney, or if you have problems with urine backing up in these kidneys.
  - Your pancreas is not usually removed because it still helps with digestion.

- A narrow, flexible tube called a Foley catheter will drain urine during surgery. This will be removed the day after surgery if your kidney is functioning well. This stays in place 4 to 5 days after kidney transplant and for about 10 days after pancreas transplant to allow time for the connection between your bladder and your new transplant to heal.

- You will be taken to a recovery area after surgery and then brought back to a special care room on the transplant unit where you will stay for 24 hours. In this room, you will have your vital signs and urine output checked often. This room is not able to accommodate family overnight. After 24 hours you will be moved to a regular room on the transplant floor.
After Surgery

- You will be given medicines to manage your pain. Tell your doctor or nurse how well the medicines are controlling your pain.
- You will also be given a stool softener to help you pass stool.
- You may have some gas pains after surgery. Tell your team how you feel. Walking several times a day can help to improve comfort.
- You will need to breathe deeply and cough to clear your lungs after surgery. You will also use a pillow to support your incision. Your nurse will teach you how to use a device called an incentive spirometer. For more information, read the handout, How to Use an Incentive Spirometer.
- Once your bowel function returns after surgery, you will be given fluids to drink, and then solid food to eat as your stomach is able to tolerate foods. Your IV will be removed once are able to drink enough liquids.
- After the catheter is removed, ask for help to go to the bathroom.
- You will have your vital signs checked often and have blood draws to check how your new organ is working.
- You will need to get out of bed and walk short distances. This helps to rebuild strength, prevent blood clots and improve blood circulating to the new organ.
- You will be taught about your anti-rejection medicines, also called immunosuppressants. You need to take these medicines every day for the rest of your life. Do not skip doses or it can put your transplant at greater risk for rejection.
- You will be taught about wound care or caring for your incision before going home.
- When you go home, follow your discharge instructions. If you have any problems or concerns, please call the phone number on your instruction sheet for help.

Talk to your doctor or others on your health care team if you have any questions. You may request more written information from the Library for Health Information at (614) 293-3707 or email: health-info@osu.edu.