

Dispelling the Myths

MYTH

If I'm in an accident and they find my license, medical professionals will not try to save my life.

Maybe I won't really be dead when they recover my organs.

There is no difference between brain death and being in a coma.

My body will be mutilated and disfigured if I would donate.

Organs go to people who didn't take care of theirs.

I am too old to become an organ donor.

I am too sick to donate.

My religion does not support donation.

Wealthy people are the only people who receive transplants.

My family will have to pay for costs related to my donation.

FACT

When you go to the hospital for treatment, paramedics, nurses and doctors focus on saving your life — not somebody else's. CORE is only notified after all life-saving efforts have failed.

Although it's a popular topic in the tabloids, in reality, no one has ever awoken to discover they're in surgery becoming an organ donor. In fact, people who have agreed to organ donation are given more tests (at no charge to their families) to determine that they're truly dead than are those who haven't agreed to organ donation. Donation doesn't happen until after death has been declared.

Brain death is pronounced when there is a lack of blood and oxygen flow to the brain. Brain death is the medical, legal and moral determination of death. To verify brain death, a series of tests are performed over a period of time, and more than one diagnosis is required before the donor's family is presented with the opportunity to donate. There is no recovery from brain death.

Doctors maintain the utmost respect for the donor and organs are removed in a routine operation similar to other types of surgeries. Organ and tissue donation will not interfere with traditional funeral arrangements such as an open casket.

Organs go to people who were born with or developed diseases that have caused organ failure. Less than 5% of those waiting need a transplant because of their own behaviors or choices. For those people, they must achieve and sustain sobriety before they can be listed for a transplant.

No one is ever too old or too young to give the gift of life. Every potential donor is evaluated on a case-by-case basis at the time of their death to determine which organs and tissue are suitable for donation.

Few illnesses or conditions prevent someone from being a donor. People with diabetes, heart disease, cancer, hepatitis and even HIV have saved lives through organ and tissue donation. At the time of death, CORE reviews medical and social histories to determine suitability for donation. Although someone may not be able to donate blood, it does not always prevent the individual from donating organs and/or tissue.

All major religions consider organ donation to be an individual decision, or support it and see it as the final act of love and generosity toward others.

Financial and celebrity status do not determine who receives a transplant. A national computer network, maintained by the United Network for Organ Sharing (UNOS), matches organs according to height, weight and blood type, followed by medical urgency and then time accrued on the waiting list. Age, race, gender, religious affiliation or financial status are not factors that determine who receives a transplant.

Donors and their families are not responsible for any costs related to donation. All costs are incurred by the organ procurement organization.