I was on reserve during my first year with the airline,” recalls First Officer Patrick Baures (Alaska), a B-737 pilot from Portland, Ore. “My ‘crash pad’ roommate and good friend, [First Officer] Jeff Sabo [Alaska], and I were training to run the Portland Marathon.

“We went out for a run, and my legs felt extremely heavy—as if they weighed three times what they actually weigh. I’d always run and played soccer; I thought the heavy legs were a stress reaction of some kind, not an actual physiological problem.

“I went running a couple of days later, and the same thing happened. The next day, I had a bellyache and was extremely tired. I slept four or five hours that afternoon. I’m not the kind of guy who takes naps.

“I called my family doctor. He knew I flew for Alaska [Airlines] and that I’d recently had a layover in Mexico. He said it sounded like hepatitis A.

“I went to see him. He said, ‘Yep, looks like hepatitis A.’ But the lab test came back negative. He said, ‘Maybe it’s a little early. Let’s test you again in a few more days.’ But that test was negative, too.

“I was feeling more and more tired, and became a little jaundiced. The doctor tested me for hepatitis B, hepatitis C, and HIV—all negative. He was stumped, but my liver function tests continued to worsen.

“My doctor ordered a liver biopsy. I went to the hospital for the biopsy on a Friday; they said, ‘You’re not going home—you’re going right into a bed.’ I had a liver transplant the following Thursday.”

F/O Baures, as he was wheeled into the operating room, was 36 years old, married, and father of a 1-year-old son. He was a fit amateur athlete who had not abused his body with alcohol or drugs. Yet he already had one foot in the grave.

“My doctor thinks I picked up an infection or some kind of toxin during my layover in Mexico,” F/O Baures continues. “I’ll never know for sure. No little thing inside my body says, ‘Made in Mexico.’

“I was in the hospital only six or seven days, the minimum time required for observation after the transplant. But the recovery took a long time: about six months after the initial surgery, I had a complication—blockage of my bile duct, caused by the sutures my surgeon used to attach my new liver.”

He was on sick leave for about 2 years.

“[Capt.] John Sluys was our first officer rep in Council 67 [Seattle] then. He went to bat for me. We have an Employee Assistance Fund at Alaska Airlines to help employees in need; that helped us out while I was on sick leave.”

Another helping hand came from Dr. Don Hudson, head of ALPA’s Aeromedical Office.

“I was one of the first [pilots] to get an FAA first-class medical certificate after a liver transplant,” F/O Baures explains. “Dr. Hudson expedited the whole process. He pushed it through. He pretty much did all the paperwork. It happened very fast. That’s one of the reasons I’m such a pro-ALPA pilot.”

The transplant altered a few aspects of F/O Baures’ medical certificate.

“A pilot can receive an organ transplant—other than a heart transplant—and be cleared to fly after a six-month observation period if the disease is adequately controlled and the medications used are authorized,” advises Dr. Quay Snyder, Associate Aeromedical Advisor in ALPA’s Aeromedical Office. “The organs most commonly transplanted are kidneys, and several pilots have received bone marrow transplants for some types of blood-based cancer. Our office also has helped pilots who have received liver, cornea, and lung transplants.”

Dr. Snyder says that for donating an expendable organ “a pilot may donate an organ and be cleared to return to flying after recovery is complete and normal physiological function is documented. The FAA does not require any minimum period of observation for the donor. The most common donations we see are kidney and bone marrow donations.”

Donating an organ such as a kidney, part of a liver, or bone marrow obviously involves submitting to a surgical procedure. If narcotics were administered after the surgery, a pilot should wait 3 days after the receiving the last dose before returning to flight duties to avoid the possibility of testing positive on a drug test.

A pilot who has donated an organ or tissue should report having done so at the time of his or her next application for an FAA airman medical certificate.
COMMONLY ASKED QUESTIONS ABOUT BECOMING AN ORGAN DONOR

What organs can be transplanted?
Kidneys, hearts, lungs, livers, pancreases, intestines can be transplanted.

What tissues can be transplanted?
Blood vessels, bone, bone marrow, connective tissue, corneas, heart valves, middle ears, and skins are among the tissues that can be transplanted.

Who decides who receives donated organs?
The Organ Procurement and Transplantation Network matches donated organs with critically ill patients on the national waiting list. Medical urgency, compatibility of blood chemistries, and body size are considered in making the match.

Does the donor family meet the recipient?
Most donor families are told the age, sex, occupation, and other general characteristics of the recipient. If both the donor family and the recipient agree, they may exchange names, correspond, and even meet.

Must I have medical tests to register as an organ and tissue donor?
No testing is needed before you sign a donor card or designate “organ donor” on your driver’s license. At the time of donation, organs are tested for infectious diseases, including HIV. Only healthy organs are actually transplanted.

Will I receive less aggressive medical treatment because I am willing to be a donor?
No. Your own physicians do everything possible to save your life. Only after they determine that further efforts would be futile does a transplant team become involved.

What if members of my family oppose donation?
The best way to ensure your wishes are carried out is to tell your family how strongly you feel about being an organ and tissue donor. You also should sign and carry a donor card, designate “organ donor” on your driver’s license, sign up with your state registry, if one exists, and record your wishes in legal documents.

Does organ donation leave a body disfigured?
Donation does not change the appearance of the body for the funeral service.

How much will organ donation cost my family?
Nothing. All costs related to donation are paid by recipients and their health insurance. Your family pays only for the medical care provided before death and funeral expenses.

Do religious objections to organ and tissue donation exist?
Most major religions in the United States support donation as a gift of life to fellow human beings.

When You’ve Decided to Become an Organ and Tissue Donor:
Sign the organ and tissue donor card and carry it in your wallet or purse at all times. Have two people, preferably members of your family, witness your signature.

If you have a driver’s license, find out from your local motor vehicle department how you can indicate on it that you want to be an organ and tissue donor. If your state has a donor registry, sign up.

Tell your family members that you have decided to become an organ and tissue donor so they will understand your wishes and support them.

Persons who are less than 18 years old may need to take additional steps to make a valid donation declaration.

For more information, visit the U.S. Department of Health and Human Services website at www.organdonor.gov, call 1-888-275-4772, or visit www.donatelife.net.

DHHS information was used here.)

lifestyle—he must take immunosuppressive drugs every day, and following doctors’ orders, he avoids heavy, greasy foods that are hard to digest. But his renewed lease on life has provided many rewards: Since his transplant, F/O Baures and his wife, Maile, have had two more children, and he has been able to return to an active lifestyle. “I still run, play soccer, and ride a bike,” he reports. “I’m the assistant coach for my nine-year-old’s soccer team.”

Once a year or so, F/O Baures and his wife write a letter to the family of the anonymous but generous donor who, in his or her own death, gave F/O Baures life. “They’ve chosen not to make contact with us,” F/O Baures says. “That decision always lies entirely with the donor’s family.”

He adds, “As soon as I was able, my wife and I volunteered to help promote the Oregon Donor Program—at schools, health fairs, and other community events. My parents do, too. “Sometimes, when I get into conversations with other pilots, they say, ‘Oh, yeah, you’re the guy who had the kidney transplant,’ and I say, ‘Liver.’ And sometimes they tell me they’ve signed the place on their driver’s license renewal that registers them as an organ donor. I always give them the little spiel, ‘That’s great, but remember, you have to let your family know your wishes about being a donor.’”

Long waiting lists
F/O Baures was a lucky man indeed. Each day, approximately 70 people in the United States receive a life-enhancing organ or tissue transplant. But an average of 17 other people die every day because not enough organs are available. As of June, nearly 86,000 people in the United States were on the national waiting list for an organ.

By deciding to become an organ donor, you can help as many as 50 people. All you need to do is say YES to organ and tissue donation on your donor card, driver’s license, or state registry, if your state has one, and discuss your decision with your family.