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2008146

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Feature: When the Organ Transplant Involves Employee and Boss

When the Organ Transplant Involves Employee and Boss

As selfless as donating an organ may be, the process takes on another dimension when workplace hierarchy is involved. The big issue is whether an employee is freely consenting to the donation—or might feel pressure to do so.

By Pat Olsen

For years, Charles Ward, 54, director of public safety at Methodist Hospital in Houston, suffered from polycystic kidney disease, but that didn't keep him from working. Then last year his kidneys failed and he was forced to start dialysis. Not wanting to be tied to this routine, the manager started hoping for a kidney transplant. Word quickly spread through his department and four of his employees offered to donate a kidney. Last January, Joshua Phipps, 33, did just that. Phipps called it a small sacrifice. His boss called it heroic.

It's one thing for a boss to donate a kidney to an employee, which has occurred in several other companies, but when an employee is the donor and the boss is the recipient, it's a slightly different matter that flashes warning lights for some workplace experts. The Methodist Hospital example is bound to be repeated: polycystic kidney disease, which is potentially fatal, affects approximately 600,000 people in the United States alone, according to the [Nephrology Channel Web site](#), and there are other reasons for transplantation as well.

An employee's illness can actually foster community in a workgroup as employees rally around and support an ill colleague. But as selfless as donating an organ may be, when it involves the workplace hierarchy it's not quite as cut and dried as when a stranger, friend or acquaintance comes forward. The big issue is whether an employee is freely consenting to the donation or might feel pressure to do so, says Art Caplan, chairman of the Department of Medical Ethics at the University of Pennsylvania.

"As long as employees aren't getting pressured, bullied or bribed," he says, there should be no problem. He adds that the psycho-social screening that the

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transplant center requires the donor and recipient to undergo before approving a transplant should uncover any problems.

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A second concern is whether other employees might feel the donor will receive special privileges as a result of such generosity. After all, the donor has given the boss not only a part of his body, in itself an enormous act, but a new lease on life. In one news report, Ward laughed off a question about whether Phipps' generosity would impact his performance reviews. The hospital declined to comment for this article, which may hint at the sensitivity of this issue.



The international nature of work today may also present cross-cultural issues when it comes to transplants, Caplan says. There are workplaces in which employees are in a more subservient role than in the U.S., such as in Japan. In these cultures it would be more difficult to say no when a kidney is being sought for the boss, he says. That may be an issue when Asian employees work in American companies on U.S. soil too.

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Dr. Maynard Brusman, a consulting psychologist and executive coach in San Francisco, questions the long-term ramifications of transplant between boss and employee. At first, it might seem that there are only positives, he says, but what if there are issues down the line? What if the employee loses his job because of cutbacks? Will he feel betrayed? What if his performance deteriorates? Will the boss be able to take the same steps he would with a different employee? What will other employees think?

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Brusman would like to see a doctoral dissertation on what occurs over 20 years in these transplant situations. He's also concerned about invading a person's privacy in the workplace. Companies often promote charitable acts like these. But what if the employee donor isn't comfortable with the entire company knowing about his gift to his boss, and by extension, newspaper and Web readers or TV viewers?



The U.S. Department of Health and Human Services' Workplace Partnership for Life campaign is bringing organ donor awareness programs directly to employers and employees nationwide. As part of this campaign, for instance, the [Mid-South Transplant Foundation](#) in Memphis, Tennessee, provides promotional materials on organ donation for companywide distribution. It also provides lunchtime speakers (either the recipient or donor family or both), materials and speakers for health fairs and informational fliers to stuff in payroll envelopes. This campaign does not directly promote donation between employer and employee, but could some employees interpret this encouragement as pressure if it's a supervisor who needs a kidney?

Today kidneys, hearts and livers are often transplanted, but Caplan predicts that with scientific advances, doctors may one day regularly transplant other organs—even faces. If it comes to that, he advises, companies may want to establish policies for certain types of transplants, because there may be even more psychological, emotional and social considerations in play.

If potential donors want to help someone avoid lifelong dialysis—or can actually save someone’s life—it would be heartbreaking to stifle this most generous of impulses just because the person is the boss. Or, turning that around, it would be devastating for supervisors to think they should forgo a new kidney if the prospective donor is an employee, especially when live kidney donors are in such short supply.

The picture is dismal for people needing other transplants as well. More than 82,000 people are awaiting transplants nationwide, according to the [United Network for Organ Sharing \(UNOS\)](#), and about 17 patients die every day while awaiting an organ. However, when the transplant involves an employer-employee relationship, companies might want to ensure they have carefully considered all the issues.

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