TRF - Kidney - Adult Fields to be completed by me

Form Section	Field label	
1-Recipient Information	Organ Type	
1-Recipient Information	Follow up code	
1-Recipient Information	Recipient First Name	
1-Recipient Information	Recipient Last Name	
1-Recipient Information	Recipient Middle Initial	
1-Recipient Information	SSN	
1-Recipient Information	HIC	
1-Recipient Information	Previous Follow-Up	
1-Recipient Information	DOB	
1-Recipient Information	Gender	
1-Recipient Information	Tx Date	
1-Recipient Information	Previous Px Stat Date	
1-Recipient Information	Transplant Discharge Date	
1-Recipient Information	State of Permanent Residence	
1-Recipient Information	Zip Code	
2-Provider Information	Recipient Center	
2-Provider Information	Recipient Center Type	
2-Provider Information	Followup Center Code	
2-Provider Information	Followup Center Type	
3-Donor Information	UNOS Donor ID #	
3-Donor Information	Donor Type	
3-Donor Information	OPO	
4-Patient Status at Time of Follow-Up	Date: Last Seen, Retransplanted or Death	
4-Patient Status at Time of Follow-Up	Patient Status	
4-Patient Status at Time of Follow-Up	Primary Cause of Death	
4-Patient Status at Time of Follow-Up	Primary Cause of Death//Specify	
5-Clinical Information	Graft Status	
5-Clinical Information	If Functioning, Most Recent Serum Creatinine	
5-Clinical Information	If Functioning, Most Recent Serum Creatinine//Status	
5-Clinical Information	Date of Graft Failure:	
5-Clinical Information	Primary Cause of Graft Failure:	
	Primary Cause of Graft Failure//Other,	
5-Clinical Information	Specify:	
5-Clinical Information	Post Transplant Malignancy	
5-Clinical Information	Donor Related	

5-Clinical Information	Recurrence of Pre-Tx Tumor	
5-Clinical Information	Post Tx De Novo Solid Tumor	
- 61 17. 6	De Novo Lymphoproliferative disease and	
5-Clinical Information	Lymphoma	

Public Burden Statement

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Notes		
Display Only - Cascades from Database		
Display Only - Cascades from Database		
Display Only - Cascades from TCR		
Display Only - Cascades from TCR		
Display Only - Cascades from TCR		
Display Only - Cascades from TCR		
Display Only - Cascades from TCR		
Display Only - Cascades from Prior TRF		
Display Only - Cascades from TCR		
Display Only - Cascades from TCR		
Display Only - Cascades from Database		
Display Only - Cascades from prior TRF		
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Display Only - Cascades from TCR		
Display Only - Cascades from TCR		
Display Only - Cascades from Database		
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Display Only - Cascades from Database		
Display Only - Cascades from feedback		
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Value or status is reported not both		
Value or status is reported, not both		

Form Section
1-Recipient Information
2-Provider Information
2-Provider Information
2-Provider Information
2-Provider Information
3-Donor Information
3-Donor Information
3-Donor Information
4-Patient Status at Time of Follow-Up
4-Patient Status at Time of
Follow-Up 4-Patient Status at Time of
Follow-Up
5-Clinical Information

5-Clinical Information
5-Clinical Information
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5-Clinical Information
5-Clinical Information

TRF - Kidney - Pediatric Fields to be completed by members

Organ Type Display Only - Cascades from Database Follow up code Display Only - Cascades from Database Recipient First Name Display Only - Cascades from TCR Recipient Last Name Display Only - Cascades from TCR Recipient Middle Initial Display Only - Cascades from TCR SSN Display Only - Cascades from TCR SSN Display Only - Cascades from TCR Display Only - Cascades from TCR HIC Display Only - Cascades from TCR Previous Follow-Up Display Only - Cascades from TCR DOB Display Only - Cascades from TCR DISPLAY Only - Cascades from TCR DISPLAY Only - Cascades from Database DISPLAY Only - Cascades from Database DISPLAY Only - Cascades from TCR DISPLAY Only - Cascades from TCR DISPLAY Only - Cascades from TCR DISPLAY Only - Cascades from Database DISPLAY Only -	Field label	Notes
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UNOS Donor ID # Display Only - Cascades from Database Donor Type Display Only - Cascades from Database OPO Display Only - Cascades from feedback Date: Last Seen, Retransplanted or Death Patient Status Primary Cause of Death Primary Cause of Death/Specify Functional Status Cognitive Development Date of Measurement Height Height//Status Value or status is reported, not both Height Percentile Calculated for display only	Followup Center Code	Display Only - Cascades from Database
Donor Type Display Only - Cascades from Database OPO Display Only - Cascades from Database Display Only - Cascades from feedback Date: Last Seen, Retransplanted or Death Patient Status Primary Cause of Death Primary Cause of Death//Specify Functional Status Cognitive Development Motor Development Date of Measurement Height Height//Status Value or status is reported, not both Height Percentile Calculated for display only	Followup Center Type	Display Only - Cascades from Database
OPO Display Only - Cascades from feedback Date: Last Seen, Retransplanted or Death Patient Status Primary Cause of Death Primary Cause of Death/Specify Functional Status Cognitive Development Motor Development Date of Measurement Height Height/Status Value or status is reported, not both Height Percentile Calculated for display only	UNOS Donor ID #	Display Only - Cascades from Database
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Patient Status Primary Cause of Death Primary Cause of Death//Specify Functional Status Cognitive Development Motor Development Date of Measurement Height Height//Status Value or status is reported, not both Height Percentile Calculated for display only	OPO	Display Only - Cascades from feedback
Patient Status Primary Cause of Death Primary Cause of Death//Specify Functional Status Cognitive Development Motor Development Date of Measurement Height Height//Status Value or status is reported, not both Height Percentile Calculated for display only		
Primary Cause of Death Primary Cause of Death//Specify Functional Status Cognitive Development Motor Development Date of Measurement Height Height//Status Value or status is reported, not both Height Percentile Calculated for display only	Date: Last Seen, Retransplanted or Death	
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Functional Status Cognitive Development Motor Development Date of Measurement Height Height//Status Value or status is reported, not both Height Percentile Calculated for display only	Primary Cauco of Doath//Specify	
Cognitive Development Motor Development Date of Measurement Height Height//Status Value or status is reported, not both Height Percentile Calculated for display only	Filliary Cause of Death//Specify	
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Date of Measurement Height Height//Status Value or status is reported, not both Height Percentile Calculated for display only	Cognitive Development	
Date of Measurement Height Height//Status Value or status is reported, not both Height Percentile Calculated for display only	^	
Date of Measurement Height Height//Status Value or status is reported, not both Height Percentile Calculated for display only	Motor Development	
Height//Status Value or status is reported, not both Height Percentile Calculated for display only	-	
Height Percentile Calculated for display only	Height	
Height Percentile Calculated for display only		
	Height//Status	Value or status is reported, not both
Weight	Height Percentile	Calculated for display only
	Weight	

Weight//Status	Value or status is reported, not both
Weight Percentile	Calculated for display only
BMI	Display Only - Cascades from Database
BMI	Calculated for display only
Kidney Graft Status	
If Functioning, Most Recent Serum Creatinine	
If Functioning, Most Recent Serum Creatinine//Status	Value or status is reported, not both
Kidney Date of Graft Failure:	
Primary Cause of Graft Failure:	
Primary Cause of Graft Failure//Other, Specify:	
New diabetes onset between last follow-up to the current follow-up	
If yes, insulin dependent	
Coronary Artery Disease Since Last Follow Up	
Post Transplant Malignancy	
Donor Related	
Recurrence of Pre-Tx Tumor	
Post Tx De Novo Solid Tumor	
De Novo Lymphoproliferative disease and Lymphoma	

Public Burden Statement