TCR - Kidney/Pancreas - Adult
Fields to be completed by member

Form Section	Field Label
1-Provider Information	Transplant Center Code
1-Provider Information	Transplant Center Type://Recipient Center
2-Candidate Information	SSN:
2-Candidate Information	Organ Registered:
2-Candidate Information	Date of Listing or Add:
2-Candidate Information	Last Name:
2-Candidate Information	First Name:
2-Candidate Information	Middle Initial://MI:
2-Candidate Information	Previous Surname:
2-Candidate Information	Gender:
2-Candidate Information	HIC:
2-Candidate Information	Date of Birth://DOB:
2-Candidate Information	State of Permanent Residence:
2-Candidate Information	Permanent ZIP Code:
2-Candidate Information	Ethnicity/Race:
2-Candidate Information	Citizenship:
2-Candidate Information	Year of Entry to the U.S.
2-Candidate Information	Year of Entry to the U.S Status://ST=
2-Candidate Information	Country of Permanent Residence
2-Candidate Information	Highest Education Level:
3-Patient Status	Functional Status:
3-Patient Status	Working for income:
3-Patient Status	Previous Transplant//Organ
3-Patient Status	Previous Transplant//Date
3-Patient Status	Previous Transplant//Graft Fail Date
3-Patient Status	Previous Pancreas Islet Infusion:
4-Source of Payment	Source of Payment//Primary:
4-Source of Payment	Foreign Government//Specify:
5-Clinical Information	Height in cm://Height:
5-Clinical Information	Height Status//ST=
5-Clinical Information	Height Growth percentiles//%ile

5-Clinical Information	Weight in kg://Weight:
5-Clinical Information	Weight Status//ST=
5-Clinical Information	Weight Growth percentiles//%ile
5-Clinical Information	BMI:
5-Clinical Information	BMI://%ile
5-Clinical Information	ABO Blood Group:
5-Clinical Information	Primary Kidney Diagnosis:
5-Clinical Information	Primary Kidney Diagnosis//Specify:
5-Clinical Information	Primary Pancreas Diagnosis:
5-Clinical Information	Primary Pancreas Diagnosis//Specify:
6-General Medical Factors	Diabetes:
6-General Medical Factors	Patient on insulin?
6-General Medical Factors	If on insulin, enter the insulin date
6-General Medical Factors	Total insulin dosage units
6-General Medical Factors	Total insulin dosage units//ST=
6-General Medical Factors	Insulin duration of use:
6-General Medical Factors	Insulin duration of use://ST=
6-General Medical Factors	Symptomatic Peripheral Vascular Disease:
6-General Medical Factors	Any previous Malignancy:
6-General Medical Factors	Any previous Malignancy//Specify Type:
6-General Medical Factors	Any previous Malignancy//Specify:
6-General Medical Factors	Total Serum Albumin:
6-General Medical Factors	Total Serum Albumin//ST=
6-General Medical Factors	C-Peptide
6-General Medical Factors	C-Peptide//ST=
6-General Medical Factors	Hba1c (%):
6-General Medical Factors	Hba1c (%)://ST
11-Kidney Medical Factors	Exhausted Vascular Access:
11-Kidney Medical Factors	Exhausted Peritoneal Access:
11-Kidney Medical Factors	Age of Diabetes Onset:
11-Kidney Medical Factors	Age of Diabetes Onset//ST=

Public Burden Statement

Notes	Form section
Display Only - Cascades from Waitlist	1-Provider Information
Display Only - Cascades from Waitlist	1-Provider Information
Display Only - Cascades from Waitlist	2-Candidate Information
Display Only - Cascades from Waitlist	2-Candidate Information
Cascades from Waitlist	2-Candidate Information
Cascades from Waitlist	2-Candidate Information
Not required	2-Candidate Information
Not required	2-Candidate Information
Display Only - Cascades from Waitlist	2-Candidate Information
Cascades from Waitlist	2-Candidate Information
Not required	2-Candidate Information
Cascades from Waitlist	2-Candidate Information
Cascades from Waitlist	2-Candidate Information
Cascades from Waitlist	2-Candidate Information
Cascades from Waitlist	2-Candidate Information
	2-Candidate Information
	2-Candidate Information
	2-Candidate Information
	2-Candidate Information
	2-Candidate Information
	3-Patient Status
	3-Patient Status
Display Only - Cascades from Database	3-Patient Status
Display Only - Cascades from Database	3-Patient Status
Display Only - Cascades from Database	3-Patient Status
	3-Patient Status
	3-Patient Status
	3-Patient Status
	4-Source of Payment
Value or status is reported, not both	4-Source of Payment
Calculated for display only	5-Clinical Information

	5-Clinical Information
Value or status is reported, not both	5-Clinical Information
Calculated for display only	5-Clinical Information
Display Only - Cascades from Database	5-Clinical Information
Calculated for display only	5-Clinical Information
Display Only - Cascades from Waitlist	5-Clinical Information
	5-Clinical Information
	5-Clinical Information
	5-Clinical Information
	5-Clinical Information
	5-Clinical Information
	5-Clinical Information
	5-Clinical Information
	5-Clinical Information
Value or status is reported, not both	6-General Medical Factors
	6-General Medical Factors
Value or status is reported, not both	6-General Medical Factors
	6-General Medical Factors
	6-General Medical Factors
	6-General Medical Factors
	6-General Medical Factors
	6-General Medical Factors
Value or status is reported, not both	6-General Medical Factors
	6-General Medical Factors
Value or status is reported, not both	6-General Medical Factors
	6-General Medical Factors
Value or status is reported, not both	6-General Medical Factors
	6-General Medical Factors
	6-General Medical Factors
	6-General Medical Factors
Value or status is reported, not both	11-Kidney Medical Factors
	11-Kidney Medical Factors
	11-Kidney Medical Factors
	11-Kidney Medical Factors
	11-Kidney Medical Factors
	11-Kidney Medical Factors

11-Kidney Medical Factors
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11-Kidney Medical Factors
11-Kidney Medical Factors
11-Kidney Medical Factors

TCR - Kidney/Pancreas - Pediatric
Fields to be completed by members

FieldLabel	notes
Transplant Center Code	Display Only - Cascades from Waitlist
Transplant Center Type://Recipient Center	Display Only - Cascades from Waitlist
Organ Registered:	Display Only - Cascades from Waitlist
Date of Listing or Add:	Display Only - Cascades from Waitlist
Last Name:	Cascades from Waitlist
First Name:	Cascades from Waitlist
Middle Initial://MI:	Not required
Previous Surname:	Not required
SSN:	Display Only - Cascades from Waitlist
Gender:	Cascades from Waitlist
HIC:	Not required
Date of Birth://DOB:	Cascades from Waitlist
State of Permanent Residence:	Cascades from Waitlist
Permanent ZIP Code:	Cascades from Waitlist
Ethnicity/Race:	Cascades from Waitlist
Citizenship:	
Year of Entry to the U.S.	
Year of Entry to the U.S Status://ST=	
Country of Permanent Residence	
Highest Education Level:	
Functional Status:	
Cognitive Development:	
Motor Development:	
Academic Progress:	
Academic Activity Level:	
Previous Transplant//Organ	Display Only - Cascades from Database
Previous Transplant//Date	Display Only - Cascades from Database
Previous Transplant//Graft Fail Date	Display Only - Cascades from Database
Source of Payment//Primary:	
Foreign Government//Specify:	
Date of Measurement:	

Height in cm://Height:	
Height Status//ST=	Value or status is reported, not both
Height Growth percentiles//%ile	Calculated for display only
Weight in kg://Weight:	
Weight Status//ST=	Value or status is reported, not both
Weight Growth percentiles//%ile	Calculated for display only
BMI:	Display Only - Cascades from Database
BMI://%ile	Calculated for display only
Is growth hormone therapy used at time of listing:	
ABO Blood Group:	Display Only - Cascades from Waitlist
Primary Kidney Diagnosis:	
Primary Kidney Diagnosis//Specify:	
Primary Pancreas Diagnosis:	
Primary Pancreas Diagnosis//Specify:	
Diabetes:	
Patient on insulin?	
If on insulin, enter the insulin date	
Total insulin dosage units	
Total insulin dosage units//ST=	Value or status is reported, not both
Insulin duration of use:	
Insulin duration of use://ST=	Value or status is reported, not both
Any previous Malignancy:	
Any previous Malignancy//Specify Type:	
Any previous Malignancy//Specify:	
Total Serum Albumin:	
Total Serum Albumin//ST=	Value or status is reported, not both
C-Peptide	
C-Peptide//ST=	Value or status is reported, not both
Hba1c (%):	
Hba1c (%)://ST	Value or status is reported, not both
Exhausted Vascular Access:	
Exhausted Peritoneal Access:	
Age of Diabetes Onset:	
Age of Diabetes Onset//ST=	Value or status is reported, not both
Fracture in the past year (or since last follow-up):	
Specify Location and number of fractures//Spine-compression fracture:	

Spine-compression fracture//# of fractures:	
Specify Location and number of fractures//Extremity:	
Extremity//# of fractures:	
Specify Location and number of fractures//Other:	
Other//# of fractures:	
AVN (avascular necrosis):	

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