

**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**

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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
Cascades from Waitlist	2-Candidate Information
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	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

Value or status is reported, not both  
Calculated for display only

Display Only - Cascades from Database  
Calculated for display only  
Display Only - Cascades from Waitlist

Value or status is reported, not both

Value or status is reported, not both

Value or status is reported, not both

Value or status is reported, not both

Value or status is reported, not both

Value or status is reported, not both

5-Clinical Information

5-Clinical Information

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6-General Medical Factors

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11-Kidney Medical Factors

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11-Kidney Medical Factors
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11-Kidney Medical Factors
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**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):	

**Public Burden Statement**