Form Section
Recipient Information
Provider Information
Provider Information
Provider Information
Donor Information
Donor Information
Donor Information
Patient Status - Transplant hospitalization
Patient Status - Transplant hospitalization
Patient Status
Patient Status
Patient Status
Patient Status
Socio-Demographic Information: Pre-Transplant
Socio-Demographic Information: Pre-Transplant
Socio-Demographic Information: Pre-Transplant
Socio-Demographic Information: Pre-Transplant
Socio-Demographic Information: Pre-Transplant - Source of Payment

Socio-Demographic Information: Pre-Transplant - Source of Payment Clinical Information: Pre-transplant Clinical Information: Pre-transplant Clinical Information: Pre-transplant Clinical Information: Pre-transplant

Clinical Information: Pre-transplant

Clinical Information: Pre-transplant -Amount of Tissue Loss

Clinical Information: Pre-transplant -Level of Amputation

Clinical Information: Pre-transplant Clinical Information: Pre-transplant

Clinical Information: Pre-transplant Clinical Information: Pre-transplant Clinical Information: Pre-transplant Clinical Information: Pre-transplant Clinical Information: Pre-transplant

Clinical Information: Pre-transplant

Clinical Information: Pre-transplant -Viral Detection Clinical Information: Pre-transplant -Pre-Transplant Labs Clinical Information: Pre-transplant -Pre-Transplant Labs Clinical Information: Pre-transplant -**Pre-Transplant** Labs Clinical Information: Pre-transplant -Pre-Transplant Labs Clinical Information: Pre-transplant -**Risk Factors** Clinical Information: Pre-transplant -**Risk Factors** Clinical Information: Pre-transplant -**Risk Factors** Functional Status: Pre-transplant Functional Status: Pre-transplant Functional Status: Pre-transplant -SF-36 score - Physical Health Functional Status: Pre-transplant -SF-36 score - Mental Health

Functional Status: Pre-transplant -SF-36 score - Mental Health

Functional Status: Pre-transplant -SF-36 score - Mental Health

Functional Status: Pre-transplant -SF-36 score - Mental Health

Functional Status: Pre-transplant -Upper Limb - Pre-Transplant

Functional Status: Pre-transplant -Upper Limb - Pre-Transplant

Functional Status: Pre-transplant - Upper Limb - Pre-Transplant

Clinical Information: Transplant Procedure

Clinical Information: Transplant Procedure

Clinical Information: Transplant Procedure

Clinical Information: Transplant Procedure - Preservation Information

Clinical Information: Transplant Procedure - Preservation Information Clinical Information: Post Transplant Clinical Information: Post Transplant

Clinical Information: Post Transplant - Causes of Graft Failure

Clinical Information: Post Transplant - Causes of Graft Failure

Clinical Information: Post Transplant - Causes of Graft Failure

Clinical Information: Post Transplant - Causes of Graft Failure

Clinical Information: Post Transplant - Causes of Graft Failure

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Clinical Information: Post Transplant - Causes of Graft Failure

Clinical Information: Post Transplant - Causes of Graft Failure

Clinical Information: Post Transplant - Causes of Graft Failure

Clinical Information: Post Transplant - Causes of Graft Failure

Clinical Information: Post Transplant - Discharge Lab Data

Clinical Information: Post Transplant - Discharge Lab Data

Clinical Information: Post Transplant - Major Transplant Complication

Clinical Information: Post Transplant

Clinical Information: Post Transplant

Clinical Information: Post Transplant Clinical Information: Post Transplant Clinical Information: Post Transplant

Clinical Information: Post Transplant Clinical Information: Post Transplant Treatment Treatment

Treatment
Treatment
Topical Immunosuppressive Medications
Topical Immunosuppressive Medications
Topical Immunosuppressive Medications
Topical Immunosuppressive Medications
Non-Topical Immunosuppressive Medications
Non-Topical Immunosuppressive Medications
Non-Topical Immunosuppressive Medications
Non-Topical Immunosuppressive Medications
Non-Topical Immunosuppressive Medications
Non-Topical Immunosuppressive Medications

TRR - VCA - Adult/Pediatri Fields to be completed by memł

Field Label
Recipient First Name
Recipient Last Name
Recipient Middle Initial
DOB
SSN
Gender
HIC
Transplant Date
State of Permanent Residence
Permanent Zip Code
Recipient Center
Lead Reconstructive Surgeon Name
Lead Reconstructive Surgeon NPI#
UNOS Donor ID #
Donor Type
OPO
Date of Admission to Transplant Center Date of Discharge from Hospital
Date Last Seen, Retransplanted, or Death
Patient Status
Primary Cause of Death
Primary Cause of Death - Other Specify
Highest Education Level
Working for income
Working for income - If Yes, indicate the recipient's working status
Working for income - If No, Not Working Due To
Grant Funding
Institutional Funding
Primary Source of Payment
Primary Source of Payment - Foreign Government, Specify

Secondary Source of Payment

Height (inches)

Weight (lbs)

BMI (Body Mass Index)

Primary Diagnosis for Transplant

Primary Diagnosis for Transplant - Other Specify

Craniofacial

Craniofacial - Partial Face - Specify anatomic structures missing

Craniofacial - Other Specify

Abdominal Wall (cm2)

Other VCA Organ Type - Other Specify

Upper Limb, Left

Upper Limb, Left - Other Specify

Upper Limb, Right

Upper Limb, Right - Other Specify

Lower Limb, Left

Lower Limb, Left - Other Specify

Lower Limb, Right

Lower Limb, Right - Other Specify

Previous Transplants (VCA or non-VCA organs) Previous skin graft(s)

Was patient hospitalized during the last 90 days prior to the transplant admission

Medical condition at time of transplant

Patient on Life Support

Patient on Life Support - Ventilator

Patient on Life Support - Other Mechanism

Patient on Life Support - Other Mechanism - Other Specify

HIV Serostatus		
CMV Status		
HBV Core Antibody		
HBV Surface Antigen		
HCV Serostatus		
EBV Serostatus		
Any tolerance induction technique used		
Pre-transplant blood transfusions		
Number of pre-transplant pregnancies (which may or may not have resulted in a live birth)		
Malignancies prior to transplant		
Malignancies prior to transplant - If Yes, Specif Type (select all that apply)	y	
Serum Creatinine (mg/dL)		
Hemoglobin A1c (%)		
Calculated PRA (CPRA) at transplant (%)		
Donor Crossmatch Result		
Coagulopathies		
Other Risk Factors		
Other Risk Factors - Other Specify		
Cognitive Development		
Motor Development		
Physical Functioning (PF) score		
Role-Physical (RP) score		
Bodily Pain (BP) score		
General Health (GH) score		
Vitality (VT) score		

Social Functioning (SF) score
Role-Emotional (RE) score
Mental Heath (MH) score
DASH Score
Carroll Test Score - Left
Carroll Test Score - Right
Multiple Graft Recipient
Were extra allograft vessels/nerve/tissue from outside the donated graft used in the transplant procedure
Surgical Procedure
Warm Ischemia Time (include anastomotic time)
Cold Ischemia Time
Cold Ischemia Time
Cold Ischemia Time Graft Status Date of Graft Failure
Graft Status
Graft Status Date of Graft Failure
Graft Status Date of Graft Failure Thrombosis
Graft Status Date of Graft Failure Thrombosis Acute Rejection
Graft Status Date of Graft Failure Thrombosis Acute Rejection Acute Rejection - Banff score
Graft Status Date of Graft Failure Thrombosis Acute Rejection Acute Rejection - Banff score Acute Rejection - Visual skin changes
Graft Status Date of Graft Failure Thrombosis Acute Rejection Acute Rejection - Banff score Acute Rejection - Visual skin changes Chronic Rejection
Graft Status Date of Graft Failure Thrombosis Acute Rejection Acute Rejection - Banff score Acute Rejection - Visual skin changes Chronic Rejection Chronic Rejection - Visual skin changes
Graft Status Date of Graft Failure Thrombosis Acute Rejection Acute Rejection - Banff score Acute Rejection - Visual skin changes Chronic Rejection Chronic Rejection - Visual skin changes Ischemia

Patient requested removal

Non-compliance: immunosuppression

Non-compliance: rehabilitation

Non-compliance: level of activity

Other

Other - Other Specify

Serum Creatinine (mg/dL)

Hemoglobin A1c (%)

Arterial Thrombosis

Venous Thrombosis

More than 5 pRBC (packed red blood cells) units

Cardiac arrest

DIC (Disseminated intravascular coagulation)

Graft/reperfusion syndrome

Other Major Transplant Complications

Other Major Transplant Complications - Other Specify

Did patient have any acute rejection episodes between transplant and discharge

Did patient have any acute rejection episodes between transplant and discharge - Number of episodes

{For each episode} Date of acute rejection diagnosis

{For each episode} Acute rejection was treated

{For each episode} Visual skin changes

{For each episode} Biopsy was done to confirm acute rejection

{For each episode} Banff Score

Antiviral Prophylaxis

Antibacterial Prophylaxis

-
Antifungal Prophylaxis
Peri-operative anticoagulation
Immunosuppression modications
Immunosuppression medications
Immunosuppression medications - Other Specify
Maintenance indication
Anti-rejection indication
Immunosuppression medications
Immunosuppression medications - Other Specify
Induction indication
Number of days of induction
Maintenance indication
A
Anti-rejection indication

Public Burden Statement

Display Only - Cascades from Removal Worksheet Display Only - Cascades from Removal Worksheet	Notes
Display Only - Cascades from Removal Worksheet Display Only - Cascades from Removal Worksheet	
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	Display Only - Cascades from Removal Worksheet





