Living Donor Follow-up (LDF) Fields to be completed by members

Form Section	Field Label	Notes
	Urinalysis	
Provider Information	Recipient Center Code	
Provider Information Provider Information	Recipient Center Code	Disales Only County from Detales
rovider Information	Recipient Center Type Recipient Center Name	Display Only - Cascades from Database
Provider Information	Follow-up Code	Display Only - Cascades from Database
Provider Information	Follow-up Code Follow-up Center Code	Display Only - Cascades from Database
Provider Information	Follow-up Center Type	Display Only - Cascades from Database
Provider Information	Follow-up Center Type Follow-up Center Code	Display Only - Cascades Holli Database
TOVIGET INTOTINGEION	Follow-up Center Provider	
Provider Information	Number//Follow-up Center	
Provider Information	Follow-up Center Name//Follow-up Center	
Oonor Information	Last Name	Display Only - Cascades from Database
Oonor Information	First Name	Display Only - Cascades from Database
Oonor Information	DOB	Display Only - Cascades from Database
Oonor Information	SSN	Display Only - Cascades from Database
Oonor Information	Gender	Display Only - Cascades from Database
Oonor Information	Donor ID	Display Only - Cascades from feedback
Oonor Information	Recovery Date	Display Only - Cascades from Database
Oonor Information	Organ(s) Recovered	Display Only - Cascades from Database
Oonor Status	Date of Initial Discharge	Display Only - Cascades from Database
Oonor Status	Most Recent Donor Status since//Date of last contact or death	· · · · · · · · · · · · · · · · · · ·
Donor Status	Most Recent Donor Status since	
Donor Status	Cause of Death	
Donor Status	Cause of Death//Specify	
Oonor Status	Functional Status	
Oonor Status	Physical Capacity	
Oonor Status	Working for Income	
Oonor Status	Working for Income//If No, Not Working Due To	
Donor Status	Working for Income//If Yes	
Donor Status	Donor Status//Attempts to Collect	
Donor Status	Loss of medical insurance due to donation	
Donor Status	Loss of health insurance	
Donor Status	Loss of life insurance	
Clinical Information	Date	
Clinical Information	Current weight	
Clinical Information	Weight in lb.	
Clinical Information	Weight //Status	Value or status is reported, not both
Clinical Information	Height in Ft	value of status is reported, not both
Clinical Information	Height in In	
Clinical Information	ER or urgent care visit related to donation since last follow-up	
Liver Clinical Information	Date	
Liver Clinical Information	Total Bilirubin	
Liver Clinical Information	Total Bilirubin //Status	Value or status is reported, not both
Liver Clinical Information	Date Date	varae or status is reported, flot botti
Liver Clinical Information	SGOT/AST	
iver Clinical Information	SGOT/AST SGOT/AST //Status	Value or status is reported, not both
liver Clinical Information		Value or status is reported, not both
	Date SCDT/ALT	
iver Clinical Information	SGPT/ALT	Value or status is reported, not both
Liver Clinical Information Liver Clinical Information	SGPT/ALT //Status Date	varue or status is reported, not both
iver Clinical Information	Alkaline Phosphatase	Value on status is yer
iver Clinical Information	Alkaline Phosphatase //Status	Value or status is reported, not both
liver Clinical Information	Date	
inner Clinian Lac		
	Serum Albumin	37.1
Liver Clinical Information	Serum Albumin //Status	Value or status is reported, not both
Liver Clinical Information Liver Clinical Information	Serum Albumin //Status Date	Value or status is reported, not both
Liver Clinical Information Liver Clinical Information Liver Clinical Information	Serum Albumin //Status Date Serum Creatinine	·
viver Clinical Information viver Clinical Information viver Clinical Information viver Clinical Information	Serum Albumin //Status Date Serum Creatinine Serum Creatinine //Status	Value or status is reported, not both Value or status is reported, not both
viver Clinical Information	Serum Albumin //Status Date Serum Creatinine Serum Creatinine //Status Date	·
Liver Clinical Information	Serum Albumin //Status Date Serum Creatinine Serum Creatinine //Status Date INR	Value or status is reported, not both
Liver Clinical Information	Serum Albumin //Status Date Serum Creatinine Serum Creatinine //Status Date	·

Liver Clinical Information	Platelet Count	
Liver Clinical Information	Platelet Count//Status	Value or status is reported, not both
Kidney Clinical Information	Date	
Kidney Clinical Information	Kidney//Serum Creatinine	
Kidney Clinical Information	Kidney Serum Creatinine //Status	Value or status is reported, not both
Kidney Clinical Information	Date	
Kidney Clinical Information	Blood Pressure Systolic	
Kidney Clinical Information	Blood Pressure Systolic //Status	Value or status is reported, not both
Kidney Clinical Information	Date	
Kidney Clinical Information	Blood Pressure Diastolic	
Kidney Clinical Information	Blood Pressure Diastolic //Status	Value or status is reported, not both
	Donor Developed Hypertension	
Kidney Clinical Information	Requiring Medication	
Kidney Clinical Information	Protein-Creatinine Ratio	
Kidney Clinical Information	Urine Protein	
Kidney Clinical Information	Maintenance Dialysis	
	Maintenance Dialysis//If Yes, Date First	
Kidney Clinical Information	Dialyzed	
Kidney Clinical Information	Diabetes	
Kidney Clinical Information	Diabetes	
Lung Clinical Information	Activity Level	
Lung Clinical Information	Chronic Incisional Pain	
Complications	Has the donor been readmitted since	
Complications	If Yes, Date of First Readmission	
Complications	Date of First Readmission //Status	Value or status is reported, not both
Complications	Specify Reason for First Readmission	
Complications	Complications since	Display Only - Cascades from Database
Complications	Kidney Complications since	Display Only - Cascades from Database
Complications	Kidney Complications Status//If Yes	
Complications	Kidney Complications//Specify	
Complications	Liver Complications since	Display Only - Cascades from Database
Complications	Liver Complications Status//If Yes	
Complications	Liver Complications//Specify	
Complications	Complications//Specify	
Recipient Information	Recipient's Last Name	Display Only - Cascades from Database
Recipient Information	Recipient's First Name	Display Only - Cascades from Database
Recipient Information	Recipient's SSN	Display Only - Cascades from Database
Recipient Information	Recipient's Name	Display Only - Cascades from Database
Recipient Information	Transplant Date	Display Only - Cascades from Database

OMB No. 0915-0157 Expiration Date: XX/XX/20XX

PUBLIC BURDEN STATEMENT:

The private, non-profit Organ Procurement and Transplantation Network (OPTN) collects this information in order to perform the following OPTN functions: to assess whether applicants meet OPTN Bylaw requirements for membership in the OPTN; and to monitor compliance of member organizations with OPTN Obligations. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0915-0157 and it is valid until XX/XX/202X. This information collection is required to obtain or retain a benefit per 42 CFR §121.11(b)(2). All data collected will be subject to Privacy Act protection (Privacy Act System of Records #09-15-0055). Data collected by the private non-profit OPTN also are well protected by a number of the Contractor's security features. The Contractor's security system meets or exceeds the requirements as prescribed by OMB Circular A-130, Appendix III, Security of Federal Automated Information Systems, and the Departments Automated Information Systems Security Program Handbook. The public reporting burden for this collection of information is estimated to average 0.7 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.