

number of the Contractor's sec
prescribed by OMB Circular A-11
Automated Information System:
estimated to average 0.7 hours
and completing and reviewing th
aspect of this collection of infor
5600 Fishers Lane, Room 14N13

TRF - Kidney - Pediatric
Fields to be completed by members

Field label	Notes
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
HIC	Display Only - Cascades from TCR
Previous Follow-up	Display Only - Cascades from prior TRF
DOB	Display Only - Cascades from TCR
Gender	Display Only - Cascades from TCR
Tx Date	Display Only - Cascades from Database
Previous Px Stat Date	Display Only - Cascades from prior TRF
Transplant Discharge Date	
State of Permanent Residence	
Zip Code	
Recipient Center	Display Only - Cascades from TCR
Recipient Center Type	Display Only - Cascades from TCR
Follow-up Center Code	Display Only - Cascades from Database
Follow-up Center Type	Display Only - Cascades from Database
Physician Name	
NPI#	
Follow-up Care Provided By	
Follow-up Care Provided By//Specify	
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	
Contributory Cause of Death	Not required
Contributory Cause of Death//Specify	Not required
Contributory Cause of Death	Not required
Contributory Cause of Death//Specify	Not required
Has the patient been hospitalized since the last patient status date	
Disease Recurrence	
Disease Recurrence	Display Only - Cascades from Database
Confirmed Biopsy from Previous Follow-up	Display Only - Cascades from Database
Functional Status	
Cognitive Development	
Motor Development	
Working for income	
Academic Progress	
Academic Activity Level	
Primary Insurance at Follow-up	
Primary Source of Payment, Specify	
Date of Measurement	
Height	

Height//Status	Value or status is reported, not both
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
HIV Serology	
HIV NAT	
HbsAg	
HBV DNA	
HBV Core Antibody	
HCV Serology	
HCV NAT	
New diabetes onset between last follow-up to the current follow-up	
If yes, insulin dependent	
Graft Status	
Date of Graft Failure:	
Primary Cause of Graft Failure:	
Primary Cause of Graft Failure//Other, Specify:	
Dialysis Since Last Follow-up	
Date Maintenance Dialysis Resumed	
Did patient have any acute rejection episodes during the follow-up period	
Is growth hormone therapy used during this follow-up period	
Post Transplant Malignancy	
Donor Related	
Recurrence of Pre-Tx Tumor	
Post Tx De Novo Solid Tumor	
De Novo Lymphoproliferative disease and Lymphoma	
Fracture in the past year (or since last follow-up)	
Specify Location and number of fractures	
Spine-compression fracture	
Specify Location and number of fractures	
Extremity	
Specify Location and number of fractures	
Other	
AVN (avascular necrosis)	
Were any medications given during the follow-up period for maintenance	
Previous Validated Maintenance Follow-up Medications	Display Only - Cascades from Database
Immunosuppression medication	
Immunosuppression medication indication	

4/20XX

Measurement and Transplantation Network (OPTN) collects this information in order to perform assessment and whether applicants meet OPTN Bylaw requirements for membership in the OPTN; member organizations with OPTN Obligations. An agency may not conduct or sponsor, and a recipient may not disseminate, this information unless it displays a currently valid OMB control number. The information collection is 0915-0157 and it is valid until XX/XX/202X. This information collection benefits you by ensuring that you are receiving the best possible care (42 CFR § 121.11(b)(2)). All data collected will be subject to Privacy Act protection (42 CFR § 121.11(b)(2)). Data collected by the private non-profit OPTN also are well protected by a

urity features. The Contractor's security system meets or exceeds the requirements as 30, Appendix III, Security of Federal Automated Information Systems, and the Departments s Security Program Handbook. The public reporting burden for this collection of information is per response, including the time for reviewing instructions, searching existing data sources, he collection of information. Send comments regarding this burden estimate or any other mation, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 6B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.