

Post Transplant	Did patient have any acute kidney rejection episodes between transplant and discharge		Transplant Procedure
Post Transplant	Most Recent Serum Creatinine Prior to Discharge		Transplant Procedure
Post Transplant	Most Recent Serum Creatinine Prior to Discharge//Status	Value or status is reported, not both	Transplant Procedure
Post Transplant	Patient Need Dialysis within First Week		Transplant Procedure
Post Transplant	Pancreas Graft Status		Transplant Procedure
Post Transplant	Patient using any method of blood sugar control?		Post Transplant
Post Transplant	Patient on insulin?	New field if pancreas graft status is functioning. Modified label if graft status is failed	Post Transplant
Post Transplant	Date insulin resumed	New field if pancreas graft status is functioning. Modified label if graft status is failed	Post Transplant
Post Transplant	Total insulin dosage units		Post Transplant
Post Transplant	Total insulin dosage units//ST	Value or status is reported, not both	Post Transplant
Post Transplant	Insulin duration of use		Post Transplant
Post Transplant	Insulin duration of use//ST	Value or status is reported, not both	Post Transplant
Post Transplant	Patient on oral medication to control blood sugar	New field if pancreas graft status is functioning. Modified label if graft status is failed	Post Transplant
Post Transplant	Date oral medications resumed	New field if pancreas graft status is functioning. Modified label if graft status is failed	Post Transplant
Post Transplant	Patient using diet to control blood sugar	New field if pancreas graft status is functioning. Modified label if graft status is failed	Post Transplant
Post Transplant	Pancreas Date of Graft Failure		Post Transplant
Post Transplant	C-Peptide Value		Post Transplant
Post Transplant	C-Peptide Value://ST=	Value or status is reported, not both	Post Transplant
Post Transplant	Hba1c (%)		Post Transplant
Post Transplant	Hba1c (%)//Status	Value or status is reported, not both	Post Transplant
Post Transplant	Pancreas Primary Cause of Graft Failure		Post Transplant
Post Transplant	Pancreas Primary Cause of Graft Failure/Specify		Post Transplant
Post Transplant	Pancreas Graft/Vascular Thrombosis		Post Transplant
Post Transplant	Pancreas Infection		Post Transplant
Post Transplant	Bleeding		Post Transplant
Post Transplant	Anastomotic Leak		Post Transplant
Post Transplant	Hyperacute Rejection		Post Transplant
Post Transplant	Pancreas Acute Rejection		Post Transplant
Post Transplant	Biopsy Proven Isletitis		Post Transplant
Post Transplant	Pancreatitis		Post Transplant
Post Transplant	Other, Specify		Post Transplant
Post Transplant	Did patient have any acute pancreas rejection episodes between transplant and discharge		Post Transplant
Post Transplant	Pancreatitis		Post Transplant
Post Transplant	Anastomotic Leak		Post Transplant
Post Transplant	Abscess or Local Infection		Post Transplant
Post Transplant	Other	Not required	Post Transplant
Post Transplant	Weight Post Transplant		Post Transplant
Post Transplant	Weight in Kilograms//Status	Value or status is reported, not both	Post Transplant

Immunosuppression Other	Are any medications given currently for maintenance or anti-rejection	
Immunosuppression Other	Immunosuppression medication	
Immunosuppression Other	Immunosuppression medication indication	
Immunosuppression Other	Days of induction	

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.

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

Field Label	Notes
Organ	Display Only - Cascades from TCR
Recipient First Name	Display Only - Cascades from TCR
Recipient Middle Initial	Not required
Recipient Last Name	Display Only - Cascades from TCR
SSN	Display Only - Cascades from TCR
HIC	Display Only - Cascades from TCR
DOB	Display Only - Cascades from TCR
Gender	Display Only - Cascades from TCR
Tx Date	Display Only - Cascades from feedback
State of Permanent Residence	
Permanent Zip	
Recipient Center Code	Display Only - Cascades from TCR
Recipient Center Type	Display Only - Cascades from TCR
Surgeon Name	
NPI#	
UNOS Donor ID #	Display Only - Cascades from feedback
Donor Type	Display Only - Cascades from feedback
OPO	Display Only - Cascades from feedback
Kidney Primary Diagnosis	
Kidney Primary Diagnosis//Specify	
Pancreas Primary Diagnosis	
Pancreas Primary Diagnosis//Specify	
Date: Last Seen, Retransplanted or Death	
Patient Status	
Primary Cause of Death	
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
Retransplanted organ	
Date of Admission to Tx Center	
Date of Discharge from Tx Center	
Functional Status	
Cognitive Development	
Motor Development	
Academic Progress	
Academic Activity Level	
Primary	
Kidney Foreign Government//Specify	
Primary	
Pancreas Foreign Government//Specify	
Date of Measurement	
Height	
Height in Centimeters//Status	Value or status is reported, not both
Height Percentile//Growth Percentiles//%ile	Calculated for display only
Weight	
Weight in Kilograms//Status	Value or status is reported, not both
Weight Percentile//Growth Percentiles//%ile	Calculated for display only
BMI	Display Only - Cascades from Database
BMI://%ile	Calculated for display only
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
Pretransplant Dialysis	
If Dialyzed, Date of Most Recent Initiation of Chronic Maintenance Dialysis	
Date First Dialyzed//Status	Value or status is reported, not both
Average Daily Insulin Units	
Average Daily Insulin Units//Status	Value or status is reported, not both

Serum Creatinine at Time of Tx	
Serum Creatinine at Time of Tx//Status	Value or status is reported, not both
HIV Serostatus	
NAT HIV	
CMV Status	
HBV Core Antibody	
HBV Surface Antibody Total	
HBV Core Antibody	
HBV Surface Antigen	
NAT HBV	
HCV Serostatus	
NAT HCV	
EBV Serostatus	
Did the recipient receive Hepatitis B vaccines prior to transplant?	
Malignancies between listing and transplant//Specify	
Malignancies between listing and transplant	
If yes, specify type	
Fracture in the past year (or since last follow-up)	
Spine-compression fracture	
Spine-compression fracture//# of fractures	
Extremity	
Extremity//# of fractures	
Other	
Other//# of fractures	
AVN (avascular necrosis)	
Multiple Organ Recipient	Display Only - Cascades from feedback
Were extra vessels used in the transplant procedure	Display Only - Cascades from feedback
Procedure Type	Display Only - Cascades from feedback
Operative Technique	
Duct Management	
Duct Management//Specify	
Venous Vascular Management	
Arterial Reconstruction	
Arterial Reconstruction//Specify	
Venous Extension Graft	
Total Cold ischemia Time Right KI(OR EN-BLOC): (if pumped, include pump time)	
Total Cold Ischemia Time Right KI//Status	Value or status is reported, not both
Total Cold Ischemia Time Left KI (If pumped, include pump time)	
Total Cold Ischemia Time Left KI//Status	Value or status is reported, not both
Total Pancreas Preservation Time (include Cold, Warm, Anastomotic time)	
Total Pancreas Preservation Time (include Cold, Warm, Anastomotic time)//Status	Value or status is reported, not both
Kidney(s) received on	
Received on ice	
Received on pump	
Left Kidney Final resistance at transplant	
Left Kidney Final resistance at tx//Status	Value or status is reported, not both
Right Kidney Final resistance at transplant	

Right Kidney Final resistance at tx//Status	Value or status is reported, not both
Left Kidney Final flow rate at transplant	
Left Kidney Final flow rate at tx//Status	Value or status is reported, not both
Right Kidney Final flow rate at transplant	
Right Kidney Final flow rate at tx//Status	Value or status is reported, not both
Graft Status	
Resumed Maintenance Dialysis	
Date Maintenance Dialysis Resumed	
Date of Graft Failure:	
Primary Cause of Graft Failure:	
Primary Cause of Graft Failure//Other, Specify:	
Did patient have any acute kidney rejection episodes between transplant and discharge	
Is growth hormone therapy used between listing and transplant	
Most Recent Serum Creatinine Prior to Discharge	
Most Recent Serum Creatinine Prior to Discharge//Status	Value or status is reported, not both
Patient Need Dialysis within First Week	
Pancreas Graft Status	
Patient using any method of blood sugar control?	
Patient on insulin?	New field if pancreas graft status is functioning. Modified label if graft status is failed
Date insulin resumed	New field if pancreas graft status is functioning. Modified label if graft status is failed
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
Patient on oral medication to control blood sugar	New field if pancreas graft status is functioning. Modified label if graft status is failed
Date oral medications resumed	New field if pancreas graft status is functioning. Modified label if graft status is failed
Patient using diet to control blood sugar	New field if pancreas graft status is functioning. Modified label if graft status is failed
Pancreas Date of Graft Failure	
C-Peptide Value	
C-Peptide Value//ST=	Value or status is reported, not both
Hba1c (%)	
Hba1c (%)//Status	Value or status is reported, not both
Pancreas Primary Cause of Graft Failure	
Pancreas Primary Cause of Graft Failure/Specify	
Pancreas Graft/Vascular Thrombosis	
Pancreas Infection	
Bleeding	
Anastomotic Leak	

Hyperacute Rejection	
Pancreas Acute Rejection	
Biopsy Proven Isletitis	
Pancreatitis	
Other, Specify	
Did patient have any acute pancreas rejection episodes between transplant and discharge	
Pancreatitis	
Anastomotic Leak	
Abscess or Local Infection	
Other	Not required
Weight Post Transplant	
Weight in Kilograms//Status	Value or status is reported, not both
Are any medications given currently for maintenance or anti-rejection	
Immunosuppression medication	
Immunosuppression medication indication	
Days of induction	

4/20XX

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