**VCA Transplant Candidate Registration (TCR) Record Field Descriptions**

The Transplant Candidate Registration (TCR) record is generated when a candidate for transplant is registered on the VCA Candidate Registration Worksheet.

**Provider Information**

**Candidate** **center**: The recipient center information reported on the Candidate Registration Worksheet will be displayed.

**Candidate Information**

**Organ registered:** Verify the organ(s) displayed is/are the correct organ(s) listed for this candidate. If the candidate is listed for more than one type of transplant, all organs the candidate is registered for will be displayed.

**Upper Limb, Left**

**Upper Limb, Right**

**Lower Limb, Left**

**Lower Limb, Right**

**Craniofacial**

**Abdominal Wall**

**Other, Specify**

**Listing date:** The date the candidate was registered for a transplant will be displayed.

**Name:** Verify the last name, first name, and middle initial of the transplant candidate is correct.

**SSN**: Verify the candidate's social security number is correct.

**DOB:** Verify the displayed date is the candidate's date of birth.

**Gender**: Verify the candidate's gender is correct.

**Ethnicity/Race:** Select all origins that indicate the candidate's ethnicity/race.

**American Indian or Alaska Native**: Select for candidates who are of North, South, or Central American descent (e.g. American Indian, Eskimo, Aleutian, Alaska Indian).

**Asian**: Select for candidates who are of Asian descent (e.g. Asian Indian/Indian Sub-Continent, Chinese, Filipino, Japanese, Korean, Vietnamese).

**Black or African American**: Select for candidates of African descent (e.g. African American, African (Continental), West Indian, Haitian).

**Hispanic/Latino**: Select for candidates who are of Central or South American descent (e.g. Mexican, Puerto Rican (Mainland), Puerto Rican (Island), Cuban).

**Native Hawaiian or Other Pacific Islander**: Select for candidates who are descendants of the Native Hawaiian, Guamanian or Chamorro, or Samoan peoples.

**White**: Select for candidates who are of European Descent, Arab or Middle Eastern or North African (non-Black).

**Clinical Information at Registration**

**Height at registration:** Enter the height of the candidate at the time of registration, in inches.

***Note:*** If applicable, enter the height of the candidate without prosthetics.

**Weight at registration:** Enter the weight of the candidate at the time of registration, in pounds.

***Note:*** If applicable, enter the weight of the candidate without prosthetics.

**ABO:** The candidate's blood type will be displayed (**A, A1, A1B, A2, A2B, AB, B, O).** Verify the candidate’s blood type is correct.