TRR - VCA - Adult/Pediatric Fields to be completed by memt

| Form Section | Field Label |
|--|--|
| Recipient Information | Recipient First Name |
| Recipient Information | Recipient Last Name |
| Recipient Information Recipient Information | Recipient Middle Initial DOB |
| Recipient Information | SSN |
| Recipient Information | Gender |
| Recipient Information | HIC |
| Recipient Information | Transplant Date |
| Recipient Information | State of Permanent Residence |
| Recipient Information | Permanent Zip Code |
| Provider Information | Recipient Center |
| Provider Information | Lead Reconstructive Surgeon Name |
| Provider Information | Lead Reconstructive Surgeon NPI# |
| Donor Information | UNOS Donor ID # |
| Donor Information | Donor Type |
| Donor Information | OPO |
| Patient Status - Transplant hospitalization | Date of Admission to Transplant Center |
| Patient Status - Transplant | Data of Discharge from Hespital |
| hospitalization Patient Status | Date of Discharge from Hospital Date Last Seen, Retransplanted, or Death |
| Patient Status Patient Status | Patient Status |
| Patient Status | Primary Cause of Death |
| Patient Status | Primary Cause of Death - Other Specify |
| Socio-Demographic Information: | 2.5 2222 22 22 22 22 22 22 22 22 22 22 22 |
| Pre-Transplant Socio-Demographic Information: | Highest Education Level |
| Pre-Transplant | Working for income |
| Socio-Demographic Information: Pre-Transplant | Working for income - If Yes, indicate the recipient's working status |
| Socio-Demographic Information: Pre-Transplant | Working for income - If No, Not Working Due To |
| Socio-Demographic Information: Pre-Transplant - Source of Payment | Grant Funding |
| Socio-Demographic Information: Pre-Transplant - Source of Payment | Institutional Funding |
| Socio-Demographic Information: Pre-Transplant - Source of Payment | Primary Source of Payment |
| Socio-Demographic Information: Pre-Transplant - Source of Payment | Primary Source of Payment - Foreign Government, Specify |
| Socio-Demographic Information: Pre-Transplant - Source of Payment Clinical Information: Pre-transplant | Secondary Source of Payment Height (inches) |
| Clinical Information: Pre-transplant | Weight (lbs.) |
| Clinical Information: Pre-transplant | BMI (Body Mass Index) |
| Clinical Information: Pre-transplant | Primary Diagnosis for Transplant |
| Clinical Information: Pre-transplant Clinical Information: Pre-transplant - Amount of Tissue Loss | Primary Diagnosis for Transplant - Other Specify Craniofacial |
| Clinical Information: Pre-transplant - | |
| Amount of Tissue Loss | structures missing |
| Clinical Information: Pre-transplant - Amount of Tissue Loss | Craniofacial - Other Specify |
| Clinical Information: Pre-transplant - Amount of Tissue Loss | Abdominal Wall (cm2) |
| Clinical Information: Pre-transplant - Amount of Tissue Loss | Other VCA Organ Type - Other Specify |
| Clinical Information: Pre-transplant - Level of Amputation | Upper Limb, Left |
| Clinical Information: Pre-transplant - Level of Amputation | Upper Limb, Left - Other Specify |
| Clinical Information: Pre-transplant - Level of Amputation | Upper Limb, Right |
| Clinical Information: Pre-transplant - Level of Amputation | Upper Limb, Right - Other Specify |
| | |

| Clinical Information: Pre-transplant - Level of Amputation | Lower Limb, Left - Other Specify |
|--|--|
| Clinical Information: Pre-transplant - Level of Amputation | Lower Limb, Right |
| Clinical Information: Pre-transplant - Level of Amputation | Lower Limb, Right - Other Specify |
| Clinical Information: Pre-transplant | Previous Transplants (VCA or non-VCA organs) |
| Clinical Information: Pre-transplant | Previous skin graft(s) |
| Clinical Information: Pre-transplant | Was patient hospitalized during the last 90 days prior to the transplant admission |
| Clinical Information: Pre-transplant | Medical condition at time of transplant |
| Clinical Information: Pre-transplant | Patient on Life Support |
| Clinical Information: Pre-transplant | Patient on Life Support - Ventilator |
| Clinical Information: Pre-transplant | Patient on Life Support - Other Mechanism |
| Clinical Information: Pre-transplant | Patient on Life Support - Other Mechanism - Other Specify |
| Clinical Information: Pre-transplant - Viral Detection | HIV Serostatus |
| Clinical Information: Pre-transplant - Viral Detection | CMV Status |
| Clinical Information: Pre-transplant - | |
| Viral Detection Clinical Information: Pre-transplant - | HBV Core Antibody |
| Viral Detection Clinical Information: Pre-transplant - | HBV Surface Antigen |
| Viral Detection Clinical Information: Pre-transplant - | HCV Serostatus |
| Viral Detection | EBV Serostatus |
| <u>Clinical Information: Pre-transplant - Viral Detection</u> | Did the recipient receive Hepatitis B vaccines prior to transplant? |
| Clinical Information: Pre-transplant | Any tolerance induction technique used |
| Clinical Information: Pre-transplant | Pre-transplant blood transfusions |
| Clinian Information Duratural | Number of pre-transplant pregnancies (which may |
| Clinical Information: Pre-transplant Clinical Information: Pre-transplant | or may not have resulted in a live birth) |
| Cililical Information: Pre-transplant | Malignancies prior to transplant |
| Clinical Information: Pre-transplant | Malignancies prior to transplant - If Yes, Specify Type (select all that apply) |
| Clinical Information: Pre-transplant - Pre-Transplant Labs | Serum Creatinine (mg/dL) |
| Clinical Information: Pre-transplant - Pre-Transplant Labs | Hemoglobin A1c (%) |
| Clinical Information: Pre-transplant - Pre-Transplant Labs | Calculated PRA (CPRA) at transplant (%) |
| Clinical Information: Pre-transplant - Pre-Transplant Labs | Donor Crossmatch Result |
| Clinical Information: Pre-transplant - Risk Factors | Coagulopathies |
| Clinical Information: Pre-transplant - Risk Factors | Other Risk Factors |
| Clinical Information: Pre-transplant - Risk Factors | Other Risk Factors - Other Specify |
| Functional Status: Pre-transplant | Cognitive Development |
| Functional Status: Pre-transplant | Motor Development |
| Functional Status: Pre-transplant - SF-36 score - Physical Health | Physical Functioning (PF) score |
| Functional Status: Pre-transplant - SF-36 score - Physical Health | Role-Physical (RP) score |
| Functional Status: Pre-transplant - SF-36 score - Physical Health | Bodily Pain (BP) score |
| Functional Status: Pre-transplant - SF-36 score - Physical Health | General Health (GH) score |
| Functional Status: Pre-transplant - SF-36 score - Mental Health | Vitality (VT) score |
| Functional Status: Pre-transplant - | |
| SF-36 score - Mental Health | Social Functioning (SF) score |
| SF-36 score - Mental Health Functional Status: Pre-transplant - SF-36 score - Mental Health | Social Functioning (SF) score Role-Emotional (RE) score |
| 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 - | Role-Emotional (RE) score |

| Functional Status: Pre-transplant - | |
|--|---|
| Upper Limb - Pre-Transplant Clinical Information: Transplant | Carroll Test Score - Right |
| Procedure Procedure | Multiple Graft Recipient |
| Clinical Information: Transplant Procedure | Were extra allograft vessels/nerve/tissue from outside the donated graft used in the transplant procedure |
| Clinical Information: Transplant Procedure | Surgical Procedure |
| | |
| Clinical Information: Transplant Procedure - Preservation Information | Warm Ischemia Time (include anastomotic time) |
| Clinical Information: Transplant Procedure - Preservation Information | Cold Ischemia Time |
| Clinical Information: Post Transplant | Graft Status |
| Clinical Information: Post Transplant | Date of Graft Failure |
| Clinical Information: Post Transplant - Causes of Graft Failure | Thrombosis |
| Clinical Information: Post Transplant - Causes of Graft Failure | Acute Rejection |
| Clinical Information: Post Transplant - Causes of Graft Failure | Acute Rejection - Banff score |
| Clinical Information: Post Transplant - Causes of Graft Failure | Acute Rejection - Visual skin changes |
| Clinical Information: Post Transplant - Causes of Graft Failure | Chronic Rejection |
| Clinical Information: Post Transplant - Causes of Graft Failure | Chronic Rejection - Visual skin changes |
| Clinical Information: Post Transplant - Causes of Graft Failure | Ischemia |
| Clinical Information: Post Transplant - Causes of Graft Failure | Sepsis / Infection |
| Clinical Information: Post Transplant - Causes of Graft Failure | Trauma |
| Clinical Information: Post Transplant - Causes of Graft Failure | Patient requested removal |
| Clinical Information: Post Transplant - Causes of Graft Failure | Non-compliance: immunosuppression |
| Clinical Information: Post Transplant - Causes of Graft Failure | Non-compliance: rehabilitation |
| Clinical Information: Post Transplant - Causes of Graft Failure | Non-compliance: level of activity |
| Clinical Information: Post Transplant - Causes of Graft Failure | Other |
| Clinical Information: Post Transplant - Causes of Graft Failure | Other - Other Specify |
| Clinical Information: Post Transplant - Discharge Lab Data | Serum Creatinine (mg/dL) |
| Clinical Information: Post Transplant - Discharge Lab Data | Hemoglobin A1c (%) |
| - | U () |
| Clinical Information: Post Transplant - Major Transplant Complication | Arterial Thrombosis |
| Clinical Information: Post Transplant - Major Transplant Complication | Venous Thrombosis |
| Clinical Information: Post Transplant - Major Transplant Complication | More than 5 pRBC (packed red blood cells) units |
| Clinical Information: Post Transplant - Major Transplant Complication | Cardiac arrest |
| Clinical Information: Post Transplant - Major Transplant Complication | DIC (Disseminated intravascular coagulation) |
| Clinical Information: Post Transplant - Major Transplant Complication | Graft/reperfusion syndrome |

| Other Major Transplant Complications | |
|---|--|
| t 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 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 | |
| Anti-rejection indication | |
| | |

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

PUBLIC BURDEN STATEMENT:

The private, non-profit Organ Procurement and Transplantation Network (OPTN) collects this in assess whether applicants meet OPTN Bylaw requirements for membership in the OPTN; and to Obligations. An agency may not conduct or sponsor, and a person is not required to respond to, OMB control number. The OMB control number for this information collection is 0915-0157 and required to obtain or retain a benefit per 42 CFR §121.11(b)(2). All data collected will be subject 15-0055). Data collected by the private non-profit OPTN also are well protected by a number of system meets or exceeds the requirements as prescribed by OMB Circular A-130, Appendix III, S Departments Automated Information Systems Security Program Handbook. The public reporting average 0.7 hours per response, including the time for reviewing instructions, searching existing information. Send comments regarding this burden estimate or any other aspect of this collection burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryl

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formation in order to perform the following OPTN functions: to monitor compliance of member organizations with OPTN a collection of information unless it displays a currently valid it is valid until XX/XX/202X. This information collection is to Privacy Act protection (Privacy Act System of Records #09-the Contractor's security features. The Contractor's security is recurity of Federal Automated Information Systems, and the g burden for this collection of information is estimated to the data sources, and completing and reviewing the collection of on of information, including suggestions for reducing this and, 20857 or paperwork@hrsa.gov.