TRR - Lung - Adult Fields to be completed by members

Form Section	Field Label	Notes
Recipient Information	Organ	Display Only - Cascades from TCR
Recipient Information	Recipient First Name	Display Only - Cascades from TCR
Recipient Information	Recipient Last Name	Display Only - Cascades from TCR
Recipient Information	Recipient Middle Initial	Not required
Recipient Information	SSN	Display Only - Cascades from TCR
Recipient Information	HIC	Display Only - Cascades from TCR
Recipient Information	DOB	Display Only - Cascades from TCR
Recipient Information	Gender	Display Only - Cascades from TCR
Recipient Information	Transplant Date	Display Only - Cascades from Database
Recipient Information	Transplant Time	Display Only - Cascades from Database Display Only - Cascades from Database
Recipient Information	Transplant Time Zone	Display Only - Cascades from Database Display Only - Cascades from Database
Recipient Information	State of Permanent Residence	Display Only - Cascades Ironi Database
	Permanent Zip	
Recipient Information Provider Information	•	Disales Only Consider from TCD
	Recipient Center Code	Display Only - Cascades from TCR
Provider Information	Recipient Center Type	Display Only - Cascades from TCR
Provider Information	Physician Name	
Provider Information	Physician NPI#	
Provider Information	Surgeon Name	
Provider Information	Surgeon NPI#	
Donor Information	UNOS Donor ID #	Display Only - Cascades from TCR
Donor Information	Donor Type	Display Only - Cascades from feedback
Donor Information	OPO	Display Only - Cascades from feedback
Patient Status	Primary Diagnosis	
Patient Status	Primary Diagnosis//Specify	
Patient Status	Date: Last Seen, Retransplanted or Death	
Patient Status	Patient Status	
Patient Status	Primary Cause of Death	
Patient Status	Cause of Death//Specify	
Patient Status	Contributory Cause of Death	Not required
Patient Status	Contributory Cause of Death//Specify	Not required
Patient Status	Contributory Cause of Death	Not required
Patient Status	Contributory Cause of Death//Specify	Not required
Patient Status	Date of Admission to Tx Center	
Patient Status	Date of Discharge from Tx Center	
Pretransplant	Medical Condition at time of transplant	
Pretransplant	Patient on Life Support	
Pretransplant	Extra Corporeal Membrane Oxygenation	
Pretransplant	Intra Aortic Balloon Pump	
Pretransplant	Other Mechanism	
Pretransplant	Other Mechanism, Specify	
Pretransplant	Prostacyclin Infusion	
Pretransplant	Prostacyclin Inhalation	
Pretransplant	Functional Status	
Pretransplant	Working for income	
Pretransplant	Primary Source of Payment	
Pretransplant	Primary Source of Payment, Specify	
Pretransplant	Height	
Pretransplant	Height in Centimeters//Status	Value or status is reported, not both
Pretransplant	Height Percentile//Growth Percentiles//%ile	Calculated for display only
Pretransplant	Weight	

Form Section	Field Label
Recipient Information	Organ
Recipient Information	Recipient First Name
Recipient Information	Recipient Last Name
Recipient Information	Recipient Middle Initial
Recipient Information	SSN
Recipient Information	HIC
Recipient Information	DOB
Recipient Information	Gender
Recipient Information	Transplant Date
Recipient Information	Transplant Time
Recipient Information	Transplant Time Zone
Recipient Information	State of Permanent Residence
Recipient Information	Permanent Zip
Provider Information	Recipient Center Code
Provider Information	Recipient Center Type
Provider Information	Physician Name
Provider Information	Physician NPI#
Provider Information	Surgeon Name
Provider Information	Surgeon NPI#
Donor Information	UNOS Donor ID #
Donor Information	Donor Type
Donor Information	OPO
Patient Status	Primary Diagnosis
Patient Status	Primary Diagnosis//Specify
Patient Status	Date: Last Seen, Retransplanted or Death
Patient Status	Patient Status
Patient Status	Primary Cause of Death
Patient Status	Cause of Death//Specify
Patient Status	Contributory Cause of Death
Patient Status	Contributory Cause of Death//Specify
Patient Status	Contributory Cause of Death
Patient Status	Contributory Cause of Death//Specify
Patient Status	Date of Admission to Tx Center
Patient Status	Date of Discharge from Tx Center
Pretransplant	Medical Condition at time of transplant
Pretransplant	Patient on Life Support
Pretransplant	Extra Corporeal Membrane Oxygenation
Pretransplant	Prostaglandins
Pretransplant	Intravenous Inotropes
Pretransplant	Ventilator
Pretransplant	Inhaled NO
Pretransplant	Other Mechanism
Pretransplant	Other Mechanism, Specify
Pretransplant	Prostacyclin Infusion
Pretransplant	Prostacyclin Inhalation
Pretransplant	Life Support: VAD Brand1
Pretransplant	Life Support: VAD Brand1//Specify
Pretransplant	Life Support: VAD Brand2
Pretransplant	Life Support: VAD Brand2//Specify
Pretransplant	Functional Status

Pretransplant	Weight in Kilograms//Status	Value or status is reported, not both
Pretransplant	Weight Percentile//Growth Percentiles//%ile	Calculated for display only
Pretransplant	BMI	Display Only - Cascades from Database
Pretransplant	BMI://%ile	Calculated for display only
Pretransplant	Previous Transplant Organ	Display Only - Cascades from Database
Pretransplant	Previous Transplant Date	Display Only - Cascades from Database
Pretransplant	Previous Transplant Graft Fail Date	Display Only - Cascades from Database
Pretransplant	HIV Serostatus	
Pretransplant	NAT HIV	
Pretransplant	CMV Status	
Pretransplant	HBV Core Antibody	
Pretransplant	HBV Surface Antibody Total	
Pretransplant	HBV Surface Antigen	
Dratrananlant	NAT HBV	
Pretransplant Pretransplant	HCV Serostatus	
Pretransplant	NAT HCV	
Pretransplant	EBV Serostatus	
Pretransplant	Did the recipient receive Hepatitis B vaccines prior to transplant?	
Pretransplant	PA (sys)mm/Hg	
Pretransplant	PA (sys)mm/Hg//Status	Value or status is reported, not both
Pretransplant	PA(sys)mm/Hg Inotropes/VASODilators	
Pretransplant	PA(dia) mm/Hg	
Pretransplant	PA(dia) mm/HG//Status	Value or status is reported, not both
Pretransplant	PA (dia) mm/Hg Inotropes/Vasodilators	
Pretransplant	PA(mean) mm/Hg	
Pretransplant	PA(mean) mm/Hg//Status	Value or status is reported, not both
Pretransplant	PA (mean) mm/Hg Inotropes/Vasodilators	
Pretransplant	PCW(mean) mm/Hg	
Pretransplant	PCW(mean) mm/Hg//Status	Value or status is reported, not both
Pretransplant	PCW (mean) mm/Hg Inotropes/Vasodilators	
Pretransplant	CO L/min	
Pretransplant	CO L/min//Status	Value or status is reported, not both
Pretranspiant		Value or status is reported, not both
Pretransplant	CO L/min Inotropes/Vasodilators CO L/min Inotropes/Vasodilators	
Pretransplant	Most Recent Serum Creatinine	
Pretransplant	Most Recent Serum Creatinine Most Recent Serum Creatinine//Status	Value or status is reported, not both
		value of status is reported, not both
Pretransplant	Most Recent Total Bilirubin Most Recent Total Bilirubin//Status	Value or status is reported, not both
Pretransplant		value or status is reported, not both
Pretransplant	Chronic Steroid Use FVC	
Pretransplant		V-1
Pretransplant	FVC % predicted//Status	Value or status is reported, not both
Pretransplant	FeV1	
Pretransplant	FeV1 % predicted//Status	Value or status is reported, not both
Pretransplant	pCO2	
Pretransplant	pCO2 mm/Hg//Status	Value or status is reported, not both
		•
Pretransplant	Transfusions	
	Infection Requiring IV Therapy within 2 wks	
Pretransplant	prior to Tx	

Pretransplant	Academic Progress	
Pretransplant	Academic Activity Level	
Pretransplant	Primary Source of Payment	
Pretransplant	Primary Source of Payment, Specify	
Pretransplant	Cognitive Development	
Pretransplant	Motor Development	
Pretransplant	Height Measurement Date	
Pretransplant	Height	
Pretransplant	Height in Centimeters//Status	
rietianspiant	Height in Centimeters//Status	
D.,,	II-: -h+ D+il-//C+h- D+il//0/:l-	
Pretransplant	Height Percentile//Growth Percentiles//%ile	
Pretransplant	Weight Measurement Date	
Pretransplant	Weight	
Pretransplant	Weight in Kilograms//Status	
D	Middle Calle de Calloca	
Pretransplant	Weight Percentile//Growth Percentiles//%ile	
Pretransplant	BMI	
Pretransplant	BMI://%ile	
Pretransplant	Previous Transplant Organ	
Pretransplant	Previous Transplant Date	
Pretransplant	Previous Transplant Graft Fail Date	
Pretransplant	HIV Serostatus	
Pretransplant	NAT HIV	
Pretransplant	CMV Status	
Pretransplant		
Pretransplant	HBV Core Antibody	
	HBV Surface Antibody Total	
Pretransplant	HBV Surface Antigen	
Pretransplant	NAT HBV	
Pretransplant	HCV Serostatus	
Pretransplant	NAT HCV	
Pretransplant	EBV Serostatus	
Pretransplant	Did the recipient receive Hepatitis B vaccines prior to transplant?	
Pretransplant	PA (sys)mm/Hg	
Pretransplant	PA (sys)mm/Hg//Status	
	(6) 6)	
Pretransplant	PA(sys)mm/Hg Inotropes/VASODilators	
Pretransplant	PA(dia) mm/Hg	
Pretransplant	PA(dia) mm/HG//Status	
Pretransplant	PA (dia) mm/Hg Inotropes/Vasodilators	
Pretransplant	PA(mean) mm/Hg	
Pretransplant	PA(mean) mm/Hg//Status	
Pretransplant	PA (mean) mm/Hg Inotropes/Vasodilators	
Pretransplant	PCW(mean) mm/Hg	
•	PCW(mean) mm/Hg//Status	
Pretransplant	PC w (mean) mm/Hg//Status	
Pretransplant	PCW (mean) mm/Hg Inotropes/Vasodilators	
Pretransplant	CO L/min	
Pretransplant	CO L/min//Status	
-F -	CO L/min Inotropes/Vasodilators CO L/min	
Pretransplant	Inotropes/Vasodilators	
Pretransplant	Most Recent Serum Creatinine	

	la	
Pretransplant	Dialysis	
Pretransplant	Prior Cardiac Surgery (non-transplant)	
Pretransplant	If yes, check all that apply	
Pretransplant	Prior Cardiac Surgery//Specify	
Pretransplant	Prior Lung Surgery (non-transplant)	
Pretransplant	If yes, check all that apply	
Pretransplant	Prior Lung Surgery//Specify	
Pretransplant	Episode of Ventilatory Support	
Pretransplant	If yes, indicate most recent timeframe	
Pretransplant	Tracheostomy	
Transplant Procedure	Multiple Organ Recipient	Display Only - Cascades from feedback
	Were extra vessels used in the transplant	
Transplant Procedure	procedure	Display Only - Cascades from feedback
Transplant Procedure	Procedure Type	Display Only - Cascades from feedback
Transplant Procedure	Total organ preservation time from cross clamp to in-situ reperfusion (include warm and cold time): Left Lung	
Transplant Procedure	Total organ preservation time from cross clamp to in-situ reperfusion (include warm and cold time): Left Lung//Status	Value or status is reported, not both
Transplant Procedure	Total organ preservation time from cross clamp to in-situ reperfusion (include warm and cold time): Right lung	
Transplant Procedure	Total organ preservation time from cross clamp to in-situ reperfusion (include warm and cold time): Right Lung//Status	Value or status is reported, not both
Transplant Procedure	Lung(s) perfused prior to transplant?	
Transplant Procedure	Perfusion occurred at:	
Transplant Procedure	Perfusion performed by:	
Transplant Procedure	Total time on perfusion	Value or status is reported, not both
Transplant Procedure	Lung(s) received at transplant center	
Transplant Procedure	On ice	
Transplant Procedure	On pump	
	Right Lung/Enbloc: Stayed on pump Put on ice	
Transplant Procedure	Left Lung: Stayed on pump Put on ice	
Transplant Procedure	Organ Check-In Date	
Transplant Procedure	Check-In Time	
Transplant Procedure	Check-In Time Zone	Display Only - Calculated
Transplant Procedure	TransNet Organ Check-In Times for Related Organs	Display Only - Cascades from Database
Post Transplant	Graft Status	
Post Transplant	Date of Graft Failure	
Post Transplant	Primary Cause of Graft Failure	

Pretransplant	Most Recent Serum Creatinine//Status	
Pretransplant	Most Recent Total Bilirubin	
Pretransplant	Most Recent Total Bilirubin//Status	
Pretransplant	Chronic Steroid Use	
Pretransplant	FVC	
Pretransplant	FVC % predicted//Status	
Pretransplant	FeV1	
Pretransplant	FeV1 % predicted//Status	
Pretransplant	pCO2	
Pretransplant	pCO2 mm/Hg//Status	
Pretransplant	Transfusions	
Pretransplant	Infection Requiring IV Therapy within 2 wks prior to Tx	
Pretransplant	Dialysis	
Pretransplant	Episode of Ventilatory Support	
rietianspiant	Episode of Ventuatory Support	
Pretransplant	If yes, indicate most recent timeframe	
Pretransplant	Tracheostomy	
Pretransplant	Prior Thoracic Surgery other than prior transplant	
Pretransplant	If yes, number of prior sternotomies	
Pretransplant	If yes, number of prior thoracotomies	
Pretransplant	Prior congenital cardiac surgery	
Pretransplant	If yes, palliative surgery	
Pretransplant	If yes, corrective surgery	
Pretransplant	If yes, single ventricular physiology	
Pretransplant	Most Recent Anti-A Titer	
Pretransplant Pretransplant	Sample Date Most Recent Anti-B Titer	
Pretransplant	Sample Date	
Transplant Procedure	Multiple Organ Recipient	
Transplant Procedure	Were extra vessels used in the transplant procedure	
Transplant Procedure	Procedure Type	
Transplant Procedure	Total organ preservation time from cross clamp to in-situ reperfusion (include warm and cold time): Left Lung	
Transplant Procedure	Total organ preservation time from cross clamp to in-situ reperfusion (include warm and cold time): Left Lung//Status	

Post Transplant	Primary Cause of Graft Failure// Other Specify	
Post Transplant	Stroke	
Post Transplant	Dialysis	
Post Transplant	Ventilator Support	
Post Transplant	Reintubated	
Post Transplant	Permanent Pacemaker	
Post Transplant	Airway Dehiscence	
Post Transplant	Did patient have any acute rejection episodes between transplant and discharge	
Post Transplant	Intubated at 72 hours	
Post Transplant	PaO2 at 72 hours	
Post Transplant	PaO2 at 72 hours//Status	Value or status is reported, not both
Post Transplant	Fi02 at 72 hours	
Post Transplant	FiO2 at 72 hours//Status	Value or status is reported, not both
Post Transplant	ECMO a 72 hours	
Post Transplant	Inhaled NO at 72 hours	
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 0.27 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.

Transplant Procedure	Total organ preservation time from cross clamp to in-situ reperfusion (include warm and cold time): Right lung	
Transplant Procedure	Total organ preservation time from cross clamp to in-situ reperfusion (include warm and cold time): Right Lung//Status	
Transplant Procedure	Lung(s) perfused prior to transplant?	
Transplant Procedure	Perfusion occurred at:	
Transplant Procedure	Perfusion performed by:	
Transplant Procedure	Total time on perfusion	
Transplant Procedure	Lung(s) received at transplant center	
Transplant Procedure	On ice	
Transplant Procedure	On pump	
	Right Lung/Enbloc: Stayed on pump Put on ice Left Lung:	
	Stayed on pump	
Transplant Procedure	Put on ice	
Transplant Procedure	Organ Check-In Date	
Transplant Procedure	Check-In Time	
Transplant Procedure	Check-In Time Zone	
Transplant Procedure	TransNet Organ Check-In Times for Relate Organs	
Post Transplant	Graft Status	
Post Transplant	Date of Graft Failure	
Post Transplant	Primary Cause of Graft Failure	
Post Transplant	Primary Cause of Graft Failure//Other Specify	
Post Transplant	Stroke	
Post Transplant	Dialysis	
Post Transplant	Ventilator Support	
Post Transplant	Reintubated	
Post Transplant	Permanent Pacemaker	
Post Transplant	Airway Dehiscence	
•	Did patient have any acute rejection	
Post Transplant	episodes between transplant and discharge	
Post Transplant	Intubated at 72 hours	
Post Transplant Post Transplant	PaO2 at 72 hours PaO2 at 72 hours//Status	
Post Transplant Post Transplant	Fi02 at 72 hours	
Post Transplant	FiO2 at 72 hours//Status	
Post Transplant	ECMO a 72 hours	
Post Transplant	Inhaled NO at 72 hours	
Post Transplant	Most Recent Anti-A Titer	
Post Transplant	Most Recent Anti-A Titer//Sample Date	
Post Transplant	Most Recent Anti-B Titer	

Post Transplant	Most Recent Anti-B Titer//Sample Date
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) coller following OPTN functions: to assess whether applicants meet OPTN Bylaw requiremeny monitor compliance of member organizations with OPTN Obligations. An agency may required to respond to, a collection of information unless it displays a currently valid O number for this information collection is 0915-0157 and it is valid until XX/XX/202X. The or retain a benefit per 42 CFR §121.11(b)(2). All data collected will be subject to Privac Records #09-15-0055). Data collected by the private non-profit OPTN also are well projecurity features. The Contractor's security system meets or exceeds the requirements Appendix III, Security of Federal Automated Information Systems, and the Department Program Handbook. The public reporting burden for this collection of information is es including the time for reviewing instructions, searching existing data sources, and cominformation. Send comments regarding this burden estimate or any other aspect of this suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers I 20857 or paperwork@hrsa.gov.

- Pediatric eted by members

	Notes		
Display Only -	Cascades	from	TCR
Display Only -	Cascades 1	from	TCR
Display Only -	Cascades :	from	TCR
Not required			
Display Only -			
Display Only -	Cascades :	from	TCR
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Display Only -	Cascades	from	TCR
Display Only -			
Display Only -	Cascades 1	from	feedback
Not required			

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Display Only - Calculated						
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Value or status is reported, not both						
Value or status is reported, not both						

cts this information in order to perform the ts for membership in the OPTN; and to not conduct or sponsor, and a person is not MB control number. The OMB control is information collection is required to obtain y Act protection (Privacy Act System of tected by a number of the Contractor's :as prescribed by OMB Circular A-130, s Automated Information Systems Security timated to average 0.27 hours per response, pleting and reviewing the collection of s collection of information, including Lane, Room 14N136B, Rockville, Maryland,