## TRF - Pancreas - Adult Fields to be completed by members

Field label	Notes
Organ Type	Display Only - Cascades from Database
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*	Display Only - Cascades from TCR
*	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
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Recipient Center	Display Only - Cascades from TCR
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	Display Only - Cascades from Database
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	Display Only - Cascades from feedback
	Not required
*	
Functional Status	
Working for income	
Primary Insurance at Follow-up	
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	New field if pancreas graft status is functioning. Modification to current label if
Patient on insulin?	graft status is failed.
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	New field if pancreas graft status is functioning. Modification to current label if
Date insulin resumed	graft status is failed.
Date insulin resumed//ST=	Value or status is reported, not both
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Total insulin docago unite	
Total insulin dosage units  Total insulin dosage units//ST	Value or status is reported not both
Insulin dosage units//S1 Insulin duration of use	Value or status is reported, not both
	Value or status is reported not both
Insulin duration of use//ST	Value or status is reported, not both  New field if pancreas graft status is
	Follow-up code Recipient First Name Recipient Last Name Recipient Middle Initial SSN HIC Previous Follow-up DOB Gender Tx Date Previous Px Stat Date Transplant Discharge Date State of Permanent Residence Zip Code Recipient Center Recipient Center Type Follow-up Center Code Follow-up Center Type Physician Name NPI# Follow-up Care Provided By Follow-up Care Provided By Follow-up Care Provided By/Specify UNOS Donor ID # Donor Type OPO Date: Last Seen, Retransplanted or Death Patient Status Primary Cause of Death Primary Cause of Death Contributory Cause of Death Contributory Cause of Death Contributory Cause of Death/Specify Has the patient been hospitalized since the last patient status Working for income  Primary Insurance at Follow-up Primary Source of Payment, Specify HIV Serology HIV NAT HbsAg HBV DNA HBV Core Antibody HCV Serology HCV NAT Graft Status Patient using any method of blood sugar control?  Patient on insulin?

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Clinical Information	Date oral medications resumed	New field if pancreas graft status is functioning. Modification to current label if graft status is failed.
Cimical information	Dute of an inequentions resumed	grant status is raincu.
Clinical Information	Date oral medications resumed//ST=	Value or status is reported, not both
		New field if pancreas graft status is functioning. Modification to current label if
Clinical Information	Patient using diet to control blood sugar	graft status is failed.
Clinical Information	Date of Graft Failure	
Clinical Information	C-Peptide Value	
Clinical Information	C Dontido Valvos//ST=	Value or status is reported not both
Cillical Illiorillation	C-Peptide Value://ST=	Value or status is reported, not both
Clinical Information	Hba1c (%)	
Clinical Information	Hba1c (%)//Status	Value or status is reported, not both
Clinical Information	Primary Cause of Graft Failure	* '
	Primary Cause of Graft Failure//Other,	
Clinical Information	Specify	
Clinical Information	Graft/Vascular Thrombosis	
Clinical Information	Infection	
Cl. · l · ·	701 . 1:	
Clinical Information	Bleeding	
Clinical Information	Anastomotic Leak	
Clinical Information	Acute Rejection	
Clinical information	Acute Rejection	
Clinical Information	Chronic Rejection	
Clinical Information	Biopsy Proven Isletitis	
Clinical Information	Pancreatitis	
Clinical Information	Patient Noncompliance	
	Contributory Cause of Graft Failure//Other,	
Clinical Information	Specify	
	Conv. From Bladder to Enteric Drain	
Clinical Information	Performed	
Clinical Information	If Yes, Enteric Drainage Date	
Clinical Information	Most Recent Serum Creatinine	
Clinical Information	Most Recent Serum Creatinine  Most Recent Serum Creatinine//Status	Value or status is reported, not both
Chinical Information	Pancreas Transplant Complications (Not	value of status is reported, not both
Clinical Information	leading to graft failure)	Display Only - Cascades from Database
Clinical Information	Pancreatitis	1 3
Clinical Information	Anastomotic Leak	
Clinical Information	Abscess or Local Infection	
Clinical Information	Other Complications	
	Did patient have any acute rejection episodes	
Clinical Information	during the follow-up period	
Clinical Information	Post Transplant Malignancy	
Clinical Information	Donor Related	
Clinical Information	Recurrence of Pre-Tx Tumor	
Cimilcai IIIIOIIIIdiiOil	ACCUITENCE OF FIG-1A TUINOI	
Clinical Information	De Novo Solid Tumor	
	De Novo Lymphoproliferative disease and	
Clinical Information	Lymphoma	
Immunosuppressive	Were any medications given during the	
Information	follow-up period for maintenance	
Immunosuppressive	Previous Validated Maintenance Follow-up	
Information	Medications	Display Only - Cascades from Database
Immunosuppressive		
Information	Immunosuppression medication	
Immunosuppressive Information		
	Immunosuppression medication indication	

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## 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.

Clinical Information
Immunosuppressive
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Immunosuppressive Information

Immunosuppressive Information

OMB No. 0915-0157 Expiration Date: >

## PUBLIC BURDEN STATEMEN

The private, non-profit Orgal perform the following OPTN the OPTN; and to monitor cc sponsor, and a person is not control number. The OMB cc This information collection is subject to Privacy Act protec OPTN also are well protected or exceeds the requirements Information Systems, and the reporting burden for this col reviewing instructions, searc comments regarding this bu reducing this burden, to HRS or paperwork@hrsa.gov.

## TRF - Pancreas - 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
OOB	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
Fransplant Discharge Date State of Permanent Residence	
Zip Code	Display Only Cassadas from TCD
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	
Functional Status	
Cognitive Development	
Motor Development	
Working for income	
Academic Progress	
Academic Activity Level	
Primary Insurance at Follow-up	
Height Measurement Date	
Height	
Height//Status	Value or status is reported, not both
Height Percentile	Calculated for display only
Weight Measurement Date	
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Weight//Status	Value or status is reported, not both
Weight Percentile	Calculated for display only
BMI	Display Only - Cascades from Database
BMI Percentile	Calculated for display only
HIV Serology	
HIV NAT	
HbsAg	
HBV DNA	

HBV Core Antibody	
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HCV Serology	
HCV NAT	
Graft Status	
Patient using any method of blood sugar control?	
control:	Novy field if panerons graft status is
	New field if pancreas graft status is functioning. Modification to current label
Patient on insulin?	if graft status is failed.
	New field if pancreas graft status is
	functioning. Modification to current label
Date insulin resumed	if graft status is failed.
Date insulin resumed//ST=	Value or status is reported, not both
Total insulin dosage units	
Total insulin dosage units//ST	Value or status is reported, not both
Insulin duration of use	. and or status is reported, not both
Insulin duration of use//ST	Value or status is reported, not both
	New field if pancreas graft status is
Patient on oral medication to control blood sugar	functioning. Modification to current label if graft status is failed.
	New field if pancreas graft status is
	functioning. Modification to current label
Date oral medications resumed	if graft status is failed.
Date oral medications resumed//ST=	Value or status is reported, not both
	New field if pancreas graft status is functioning. Modification to current label
Patient using diet to control blood sugar	if graft status is failed.
Date of Graft Failure	
C Dontido Volus	
C-Peptide Value	
C-Peptide Value C-Peptide Value://ST=	Value or status is reported, not both
-	Value or status is reported, not both
C-Peptide Value://ST= Hba1c (%)	
C-Peptide Value://ST= Hba1c (%) Hba1c (%)//Status	Value or status is reported, not both  Value or status is reported, not both
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure	
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure/Other,	
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure	
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other,  Specify	
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other,  Specify  Graft/Vascular Thrombosis	
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other,  Specify  Graft/Vascular Thrombosis  Infection  Bleeding	
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other,  Specify  Graft/Vascular Thrombosis  Infection  Bleeding  Anastomotic Leak	
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other,  Specify  Graft/Vascular Thrombosis  Infection  Bleeding  Anastomotic Leak  Acute Rejection	
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other,  Specify  Graft/Vascular Thrombosis  Infection  Bleeding  Anastomotic Leak	
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other,  Specify  Graft/Vascular Thrombosis  Infection  Bleeding  Anastomotic Leak  Acute Rejection  Chronic Rejection	
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other,  Specify  Graft/Vascular Thrombosis  Infection  Bleeding  Anastomotic Leak  Acute Rejection	
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other,  Specify  Graft/Vascular Thrombosis  Infection  Bleeding  Anastomotic Leak  Acute Rejection  Chronic Rejection  Biopsy Proven Isletitis	
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other, Specify  Graft/Vascular Thrombosis  Infection Bleeding Anastomotic Leak Acute Rejection Chronic Rejection  Biopsy Proven Isletitis  Pancreatitis	Value or status is reported, not both
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other, Specify  Graft/Vascular Thrombosis  Infection Bleeding Anastomotic Leak Acute Rejection Chronic Rejection  Biopsy Proven Isletitis Pancreatitis Patient Noncompliance	Value or status is reported, not both
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other, Specify  Graft/Vascular Thrombosis  Infection Bleeding  Anastomotic Leak  Acute Rejection  Chronic Rejection  Biopsy Proven Isletitis  Pancreatitis  Patient Noncompliance  Contributory Cause of Graft Failure//Other,	Value or status is reported, not both
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other, Specify  Graft/Vascular Thrombosis  Infection  Bleeding  Anastomotic Leak  Acute Rejection  Chronic Rejection  Biopsy Proven Isletitis  Pancreatitis  Patient Noncompliance  Contributory Cause of Graft Failure//Other, Specify  Conv. From Bladder to Enteric Drain  Performed	Value or status is reported, not both
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other, Specify  Graft/Vascular Thrombosis  Infection Bleeding  Anastomotic Leak  Acute Rejection  Chronic Rejection  Biopsy Proven Isletitis  Pancreatitis  Patient Noncompliance  Contributory Cause of Graft Failure//Other, Specify  Conv. From Bladder to Enteric Drain	Value or status is reported, not both
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other,  Specify  Graft/Vascular Thrombosis  Infection  Bleeding  Anastomotic Leak  Acute Rejection  Chronic Rejection  Biopsy Proven Isletitis  Pancreatitis  Patient Noncompliance  Contributory Cause of Graft Failure//Other,  Specify  Conv. From Bladder to Enteric Drain  Performed  If Yes, Enteric Drainage Date	Value or status is reported, not both
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other, Specify  Graft/Vascular Thrombosis  Infection  Bleeding  Anastomotic Leak  Acute Rejection  Chronic Rejection  Biopsy Proven Isletitis  Pancreatitis  Patient Noncompliance  Contributory Cause of Graft Failure//Other, Specify  Conv. From Bladder to Enteric Drain Performed  If Yes, Enteric Drainage Date  Most Recent Serum Creatinine  Most Recent Serum Creatinine//Status  Pancreas Transplant Complications (Not	Value or status is reported, not both  Value or status is reported, not both
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other, Specify  Graft/Vascular Thrombosis  Infection  Bleeding  Anastomotic Leak  Acute Rejection  Chronic Rejection  Biopsy Proven Isletitis  Pancreatitis  Pancreatitis  Patient Noncompliance  Contributory Cause of Graft Failure//Other, Specify  Conv. From Bladder to Enteric Drain Performed  If Yes, Enteric Drainage Date  Most Recent Serum Creatinine  Most Recent Serum Creatinine//Status	Value or status is reported, not both
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other, Specify  Graft/Vascular Thrombosis  Infection Bleeding  Anastomotic Leak  Acute Rejection  Chronic Rejection  Biopsy Proven Isletitis  Pancreatitis  Patient Noncompliance  Contributory Cause of Graft Failure//Other, Specify  Conv. From Bladder to Enteric Drain Performed  If Yes, Enteric Drainage Date  Most Recent Serum Creatinine  Most Recent Serum Creatinine  Most Recent Serum Creatinine//Status  Pancreas Transplant Complications (Not leading to graft failure)	Value or status is reported, not both  Value or status is reported, not both
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure/Other, Specify  Graft/Vascular Thrombosis  Infection  Bleeding  Anastomotic Leak  Acute Rejection  Chronic Rejection  Biopsy Proven Isletitis  Pancreatitis  Patient Noncompliance  Contributory Cause of Graft Failure//Other, Specify  Conv. From Bladder to Enteric Drain Performed  If Yes, Enteric Drainage Date  Most Recent Serum Creatinine  Most Recent Serum Creatinine//Status  Pancreas Transplant Complications (Not leading to graft failure)  Pancreatitis	Value or status is reported, not both  Value or status is reported, not both
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure//Other, Specify  Graft/Vascular Thrombosis  Infection Bleeding  Anastomotic Leak  Acute Rejection  Chronic Rejection  Biopsy Proven Isletitis  Pancreatitis  Patient Noncompliance  Contributory Cause of Graft Failure//Other, Specify  Conv. From Bladder to Enteric Drain Performed  If Yes, Enteric Drainage Date  Most Recent Serum Creatinine  Most Recent Serum Creatinine  Most Recent Serum Creatinine//Status  Pancreas Transplant Complications (Not leading to graft failure)	Value or status is reported, not both  Value or status is reported, not both
C-Peptide Value://ST=  Hba1c (%)  Hba1c (%)//Status  Primary Cause of Graft Failure  Primary Cause of Graft Failure/Other, Specify  Graft/Vascular Thrombosis  Infection  Bleeding  Anastomotic Leak  Acute Rejection  Chronic Rejection  Biopsy Proven Isletitis  Pancreatitis  Patient Noncompliance  Contributory Cause of Graft Failure//Other, Specify  Conv. From Bladder to Enteric Drain Performed  If Yes, Enteric Drainage Date  Most Recent Serum Creatinine  Most Recent Serum Creatinine//Status  Pancreas Transplant Complications (Not leading to graft failure)  Pancreatitis	Value or status is reported, not both  Value or status is reported, not both

Other Complications	
Did patient have any acute rejection episodes during the follow-up period	
Post Transplant Malignancy	
Donor Related	
Recurrence of Pre-Tx Tumor	
De Novo Solid Tumor	
De Novo Lymphoproliferative disease and Lymphoma	
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	

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n Procurement and Transplantation Network (OPTN) collects this information in order to functions: to assess whether applicants meet OPTN Bylaw requirements for membership in impliance of member organizations with OPTN Obligations. An agency may not conduct or required to respond to, a collection of information unless it displays a currently valid OMB ontrol number for this information collection is 0915-0157 and it is valid until XX/XX/202X; required to obtain or retain a benefit per 42 CFR §121.11(b)(2). All data collected will be tion (Privacy Act System of Records #09-15-0055). Data collected by the private non-profit 1 by a number of the Contractor's security features. The Contractor's security system meets as prescribed by OMB Circular A-130, Appendix III, Security of Federal Automated e Departments Automated Information Systems Security Program Handbook. The public lection of information is estimated to average 0.27 hours per response, including the time for hing existing data sources, and completing and reviewing the collection of information. Send rden estimate or any other aspect of this collection of information, including suggestions for A Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857