





Clinical Information

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

**PUBLIC BURDEN STATEMENT:**

The private, non-profit Organ Pi  
the following OPTN functions: t  
to monitor compliance of meml  
is not required to respond to, a  
control number for this informa  
required to obtain or retain a br  
(Privacy Act System of Records :  
number of the Contractor's seci  
prescribed by OMB Circular A-1  
Automated Information System  
estimated to average 0.27 hour  
and completing and reviewing t  
aspect of this collection of infor  
5600 Fishers Lane, Room 14N11



**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
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
Transplant Discharge Date	
State of Permanent Residence	
Zip Code	
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
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	
Functional Status	
Cognitive Development	
Motor Development	
Height Measurement Date	
Height	
Height//Status	Value or status is reported, not both
Height Percentile	Calculated for display only
Weight Measurement Date	
Weight	
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
Graft Status	
Most Recent Serum Creatinine	
Most Recent Serum Creatinine//Status	Value or status is reported, not both
Date of Failure	
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	
Coronary Artery Disease Since Last Follow-up	
Post Transplant Malignancy	
Donor Related	
Recurrence of Pre-Tx Tumor	
De Novo Solid Tumor	

De Novo Lymphoproliferative disease and Lymphoma

X/20XX

procurement and Transplantation Network (OPTN) collects this information in order to perform to assess whether applicants meet OPTN Bylaw requirements for membership in the OPTN; and other organizations with OPTN Obligations. An agency may not conduct or sponsor, and a person may not provide information unless it displays a currently valid OMB control number. The OMB information collection is 0915-0157 and it is valid until XX/XX/202X. This information collection is exempt per 42 CFR §121.11(b)(2). All data collected will be subject to Privacy Act protection #09-15-0055). Data collected by the private non-profit OPTN also are well protected by a variety of security features. The Contractor's security system meets or exceeds the requirements as set forth in 30, Appendix III, Security of Federal Automated Information Systems, and the Department of Health and Human Services Security Program Handbook. The public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, reviewing and collecting the data, 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, 36B, Rockville, Maryland, 20857 or [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov).