

**Living Donor Registration (LDR)
Fields to be completed by members**

Form Section	Field Label	Notes
Provider Information	Recipient Center Name	Display Only
Provider Information	Center Code Type	Display Only - Cascades from Database
Provider Information	Center Code	Display Only - Cascades from Database
Donor Information	Donor Last Name	Display Only - Cascades from Database
Donor Information	Donor First Name	Display Only - Cascades from Database
Donor Information	UNOS Donor ID #	Display Only - Cascades from feedback
Donor Information	Home Address	
Donor Information	Home City	
Donor Information	Home State	
Donor Information	Home Zip	
Donor Information	Home Phone	
Donor Information	Work Phone	Not required
Donor Information	Email	Not required
Donor Information	Donor SSN	
Donor Information	Donor Date of Birth	
Donor Information	Donor Gender//Gender	
Donor Information	Marital Status at Time of Donation	
Donor Information	ABO Blood Group	Display Only - Cascades from Database
Donor Information	Living Donor Type	
Donor Information	Living Donor Type Other Specify	
Donor Information	Ethnicity	
Donor Information	Select all origins that apply	
Donor Information	Ethnicity/Race	
Donor Information	Citizenship	
Donor Information	Year of Entry into U.S.	
Donor Information	Country of Permanent Residence	
Donor Information	Highest Education Level	
Donor Information	Did the donor have health insurance	
Donor Information	Functional Status	
Donor Information	Physical Capacity: (check one)	
Donor Information	Working for Income	
Donor Information	Working for Income//If No, Not Working Due To: (check one)	
Donor Information	Working for Income//If Yes	
Donor Information	% Macro-vesicular fat	
Donor Information	% Micro-vesicular fat	
Pre-Donation Clinical Information	Viral Detection://Have any of the following viruses ever been tested for: HIV, CMV, HBV, HCV, EBV	
Pre-Donation Clinical Information	HIV Status	
Pre-Donation Clinical Information	CMV Total	Not required
Pre-Donation Clinical Information	CMV//IgG	
Pre-Donation Clinical Information	CMV//IgM	
Pre-Donation Clinical Information	CMV//Nucleic Acid Testing	Not required
Pre-Donation Clinical Information	HBV	
Pre-Donation Clinical Information	HBV//Core Antibody	
Pre-Donation Clinical Information	HBV//Surface Antigen	
Pre-Donation Clinical Information	HBV//HBV/DNA (NAT/PCR)	
Pre-Donation Clinical Information	HCV	
Pre-Donation Clinical Information	HCV//Antibody	

Pre-Donation Clinical Information	HCV//RIBA	
Pre-Donation Clinical Information	HCV//HCV/RNA (NAT/PCR)	
Pre-Donation Clinical Information	EBV Total	
Pre-Donation Clinical Information	EBV//IgG	
Pre-Donation Clinical Information	EBV//IgM	
Pre-Donation Clinical Information	Pre-Donation//Height	
Pre-Donation Clinical Information	Pre-Donation Height//Status	Value or status is reported, not both
Pre-Donation Clinical Information	Pre-Donation//Weight	
Pre-Donation Clinical Information	Pre-Donation Weight//Status	Value or status is reported, not both
Pre-Donation Clinical Information	History of Cancer	
Pre-Donation Clinical Information	History of Cancer Specify//Specify	Value or status is reported, not both
Pre-Donation Clinical Information	Cancer Free Interval	
Pre-Donation Clinical Information	Cancer Free Interval //Status	Value or status is reported, not both
Pre-Donation Clinical Information	History of Cigarette Use	
Pre-Donation Clinical Information	History of Cigarette Use Pack Years//If Yes, Check # pack years	
Pre-Donation Clinical Information	Duration of Abstinence	
Pre-Donation Clinical Information	Other Tobacco Used	Value or status is reported, not both
Pre-Donation Liver Clinical Information	Total Bilirubin	
Pre-Donation Liver Clinical Information	Total Bilirubin//Status	Value or status is reported, not both
Pre-Donation Liver Clinical Information	SGOT/AST	
Pre-Donation Liver Clinical Information	SGOT/AST//Status	Value or status is reported, not both
Pre-Donation Liver Clinical Information	SGPT/ALT	
Pre-Donation Liver Clinical Information	SGPT/ALT//Status	Value or status is reported, not both
Pre-Donation Liver Clinical Information	Alkaline Phosphatase	
Pre-Donation Liver Clinical Information	Alkaline Phosphatase//Status	Value or status is reported, not both
Pre-Donation Liver Clinical Information	Serum Albumin	
Pre-Donation Liver Clinical Information	Serum Albumin//Status	Value or status is reported, not both
Pre-Donation Liver Clinical Information	Serum Creatinine	
Pre-Donation Liver Clinical Information	Serum Creatinine//Status	Value or status is reported, not both
Pre-Donation Liver Clinical Information	INR	
Pre-Donation Liver Clinical Information	INR//Status	Value or status is reported, not both
Pre-Donation Liver Clinical Information	Liver Biopsy	
Pre-Donation Liver Clinical Information	% Macro/intermediate vesicular fat //Status	Value or status is reported, not both
Pre-Donation Liver Clinical Information	% Micro/intermediate vesicular fat //Status	Value or status is reported, not both
Pre-Donation Kidney Clinical Information	History of Hypertension	
Pre-Donation Kidney Clinical Information	History of Hypertension Diet	

Pre-Donation Kidney Clinical Information	History of Hypertension Diuretics	Display Only – Cascades from Database
Pre-Donation Kidney Clinical Information	History of Hypertension Other Hypertensive Medication	
Pre-Donation Kidney Clinical Information	Diabetes	
Pre-Donation Kidney Clinical Information	Diabetes Treatment	
Pre-Donation Kidney Clinical Information	Kidney Preoperative Creatinine//Serum Creatinine	
Pre-Donation Kidney Clinical Information	Kidney Preoperative Creatinine//Status	Value or status is reported, not both
Pre-Donation Kidney Clinical Information	Preoperative Blood Pressure Systolic	
Pre-Donation Kidney Clinical Information	Preoperative Blood Pressure Systolic//Status	Value or status is reported, not both
Pre-Donation Kidney Clinical Information	Preoperative Blood Pressure Diastolic	
Pre-Donation Kidney Clinical Information	Preoperative Blood Pressure Diastolic//Status	Value or status is reported, not both
Pre-Donation Kidney Clinical Information	Urinalysis	Display Only
Pre-Donation Kidney Clinical Information	Preoperative Urinalysis//Urine Protein	Value or status is reported, not both
Pre-Donation Kidney Clinical Information	Preoperative Urinalysis//Protein-Creatinine Ratio	
Pre-Donation Lung Clinical Information	Diabetes	
Pre-Donation Lung Clinical Information	Diabetes Treatment	
Pre-Donation Lung Clinical Information	FVC % predicted before//FVC % predicted	Value or status is reported, not both
Pre-Donation Lung Clinical Information	FVC % predicted before//Status	Value or status is reported, not both
Pre-Donation Lung Clinical Information	FVC % predicted after//FVC % predicted	Value or status is reported, not both
Pre-Donation Lung Clinical Information	FVC % predicted after//Status	Value or status is reported, not both
Pre-Donation Lung Clinical Information	FEV1 % predicted before//FEV1 % predicted	
Pre-Donation Lung Clinical Information	FEV1 % predicted before//Status	Value or status is reported, not both
Pre-Donation Lung Clinical Information	FEV1 % predicted after//FEV1 % predicted	
Pre-Donation Lung Clinical Information	FEV1 % predicted after//Status	Value or status is reported, not both
Pre-Donation Lung Clinical Information	FEF (25-75%) % predicted before//FEF (25-75%) % predicted	
Pre-Donation Lung Clinical Information	FEF (25-75%) % predicted before//Status	Value or status is reported, not both
Pre-Donation Lung Clinical Information	FEF (25-75%) % predicted after//FEF (25-75%) % predicted	
Pre-Donation Lung Clinical Information	FEF (25-75%) % predicted after//Status	Value or status is reported, not both
Pre-Donation Lung Clinical Information	TLC % predicted before//TLC % predicted	
Pre-Donation Lung Clinical Information	TLC % predicted before//Status	Value or status is reported, not both
Pre-Donation Lung Clinical Information	TLC % predicted after//TLC % predicted	
Pre-Donation Lung Clinical Information	TLC % predicted after//Status	Value or status is reported, not both
Pre-Donation Lung Clinical Information	Diffusing lung capacity corrected for alveolar volume % predicted	
Pre-Donation Lung Clinical Information	Diffusing lung capacity corrected for alveolar volume % predicted//Status	Value or status is reported, not both
Pre-Donation Lung Clinical Information	PaO2 on room air	
Pre-Donation Lung Clinical Information	PaO2 on room air//Status	Value or status is reported, not both
Pre-Donation All VCA Clinical Information	Toxoplasma IgG	

Pre-Donation Uterus Clinical Information	Human Papillomavirus (HPV) - cervical specimen only by DNA or mRNA	
Pre-Donation Uterus Clinical Information	Herpes Simplex Virus (HSV) 1/2 (IgG)	
Pre-Donation Uterus Clinical Information	Gonorrhea (NAT)	
Pre-Donation Uterus Clinical Information	Gonorrhea (NAT)//If positive, was the patient treated?	
Pre-Donation Uterus Clinical Information	Chlamydia (NAT)	
Pre-Donation Uterus Clinical Information	Chlamydia (NAT)//If positive, was the patient treated?	
Pre-Donation Uterus Clinical Information	Vaginal Candidiasis (collected at the time of evaluation)	
Pre-Donation Uterus Clinical Information	Vaginal Candidiasis (collected at the time of evaluation)//If positive, was the patient treated?	
Pre-Donation Uterus Clinical Information	Vaginal Candidiasis (collected at the time of donation)	
Pre-Donation Uterus Clinical Information	Vaginal Candidiasis (collected at the time of donation)//If positive, was the patient treated?	
Pre-Donation Uterus Clinical Information	Bacterial Vaginosis (Gardnerella vaginalis)	
Pre-Donation Uterus Clinical Information	Bacterial Vaginosis (Gardnerella vaginalis)//If positive, was the patient treated?	
Pre-Donation Uterus Clinical Information	Trichomoniasis	
Pre-Donation Uterus Clinical Information	Trichomoniasis//If positive, was the patient treated?	
Pre-Donation Uterus Clinical Information	Other testing - specify	
Pre-Donation Uterus Clinical Information	Other testing - specify//Result	
Pre-Donation Uterus Clinical Information	Uterine Imaging Conducted (select all that apply)	
Pre-Donation Uterus Clinical Information	Uterine Imaging Conducted (select all that apply)//If Other, Specify	
Pre-Donation Uterus Clinical Information	Uterine Imaging Conducted (select all that apply)//If imaging was conducted, indicate any abnormal findings	Display only
Pre-Donation Uterus Clinical Information	Uterine Imaging Conducted (select all that apply)//If imaging was conducted, indicate any abnormal findings//MRI/MRA	
Pre-Donation Uterus Clinical Information	Uterine Imaging Conducted (select all that apply)//If imaging was conducted, indicate any abnormal findings//CT	
Pre-Donation Uterus Clinical Information	Uterine Imaging Conducted (select all that apply)//If imaging was conducted, indicate any abnormal findings//Other	
Pre-Donation Uterus Clinical Information	Gravidity	
Pre-Donation Uterus Clinical Information	Parity	
Pre-Donation Uterus Clinical Information	Spontaneous Abortion	
Pre-Donation Uterus Clinical Information	Induced Termination	
Pre-Donation Uterus Clinical Information	Prior Full Term Live Births	
Pre-Donation Uterus Clinical Information	Prior Full Term Live Births//If yes, indicate type of delivery for all prior births	Display only
Pre-Donation Uterus Clinical Information	Prior Full Term Live Births//If yes, indicate type of delivery for all prior births//Total number of births	
Pre-Donation Uterus Clinical Information	Prior Full Term Live Births//If yes, indicate type of delivery for all prior births//Number of vaginal deliveries	

Pre-Donation Uterus Clinical Information	Prior Full Term Live Births//If yes, indicate type of delivery for all prior births//Number of deliveries by C-section	
Liver Surgical Information	Type of Transplant Graft	
Kidney Surgical Information	Kidney//Type of Transplant Graft	Display Only - Cascades from Database
Kidney Surgical Information	Kidney//Intended Procedure Type	Value or status is reported, not both
Kidney Surgical Information	Conversion from Laparoscopic to Open	
Lung Surgical Information	Lung//Type of Transplant Graft	Display Only - Cascades from Database
Lung Surgical Information	Lung//Procedure Type	Value or status is reported, not both
Lung Surgical Information	Conversion from Thoracoscopic to Open	
Lung Surgical Information	Intra-operative Complications	
Lung Surgical Information	Intra-operative Complications Specify//If Yes, Specify	
Lung Surgical Information	Sacrifice of Second Lobe, Specify	
Lung Surgical Information	Anesthetic Complication Specify	
Lung Surgical Information	Arrhythmia requiring therapy	
Lung Surgical Information	Intra-operative Complications Other//Other Specify	
Uterus Surgical Information	Intended Procedure Type	
Uterus Surgical Information	Intended Procedure Type//If Robotic, was there a conversion from Robotic to Open?	
Uterus Surgical Information	Operative Time (surgical time from skin to skin)	Display only
Uterus Surgical Information	Operative Time (surgical time from skin to skin)//Start time	
Uterus Surgical Information	Operative Time (surgical time from skin to skin)//End time	
Uterus Surgical Information	Ovaries removed?	
Uterus Surgical Information	Intra-Operative Complications	
Uterus Surgical Information	Intra-Operative Complications//If yes, select all that occurred	
Uterus Surgical Information	Intra-Operative Complications//If yes, select all that occurred//If Ureter injury, which occurred?	
Uterus Surgical Information	Intra-Operative Complications//If yes, select all that occurred//If Ureter injury, which occurred//Was injury corrected?	
Uterus Surgical Information	Intra-Operative Complications//If yes, select all that occurred//If Anesthetic complication, specify	
Uterus Surgical Information	Intra-Operative Complications//If yes, select all that occurred//If Other, specify	
Other VCA Surgical Information	Intra-Operative Complications	
Other VCA Surgical Information	Intra-Operative Complications//If yes, select all that occurred	
Other VCA Surgical Information	Intra-Operative Complications//If yes, select all that occurred//If Anesthetic complication, specify	
Other VCA Surgical Information	Intra-Operative Complications//If yes, select all that occurred//If Other, specify	
Post-Operative Information	Date of Initial Discharge	
Post-Operative Information	Donor Status	
Post-Operative Information	Date Last Seen or Death	
Post-Operative Information	Cause of Death	
Post-Operative Information	Cause of Death//Other Specify	
Post-Operative Information	Non-Autologous Blood Administration	
Post-Operative Information	PRBC Units//If Yes, Number of Units	
Post-Operative Information	Platelets Units//If Yes, Number of Units	
Post-Operative Information	FF Units//If Yes, Number of Units	
Uterus Post-Operative Information	Length of ICU Stay (days)	
Liver Related Post-Operative Complications	Biliary Complications	

Liver Related Post-Operative Complications	Biliary Complications//If Yes, Specify	
Liver Related Post-Operative Complications	Biliary Complications//If Yes, Specify://Date of surgery	
Liver Related Post-Operative Complications	Liver Vascular Complications Requiring Intervention//Vascular Complications Requiring Intervention	
Liver Related Post-Operative Complications	Liver Vascular Complications//If Yes, Specify	
Liver Related Post-Operative Complications	Liver Vascular Complications Other//Specify	
Liver Related Post-Operative Complications	Liver Other Complications Requiring Intervention	
Liver Related Post-Operative Complications	Liver Other Complications//If Yes, Specify	
Liver Related Post-Operative Complications	Liver Other Complications Other//Specify	
Liver Related Post-Operative Complications	Liver Reoperation	
Liver Related Post-Operative Complications	Reoperation//If yes, specify reason for reoperation (during first six weeks)	
Liver Related Post-Operative Complications	Liver Reoperation Liver Failure	
Liver Related Post-Operative Complications	Liver Reoperation Liver Failure Date	
Liver Related Post-Operative Complications	Liver Reoperation Bleeding Complications	
Liver Related Post-Operative Complications	Liver Reoperation Bleeding Date//Date	
Liver Related Post-Operative Complications	Liver Reoperation Hernia Repair	
Liver Related Post-Operative Complications	Liver Reoperation Hernia Repair Date	
Liver Related Post-Operative Complications	Liver Reoperation Bowel Obstruction	
Liver Related Post-Operative Complications	Liver Reoperation Bowel Obstruction Date	
Liver Related Post-Operative Complications	Liver Reoperation Vascular Complications	
Liver Related Post-Operative Complications	Liver Reoperation Vascular Date	
Liver Related Post-Operative Complications	Liver Reoperation Other//Other Specify	
Liver Related Post-Operative Complications	Liver Reoperation Other Specify//Other Specify	
Liver Related Post-Operative Complications	Liver Reoperation Other Date	
Liver Related Post-Operative Complications	Liver Readmission//Any Readmission After Initial Discharge	
Liver Related Post-Operative Complications	Liver Readmission Reason//If yes, specify reason for readmission (during first six weeks)	
Liver Related Post-Operative Complications	Liver Readmission Reason Other//Other Specify	
Liver Related Post-Operative Complications	Liver Readmission Date//If Yes, Date of First Readmission	
Liver Related Post-Operative Complications	Liver Other Interventional Procedures	
Liver Related Post-Operative Complications	Liver Other Interventional Procedures//If Yes, Specify Procedure	
Liver Related Post-Operative Complications	Liver Other Interventional Procedures Date//Date of Procedure	
Kidney Related Post-Operative Complications	Kidney Vascular Complications Requiring Intervention//Vascular Complications Requiring Intervention	
Kidney Related Post-Operative Complications	Kidney Vascular Complications//If Yes, Specify	
Kidney Related Post-Operative Complications	Kidney Vascular Complications Other//Specify	
Kidney Related Post-Operative Complications	Kidney Other Complications Requiring Intervention//Other Complications Requiring Intervention	

Kidney Related Post-Operative Complications	Kidney Other Complications//If Yes, Specify	
Kidney Related Post-Operative Complications	Kidney Other Complications Other//Other Specify	
Kidney Related Post-Operative Complications	Kidney Reoperation//Reoperation	
Kidney Related Post-Operative Complications	Reoperation//If yes, specify reason for reoperation (during first six weeks)	
Kidney Related Post-Operative Complications	Kidney Reoperation Bleeding//Bleeding	
Kidney Related Post-Operative Complications	Kidney Reoperation Bleeding Date//Date	
Kidney Related Post-Operative Complications	Kidney Reoperation Hernia Repair//Hernia Repair	
Kidney Related Post-Operative Complications	Kidney Reoperation Hernia Repair Date//Date	
Kidney Related Post-Operative Complications	Kidney Reoperation Bowel Obstruction//Bowel Obstruction	
Kidney Related Post-Operative Complications	Kidney Reoperation Bowel Obstruction Date//Date	
Kidney Related Post-Operative Complications	Kidney Reoperation Vascular//Vascular	
Kidney Related Post-Operative Complications	Kidney Reoperation Vascular Date//Date	
Kidney Related Post-Operative Complications	Kidney Reoperation Other//Other Specify	
Kidney Related Post-Operative Complications	Kidney Reoperation Other Specify//Other Specify	
Kidney Related Post-Operative Complications	Kidney Reoperation Other Date//Date	
Kidney Related Post-Operative Complications	Kidney Readmission//Any Readmission After Initial Discharge	
Kidney Related Post-Operative Complications	Kidney Readmission Reason//If yes, specify reason for readmission (during first six weeks)	
Kidney Related Post-Operative Complications	Kidney Readmission Reason Other//Other Specify	
Kidney Related Post-Operative Complications	Kidney Readmission Date//If Yes, Date of First Readmission	
Kidney Related Post-Operative Complications	Kidney Other Interventional Procedures//Other Interventional Procedures	
Kidney Related Post-Operative Complications	Kidney Other Interventional Procedures//If Yes, Specify Procedure	
Kidney Related Post-Operative Complications	Kidney Other Interventional Procedures Date//Date of Procedure	
Liver Related Post-Operative Complications	Lung Readmission Reason Other//Specify	
Liver Related Post-Operative Complications	Post-operative complications during the initial hospitalization	
Liver Related Post-Operative Complications	Post-operative Complications//If Yes, Specify	
Liver Related Post-Operative Complications	Arrhythmia requiring therapy	
Liver Related Post-Operative Complications	Placement of Additional Thoracostomy Tube(s), Indication	
Liver Related Post-Operative Complications	Post-operative Complications Other//Other Specify	
Liver Related Post-Operative Complications	Lung Readmission//Any Readmission After Initial Discharge	
Lung Related Post-Operative Complications	Lung Readmission Reason//If yes, specify reason for readmission (during first six weeks)	
Liver Related Post-Operative Complications	Lung Readmission Reason Other//Specify	
Lung Related Post-Operative Complications	Lung Readmission Date//If Yes, Date of First Readmission	
Uterus Related Post-Operative Complications	Post-Operative Complications	
Uterus Related Post-Operative Complications	Post-Operative Complications//If yes, select all that apply	

Uterus Related Post-Operative Complications	Post-Operative Complications//If yes, select all that apply//Other - specify	
Other VCA Related Post-Operative Complications	Post-Operative Complications	
Other VCA Related Post-Operative Complications	Post-Operative Complications//If yes, specify complication	
All VCA Related Post-Operative Complications	Reoperation	
All VCA Related Post-Operative Complications	Reoperation//If yes, specify reason for reoperation (during first six weeks)	
All VCA Related Post-Operative Complications	Reoperation//If yes, specify reason for reoperation (during first six weeks)//Date	
Post-Operative Clinical Information	Most Recent Date of Tests	
Post-Operative Clinical Information	Weight in lb.	
Post-Operative Clinical Information	Kidney Serum Creatinine	
Post-Operative Clinical Information	Kidney Serum Creatinine//Status	Value or status is reported, not both
Post-Operative Clinical Information	Post-Op Blood Pressure Systolic	
Post-Operative Clinical Information	Post-Op Blood Pressure Systolic//Status	Value or status is reported, not both
Post-Operative Clinical Information	Post-Op Blood Pressure Diastolic	
Post-Operative Clinical Information	Post-Op Blood Pressure Diastolic//Status	Value or status is reported, not both
Post-Operative Clinical Information	Urinalysis	Display Only
Post-Operative Clinical Information	Post-Operative Urinalysis//Urine Protein	Value or status is reported, not both
Post-Operative Clinical Information	Post-Operative Urinalysis//Protein-Creatinine Ratio	
Post-Operative Clinical Information	Donor Developed Hypertension Requiring Medication	
Post-Operative Clinical Information	Total Bilirubin	Value or status is reported, not both
Post-Operative Clinical Information	Total Bilirubin//Status	Value or status is reported, not both
Post-Operative Clinical Information	SGOT/AST	
Post-Operative Clinical Information	SGOT/AST//Status	Value or status is reported, not both
Post-Operative Clinical Information	SGPT/ALT	
Post-Operative Clinical Information	SGPT/ALT//Status	Value or status is reported, not both
Post-Operative Clinical Information	Alkaline Phosphatase	
Post-Operative Clinical Information	Alkaline Phosphatase//Status	Value or status is reported, not both
Post-Operative Clinical Information	Serum Albumin	
Post-Operative Clinical Information	Serum Albumin//Status	Value or status is reported, not both
Post-Operative Clinical Information	Serum Creatinine	
Post-Operative Clinical Information	Serum Creatinine//Status	Value or status is reported, not both
Post-Operative Clinical Information	INR	
Post-Operative Clinical Information	INR//Status	Value or status is reported, not both
Post-Operative Clinical Information	Post-Operative//Weight	
Post-Operative Clinical Information	Post-Operative Weight//Status	Value or status is reported, not both
Post-Operative Clinical Information	Organ Recovery Date	
Post-Operative Clinical Information	Organ(s) Recovered	Value or status is reported, not both

Post-Operative Clinical Information	Recipient Last Name	
Post-Operative Clinical Information	Recipient First Name	Value or status is reported, not both
Post-Operative Clinical Information	Recipient SSN#	
Post-Operative Clinical Information	Donor Recovery Facility Center Code//Donor Recovery Facility	Display Only - Cascades from Database
Post-Operative Clinical Information	Donor Recovery Facility Center Type	Display Only - Cascades from Database
Post-Operative Clinical Information	Donor Workup Facility Center Code	Display Only - Cascades from Database
OMB No. 0915-0157 Expiration Date: XX/XX/20XX POST-OPERATIVE CLINICAL INFORMATION	Donor Workup Facility Center Type	Display Only - Cascades from Database

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.