TCR - Heart - Adult Fields to be completed by members

Form Section Transplant Center Code Display Only - Cascades from Provider Information Transplant Center Type://Recipient Center Display Only - Cascades from Candidate Information Date of Listing or Add: Display Only - Cascades from Candidate Information Last Name: Cascades from Waitlist Candidate Information Last Name: Cascades from Waitlist Candidate Information Middle Initial://MI: Not required Candidate Information Previous Surname: Not required Candidate Information Previous Surname: Not required Candidate Information Gender: Cascades from Waitlist Candidate Information Gender: Cascades from Waitlist Candidate Information Gender: Cascades from Waitlist Candidate Information Date of Birth://DOB: Cascades from Waitlist Candidate Information Date of Birth://DOB: Cascades from Waitlist Candidate Information State of Permanent Residence: Cascades from Waitlist Candidate Information State of Permanent Residence: Cascades from Waitlist Candidate Information Ethnicity: Cascades from Waitlist Candidate Information Citizenship: Vear of Entry to the U.S. Status//ST= Cascades from Waitlist Candidate Information Year of Entry to the U.S. Status//ST= Value or status is reported, not Candidate Information Country of Permanent Residence Candidate Information Highest Education Level: Patient Status Life Support://Intra Aortic Balloon Pump Patient Status Life Support://Intra Aortic Balloon Pump Patient Status Life Support://Prostaglandins Patient Status Life Support://AD Brand1/Specify: Patient Status Life Suppo	
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Patient Status Previous Pancreas Islet Infusion	
Source of Payment Source of Payment//Primary:	
Source of Payment Foreign Government//Specify:	
Clinical Information Height in cm://Height:	
Clinical Information Height Status//ST= Value or status is reported, not	both
Clinical Information Height Growth percentiles//%ile Calculated for display only	
Clinical Information Weight in kg://Weight:	1 4
Clinical Information Weight Status//ST= Value or status is reported, not	Doth
Clinical Information Weight Growth percentiles//%ile Calculated for display only	D-+-I
Clinical Information BMI: Display Only - Cascades from	Database
Clinical Information BMI://%ile Calculated for display only Clinical Information ABO Blood Group: Display Only - Cascades from	\A/n;+1:-+
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Clinical Information Primary Diagnosis: Clinical Information Primary Diagnosis//Specify:	
General Medical Factors Diabetes:	
General Medical Factors Dialysis:	
General Medical Factors Symptomatic Cerebrovascular Disease:	
General Medical Factors Any previous Malignancy:	
General Medical Factors Any previous Malignancy//Specify Type:	
General Medical Factors Any previous Malignancy//Specify:	
General Medical Factors Most Recent Serum Creatinine:	
General Medical Factors Most Recent Serum Creatinine//ST= Value or status is reported, not	both
Heart Medical Factors Implantable Defibrillator:	
Heart Medical Factors Exercise Oxygen Consumption:	
Heart Medical Factors Exercise Oxygen Consumption//ST= Value or status is reported, not	both
Heart <mark>/Lung</mark> Medical Factors PA (sys) mm/Hg:	
Heart /Lung Medical Factors PA (sys) mm/Hg//ST= Value or status is reported, not	both

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Provider Informa	tion
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Heart/Lung Medical Factors	PA (sys) mm/Hg Inotropes/Vasodilators	
Heart /Lung Medical Factors	PA (dia) mm/Hg:	
Heart /Lung Medical Factors	PA (dia) mm/Hg//ST=	Value or status is reported, not both
Heart /Lung Medical Factors	PA (dia) mm/Hg Inotropes/Vasodilators	
Heart /Lung Medical Factors	PA (mean) mm/Hg:	
Heart /Lung Medical Factors	PA (mean) mm/Hg//ST=	Value or status is reported, not both
Heart /Lung Medical Factors	PA (mean) mm/Hg Inotropes/Vasodilators	
Heart /Lung Medical Factors	PCW (mean) mm/Hg:	
Heart /Lung Medical Factors	PCW (mean) mm/Hg//ST=	Value or status is reported, not both
Heart /Lung Medical Factors	Inotropes/Vasodilators	
Heart/Lung Medical Factors	CO L/min:	
Heart/Lung Medical Factors	CO L/min//ST=	Value or status is reported, not both
Heart /Lung Medical Factors	CO L/min Inotropes/Vasodilators	
Heart /Lung Medical Factors	History of Cigarette Use:	
Heart/Lung Medical Condition	Duration of Abstinence:	
Heart/Lung Medical Condition	Prior Cardiac Surgery (non-transplant):	
Heart/Lung Medical Condition	If yes, check all that apply:	
Heart/Lung Medical Condition	Prior Cardiac Surgery type//Specify:	

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.

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

PUBLIC BURDEN STATEMENT:

The private, non-profit Organ Procure following OPTN functions: to assess w monitor compliance of member orgar required to respond to, a collection of number for this information collection obtain or retain a benefit per 42 CFR for Records #09-15-0055). Data collect security features. The Contractor's se Appendix III, Security of Federal Auto Program Handbook. The public report response, including the time for revie collection of information. Send commiccluding suggestions for reducing thi Maryland, 20857 or paperwork@hrsa

TCR - Heart - Pediatric Fields to be completed by members

T:-14 I -1-1	Neter
Field Label Transplant Center Code	Notes Display Only - Cascades from Waitlist
Transplant Center Code Transplant Center Type://Recipient Center	Display Only - Cascades from Waitlist
Organ Registered:	Display Only - Cascades from Waitlist
Date of Listing or Add:	Display Only - Cascades from Waitlist
Last Name:	Cascades from Waitlist
First Name:	Cascades from Waitlist
Middle Initial://MI:	Not required
Previous Surname:	Not required
SSN:	Display Only - Cascades from Waitlist
Gender:	Cascades from Waitlist
HIC:	Not required
Date of Birth://DOB:	Cascades from Waitlist
State of Permanent Residence:	Cascades from Waitlist
Permanent ZIP Code:	Cascades from Waitlist
Ethnicity:	Cascades from Waitlist
Select all origins that apply:	Cascades from Waitlist
Ethnicity/Race:	Cascades from Waitlist
Citizenship:	
Year of Entry to the U.S.	
Year of Entry to the U.S Status//ST=	Value or status is reported, not both
Country of Permanent Residence	
Highest Education Level:	
Patient on Life Support:	
Oxygenation Life Support://Intra Aortic Balloon Pump	
Life Support://Intra Aoruc Banoon Pump Life Support://Prostaglandins	
Life Support://Intravenous Inotropes	
Life Support://Inhaled NO	
Life Support://Ventilator	
Life Support://Other Mechanism, Specify	
Life Support: Other Mechanism//Specify:	
Device:	
Life Support://VAD Brand1:	
Life Support://VAD Brand2:	
Life Support:VAD Brand1//Specify:	
Life Support:VAD Brand2//Specify:	
Functional Status:	
Cognitive Development:	
Motor Development:	
Working for income:	
Academic Progress:	
Academic Activity Level:	
Previous Transplant//Organ	Display Only - Cascades from Database
Previous Transplant//Date	Display Only - Cascades from Database
Previous Transplant//Graft Fail Date	Display Only - Cascades from Database
Source of Payment//Primary:	
Foreign Government//Specify:	
Date of Measurement:	
Height Measurement Date	
Height in cm://Height: Height Status//ST=	Value or status is reported not both
Height Growth percentiles//%ile	Value or status is reported, not both Calculated for display only
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Weight in kg://Weight:	
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Weight Growth percentiles//%ile	Calculated for display only
BMI:	Display Only - Cascades from Database
BMI://%ile	Calculated for display only
ABO Blood Group:	Display Only - Cascades for Waitlist
Primary Diagnosis:	, , , , , , , , , , , , , , , , , , , ,
Primary Diagnosis//Specify:	
Diabetes:	
Dialysis:	
Symptomatic Cerebrovascular Disease:	
Any previous Malignancy:	
Any previous Malignancy//Specify Type:	
Any previous Malignancy//Specify:	
3 F 3	

Most Recent Serum Creatinine//ST=	Value or status is reported, not both
Total Serum Albumin:	
Total Serum Albumin//ST=	Value or status is reported, not both
Sudden Death:	
Implantable Defibrillator:	
Exercise Oxygen Consumption:	
Exercise Oxygen Consumption//ST=	Value or status is reported, not both
PA (sys) mm/Hg:	
PA (sys) mm/Hg//ST=	Value or status is reported, not both
PA (sys) mm/Hg Inotropes/Vasodilators	
PA (dia) mm/Hg:	
PA (dia) mm/Hg//ST=	Value or status is reported, not both
PA (dia) mm/Hg Inotropes/Vasodilators	-
PA (mean) mm/Hg:	
PA (mean) mm/Hg//ST=	Value or status is reported, not both
PA (mean) mm/Hg Inotropes/Vasodilators	
PCW (mean) mm/Hg:	
PCW (mean) mm/Hg//ST=	Value or status is reported, not both
Inotropes/Vasodilators	
CO L/min:	
CO L/min//ST=	Value or status is reported, not both
CO L/min Inotropes/Vasodilators	
History of Cigarette Use:	
Duration of Abstinence:	
Prior Thoracic Surgery other than prior transplant:	
Prior Thoracic Surgery//If yes, number of prior sternotomies:	
Prior Thoracic Surgery//If yes, number of prior thoracotomies:	
Prior Thoracic Surgery//Prior congenital cardiac surgery:	
Prior congenital cardiac surgery//If yes, palliative surgery:	
Prior congenital cardiac surgery//If yes, corrective surgery:	
Prior congenital cardiac surgery//If yes, single ventricular physiology:	

ement and Transplantation Network (OPTN) collects this information in order to perform the whether applicants meet OPTN Bylaw requirements for membership in the OPTN; and to nizations with OPTN Obligations. An agency may not conduct or sponsor, and a person is not finformation unless it displays a currently valid OMB control number. The OMB control n is 0915-0157 and it is valid until XX/XX/202X. This information collection is required to \$121.11(b)(2). All data collected will be subject to Privacy Act protection (Privacy Act System ed by the private non-profit OPTN also are well protected by a number of the Contractor's curity system meets or exceeds the requirements as prescribed by OMB Circular A-130, mated Information Systems, and the Departments Automated Information Systems Security ting burden for this collection of information is estimated to average 0.27 hours per wing instructions, searching existing data sources, and completing and reviewing the ents regarding this burden estimate or any other aspect of this collection of information, s burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, 1.gov.