

**TRR - Pancreas - 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 Birth Sex	Display Only - Cascades from TCR
Recipient Information	Transplant Date	Display Only - Cascades from Database
Recipient Information	Transplant Time	Display Only - Cascades from Database
Recipient Information	Transplant Time Zone	Display Only - Cascades from Database
Recipient Information	State of Permanent Residence	
Recipient Information	Permanent Zip	
Provider Information	Recipient Center Code	Display Only - Cascades from TCR
Provider Information	Recipient Center Type	Display Only - Cascades from TCR
Provider Information	Surgeon Name	
Provider Information	NPI#	
Donor Information	UNOS Donor ID #	Display Only - Cascades from feedback
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	Functional Status	
Pretransplant	Working for income	
Pretransplant	Primary Source of Payment	
Pretransplant	Specify Foreign Government//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	
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	Pretransplant Dialysis	
Pretransplant	If Dialyzed, Date of Most Recent Initiation of Chronic Maintenance Dialysis	
Pretransplant	If Yes, Date First Dialyzed//Status	Value or status is reported, not both
Pretransplant	Average Daily Insulin Units	
Pretransplant	Average Daily Insulin Units//Status	Value or status is reported, not both
Pretransplant	Serum Creatinine at Time of Tx	
Pretransplant	Serum Creatinine at Time of Tx//Status	Value or status is reported, not both

Form Section
Recipient Information
Recipient Information
Recipient Information
Recipient Information
Recipient Information
Recipient Information
Recipient Information
Recipient Information
Recipient Information
Recipient Information
Recipient Information
Provider Information
Provider Information
Provider Information
Donor Information
Donor Information
Patient Status
Patient Status
Patient Status
Patient Status
Patient Status
Patient Status
Patient Status
Patient Status
Patient Status
Patient Status
Patient Status
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant
Pretransplant





**TRR - Pancreas - Pediatric**  
**Fields to be completed by members**

Field Label	Notes
Organ	Display Only - Cascades from TCR
Recipient First Name	Display Only - Cascades from TCR
Recipient Last Name	Display Only - Cascades from TCR
Recipient Middle Initial	Not required
SSN	Display Only - Cascades from TCR
HIC	Display Only - Cascades from TCR
DOB	Display Only - Cascades from TCR
Gender Birth Sex	Display Only - Cascades from TCR
Transplant Date	Display Only - Cascades from Database
Transplant Time	Display Only - Cascades from Database
Transplant Time Zone	Display Only - Cascades from Database
State of Permanent Residence	
Permanent Zip	
Recipient Center Code	Display Only - Cascades from TCR
Recipient Center Type	Display Only - Cascades from TCR
Surgeon Name	
NPI#	
UNOS Donor ID #	Display Only - Cascades from feedback
Donor Type	Display Only - Cascades from feedback
OPO	Display Only - Cascades from feedback
Primary Diagnosis	
Primary Diagnosis//Specify	
Date: Last Seen, Retransplanted or Death	
Patient Status	
Primary Cause of Death	
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
Date of Admission to Tx Center	
Date of Discharge from Tx Center	
Functional Status	
Cognitive Development	
Motor Development	
Academic Progress	
Academic Activity Level	
Primary Source of Payment	
Specify Foreign Government//Specify	
Height Measurement Date	
Height	
Height in Centimeters//Status	Value or status is reported, not both
Height Percentile//Growth Percentiles//%ile	Calculated for display only
Weight Measurement Date	
Weight	
Weight in Kilograms//Status	Value or status is reported, not both
Weight Percentile//Growth Percentiles//%ile	Calculated for display only
BMI	Display Only - Cascades from Database
BMI://%ile	Calculated for display only
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
Pretransplant Dialysis	
If Dialyzed, Date of Most Recent Initiation of Chronic Maintenance Dialysis	

If Yes, Date First Dialyzed//Status	Value or status is reported, not both
Average Daily Insulin Units	
Average Daily Insulin Units//Status	Value or status is reported, not both
Serum Creatinine at Time of Tx	
Serum Creatinine at Time of Tx//Status	Value or status is reported, not both
HIV Serostatus	
NAT HIV	
CMV Status	
HBV Core Antibody	
HBV Surface Antibody Total	
HBV Surface Antigen	
NAT HBV	
HCV Serostatus	
NAT HCV	
EBV Serostatus	
Did the recipient receive Hepatitis B vaccines prior to transplant?	
Malignancies between listing and transplant	
Malignancies between listing and transplant//Specify	
If yes, specify type	
Multiple Organ Recipient	Display Only - Cascades from feedback
Were extra vessels used in the transplant procedure	Display Only - Cascades from feedback
Procedure Type	Display Only - Cascades from feedback
Graft Placement	
Operative Technique	
Duct Management	
Duct Management//Specify	
Venous Vascular Management	
Arterial Reconstruction	
Arterial Reconstruction//Specify	
Venous Extension Graft	
Total Pancreas Preservation Time (include Cold, Warm, Anastomotic time)	
Total Pancreas Preservation Time (include Cold, Warm, Anastomotic time)//Status	Value or status is reported, not both
Organ Check-In Date	
Check-In Time	
Check-In Time Zone	Display Only - Calculated
TransNet Organ Check-In Times for Related Organs	Display Only - Cascades from Database
Pancreas Graft Status	
Patient using any method of blood sugar control?	
Patient on insulin?	New field if pancreas graft status is functioning. Modified label if graft status is failed
Date insulin resumed	New field if pancreas graft status is functioning. Modified label 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	

Insulin duration of use//ST	Value or status is reported, not both
Patient on oral medication to control blood sugar	New field if pancreas graft status is functioning. Modified label if graft status is failed
Date oral medications resumed	New field if pancreas graft status is functioning. Modified label if graft status is failed
Date oral medications resumed//ST=	Value or status is reported, not both
Patient using diet to control blood sugar	New field if pancreas graft status is functioning. Modified label if graft status is failed
Date of Graft Failure	
C-Peptide Value	
C-Peptide Value://ST=	Value or status is reported, not both
Hba1c (%)	
Hba1c (%)//Status	Value or status is reported, not both
Pancreas Primary Cause of Graft Failure	
Pancreas Primary Cause of Graft Failure//Specify	
Pancreas Graft/Vascular Thrombosis	
Pancreas Infection	
Bleeding	
Anastomotic Leak	
Hyperacute Rejection	
Pancreas Acute Rejection	
Biopsy Proven Isletitis	
Pancreatitis	
Other, Specify	
Pancreatitis	
Anastomotic Leak	
Abscess or Local Infection	
Pancreas Transplant Complications: Other	Not required
Did patient have any acute rejection episodes between transplant and discharge	
Are any medications given currently for maintenance or anti-rejection	
Immunosuppression medication	
Immunosuppression medication indication	
Days of induction	

on Date: XX/XX/20XX

7:

Procurement and Transplantation Network (OPTN) collects this information in order to functions: to assess whether applicants meet OPTN Bylaw requirements for membership in compliance 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 ntrol 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 ion (Privacy Act System of Records #09-15-0055). Data collected by the private non-profit 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 Departments Automated Information Systems Security Program Handbook. The public ection of information is estimated to average 0.27 hours per response, including the time arching existing data sources, and completing and reviewing the collection of information. is burden estimate or any other aspect of this collection of information, including burden, to HRSA Information Collection Clearance Officer, 5600 Fishers Lane, Room 14N39, r paperwork@hrsa.gov.