TRF (6 Month - 5 Year) - Kidney/Pancreas - Adult
Fields to be completed by members

Form Section	Field label	Notes
Recipient Information	Organ Type	Display Only - Cascades from Database
Recipient Information	Follow-up code	Display Only - Cascades from Database
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	Display Only - Cascades from TCR
Recipient Information	SSN	Display Only - Cascades from TCR
Recipient Information	HIC	Display Only - Cascades from TCR
Recipient Information	Previous Follow-up	Display Only - Cascades from prior TRF
Recipient Information	DOB	Display Only - Cascades from TCR
Recipient Information	Birth Sex	Display Only - Cascades from TCR
Recipient Information	Tx Date	Display Only - Cascades from Database
Recipient Information	Previous Px Stat Date	Display Only - Cascades from prior TRF
Recipient Information	Transplant Discharge Date	
Recipient Information	State of Permanent Residence	
Recipient Information	Zip Code	
Provider Information	Recipient Center	Display Only - Cascades from TCR
Provider Information	Recipient Center Type	Display Only - Cascades from TCR
Provider Information	Follow-up Center Code	Display Only - Cascades from Database
Provider Information	Follow-up Center Type	Display Only - Cascades from Database
Provider Information	Physician Name	
Provider Information	NPI#	
Provider Information	Follow-up Care Provided By	
Provider Information	Follow-up Care Provided By//Specify	
Donor Information	UNOS Donor ID #	Display Only - Cascades from Database
Donor Information	Donor Type	Display Only - Cascades from Database
Donor Information	OPO	Display Only - Cascades from feedback
Patient Status	Date: Last Seen, Retransplanted or Death	
Patient Status	Patient Status	
Patient Status	If Retransplanted, choose organ(s)	
Patient Status	Primary Cause of Death	
Patient Status	Primary 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	Has the patient been hospitalized since the last patient status date	
Patient Status	Functional Status	
Patient Status	Working for income	
Patient Status	Primary Insurance at Follow-up	
Patient Status	Primary Source of Payment, Specify	
Clinical Information	HIV Serology	
Clinical Information	HIV NAT	
Clinical Information	HbsAg	
Clinical Information	HBV DNA	
Clinical Information	HBV Core Antibody	
Clinical Information	HCV Serology	
Clinical Information	HCV NAT	
Clinical Information	Graft Status	
Clinical Information	If Functioning, Most Recent Serum Creatinine	
Clinical Information	If Functioning, Most Recent Serum Creatinine://Status	Value or status is reported, not both
Clinical Information	Date of Graft Failure:	
Clinical Information	Primary Cause of Graft Failure:	
Clinical Information	Primary Cause of Graft Failure//Other, Specify:	
Clinical Information	Dialysis Since Last Follow-up	
Clinical Information	Date Maintenance Dialysis Resumed	
Clinical Information	Pancreas Graft Status	
Clinical Information	Patient on insulin?	New field if pancreas graft status is functioning. Modified label if graft status is failed

Clinical Information	Date insulin resumed	New field if pancreas graft status is functioning. Modified label if graft status is failed
Clinical Information	Total insulin dosage units	
Clinical Information	Total insulin dosage units//ST	Value or status is reported, not both
Clinical Information	Insulin duration of use	
Clinical Information	Insulin duration of use//ST	Value or status is reported, not both
Clinical Information	Patient on oral medication to control blood sugar	New field if pancreas graft status is functioning. Modified label if graft status is failed
Clinical Information	Date oral medications resumed	New field if pancreas graft status is functioning. Modified label if graft status is failed
Clinical Information	Patient using diet to control blood sugar	New field if pancreas graft status is functioning. Modified label if graft status is failed
Clinical Information	Pancreas Date of Failure	
Clinical Information	C-Peptide Value	
Clinical Information	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	Pancreas Primary Causes of Graft Failure	
Clinical Information	Specify	
Clinical Information	Pancreas Graft/Vascular Thrombosis	
Clinical Information	Pancreas Infection	
Clinical Information	Pancreas Bleeding	
Clinical Information	Anastomotic Leak	
Clinical Information	Pancreas Rejection: Acute	
Clinical Information	Pancreas Chronic Rejection	
Clinical Information	Biopsy Proven Isletitis	
Clinical Information	Pancreatitis	
Clinical Information	Patient Noncompliance	
Clinical Information	Other, Specify	
Clinical Information	Conv. From Bladder to Enteric Drain Performed	
Clinical Information	Enteric Drain Date	
Clinical Information	Pancreas Transplant Complications (Not leading to graft failure)	Display Only - Cascades from Database
Clinical Information	Pancreatitis	
Clinical Information	Anastomotic Leak	
Clinical Information	Abscess or Local Infection	
Clinical Information	Did patient have any kidney acute rejection episodes during the follow-up period	
Clinical Information	Did patient have any pancreas acute rejection episodes during the follow-up period:	
Clinical Information	Post Transplant Malignancy	
Clinical Information	Donor Related	
Clinical Information	Recurrence of Pre-Tx Tumor	
Clinical Information	De Novo Solid Tumor	
Clinical Information	De Novo Lymphoproliferative disease and Lymphoma	
Clinical Information	Were any medications given during the follow-up period for maintenance	
Immunosuppressive Information	Previous Validated Maintenance Follow-up Medications	Display Only - Cascades from Database
Immunosuppressive Information	Immunosuppression medication	
Immunosuppressive Information	Immunosuppression medication indication	

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

PUBLIC BURDEN STATEMENT:

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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 Information Collection Clearance Officer, 5600 Fishers Lane, Room 14N39, Rockville, Maryland, 20857 or paperwork@hrsa.gov.

TRF (6 Month - 5 Year) - Kidney/Pancreas - Pediatric
Fields to be completed by members

Form Section	Field label	Notes
Recipient Information	Organ Type	Display Only - Cascades from Database
Recipient Information	Follow-up code	Display Only - Cascades from Database
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	Display Only - Cascades from TCR
Recipient Information	SSN	Display Only - Cascades from TCR
Recipient Information	HIC	Display Only - Cascades from TCR
Recipient Information	Previous Follow-up	Display Only - Cascades from prior TRF
Recipient Information	DOB	Display Only - Cascades from TCR
Recipient Information	Birth Sex	Display Only - Cascades from TCR
Recipient Information	Tx Date	Display Only - Cascades from Database
Recipient Information	Previous Px Stat Date	Display Only - Cascades from prior TRF
Recipient Information	Transplant Discharge Date	
Recipient Information	State of Permanent Residence	
Recipient Information	Zip Code	
Provider Information	Recipient Center	Display Only - Cascades from TCR
Provider Information	Recipient Center Type	Display Only - Cascades from TCR
Provider Information	Follow-up Center Code	Display Only - Cascades from Database
Provider Information	Follow-up Center Type	Display Only - Cascades from Database
Provider Information	Physician Name	
Provider Information	NPI#	
Provider Information	Follow-up Care Provided By	
Provider Information	Follow-up Care Provided By//Specify	
Donor Information	UNOS Donor ID #	Display Only - Cascades from Database
Donor Information	Donor Type	Display Only - Cascades from Database
Donor Information	OPO	Display Only - Cascades from feedback
Patient Status	Date: Last Seen, Retransplanted or Death	
Patient Status	Patient Status	
Patient Status	If Retransplanted, choose organ(s)	
Patient Status	Primary Cause of Death	
Patient Status	Primary 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	Has the patient been hospitalized since the last patient status date	
Patient Status	Functional Status	
Patient Status at Time of Follow-up	Cognitive Development	
Patient Status at Time of Follow-up	Motor Development	
Patient Status	Working for income	
Patient Status	Academic Progress	
Patient Status	Academic Activity Level	
Patient Status	Primary Insurance at Follow-up	
Patient Status	Primary Source of Payment, Specify	
Clinical Information	Height Measurement Date	
Clinical Information	Height	
Clinical Information	Height//Status	Value or status is reported, not both
Clinical Information	Height Percentile	Calculated for display only
Clinical Information	Weight Measurement Date	
Clinical Information	Weight	
Clinical Information	Weight//Status	Value or status is reported, not both
Clinical Information	Weight Percentile	Calculated for display only
Clinical Information	BMI	Display Only - Cascades from Database
Clinical Information	BMI Percentile	Calculated for display only
Clinical Information	Graft Status	
Clinical Information	If Functioning, Most Recent Serum Creatinine	
Clinical Information	If Functioning, Most Recent Serum Creatinine://Status	Value or status is reported, not both

Clinical Information	Date of Graft Failure:	
Clinical Information	Primary Cause of Graft Failure:	
Clinical Information	Primary Cause of Graft Failure//Other, Specify:	
Clinical Information	Dialysis Since Last Follow-up	
Clinical Information	Date Maintenance Dialysis Resumed	
Clinical Information	Pancreas Graft Status	
Clinical Information	Patient on insulin?	New field if pancreas graft status is functioning. Modified label if graft status is failed
Clinical Information	Date insulin resumed	New field if pancreas graft status is functioning. Modified label if graft status is failed
Clinical Information	Total insulin dosage units	
Clinical Information	Total insulin dosage units//ST	Value or status is reported, not both
Clinical Information	Insulin duration of use	
Clinical Information	Insulin duration of use//ST	Value or status is reported, not both
Clinical Information	Patient on oral medication to control blood sugar	New field if pancreas graft status is functioning. Modified label if graft status is failed
Clinical Information	Date oral medications resumed	New field if pancreas graft status is functioning. Modified label if graft status is failed
Clinical Information	Patient using diet to control blood sugar	New field if pancreas graft status is functioning. Modified label if graft status is failed
Clinical Information	Pancreas Date of Failure	
Clinical Information	C-Peptide Value	
Clinical Information	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	Pancreas Primary Causes of Graft Failure	
Clinical Information	Specify	
Clinical Information	Pancreas Graft/Vascular Thrombosis	
Clinical Information	Pancreas Infection	
Clinical Information	Pancreas Bleeding	
Clinical Information	Anastomotic Leak	
Clinical Information	Pancreas Rejection: Acute	
Clinical Information	Pancreas Chronic Rejection	
Clinical Information	Biopsy Proven Isletitis	
Clinical Information	Pancreatitis	
Clinical Information	Patient Noncompliance	
Clinical Information	Other, Specify	
Clinical Information	HIV Serology	
Clinical Information	HIV NAT	
Clinical Information	HbsAg	
Clinical Information	HBV DNA	
Clinical Information	HBV Core Antibody	
Clinical Information	HCV Serology	
Clinical Information	HCV NAT	
Clinical Information	Conv. From Bladder to Enteric Drain Performed	
Clinical Information	Enteric Drain Date	
Clinical Information	Pancreas Transplant Complications (Not leading to graft failure)	
Clinical Information	Pancreatitis	
Clinical Information	Anastomotic Leak	
Clinical Information	Abscess or Local Infection	
Clinical Information	Did patient have any kidney acute rejection episodes during the follow-up period	Value or status is reported, not both

Clinical Information	Did patient have any pancreas acute rejection episodes during the follow-up period:	
Clinical Information	Is growth hormone therapy used during this follow-up period	
Clinical Information	Post Transplant Malignancy	
Clinical Information	Donor Related	
Clinical Information	Recurrence of Pre-Tx Tumor	
Clinical Information	De Novo Solid Tumor	
Clinical Information	De Novo Lymphoproliferative disease and Lymphoma	
Clinical Information	Fracture in the past year (or since last follow-up)	
Clinical Information	Specify Location and number of fractures	
Clinical Information	Spine-compression fracture	
Clinical Information	Specify Location and number of fractures	
Clinical Information	Extremity	
Clinical Information	Specify Location and number of fractures	
Clinical Information	Other	
Clinical Information	AVN (avascular necrosis)	
Immunosuppressive Information	Were any medications given during the follow-up period for maintenance	
Immunosuppressive Information	Previous Validated Maintenance Follow-up Medications	Display Only - Cascades from Database
Immunosuppressive Information	Immunosuppression medication	
Immunosuppressive Information	Immunosuppression medication indication	

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