Organ Tracking and Validating Fields to be completed by member

Form Section	Field Label
Organ Check-In	Donor ID
Organ Check-In	Organ
Organ Check-In	ABO
Organ Check-In	Facility Type
Organ Check-In	Transplant Center
Organ Check-In	Check-In Location
Organ Check-In	Received By
Organ Check-In	Comments
Organ Check-In	Was this the expected Donor ID, organ, and laterality (if applicable)?
Organ Re-ship	Donor ID
Organ Re-ship	Organ
Organ Re-ship	ABO
Organ Re-ship	Current Facility Type
Organ Re-ship	Reship by User Name
Organ Re-ship	Where is the Organ Going?
ABO Verification Document	First Anastomosis Time
ABO Verification Document	Personnel Attesting to Visual Verification
ABO Verification Document	Title of Personnel Attesting to Visual Verification
ABO Verification Document	Transplant Surgeon Name
ABO Verification Document	Transplant Surgeon Title
ABO Verification Document	Licensed Health Professional Name
ABO Verification Document	Licensed Health Professional Title

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

PUBLIC BURDEN STATEMENT:

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The private, non-profit Organ Procurement and Transplantation Network (OPTN) c the following OPTN functions: to assess whether applicants meet OPTN Bylaw requ to monitor compliance of member organizations with OPTN Obligations. An agency not required to respond to, a collection of information unless it displays a currently control number for this information collection is 0915-0157 and it is valid until XX/, required to obtain or retain a benefit per 42 CFR §121.11(b)(2). All data collected v (Privacy Act System of Records #09-15-0055). Data collected by the private non-prinumber of the Contractor's security features. The Contractor's security system me prescribed by OMB Circular A-130, Appendix III, Security of Federal Automated Information Systems Security Program Handbook. The public reporting estimated to average 0.27 hours per response, including the time for reviewing ins and completing and reviewing the collection of information. Send comments regar of this collection of information, including suggestions for reducing this burden, to Officer, 5600 Fishers Lane, Room 14N39, Rockville, Maryland, 20857 or paperwork

Notes		

ollects this information in order to perform irements for membership in the OPTN; and / may not conduct or sponsor, and a person is / valid OMB control number. The OMB XX/202X. This information collection is vill be subject to Privacy Act protection ofit OPTN also are well protected by a ets or exceeds the requirements as ormation systems, and the Departments; burden for this collection of information is tructions, searching existing data sources, ding this burden estimate or any other aspect HRSA Information Collection Clearance @hrsa.gov.