TCR - Heart/Lung - Adult Fields to be completed by members

Form Section	Field Label	N-4
		Notes Notes
Provider Information	Transplant Center Code	Display Only - Cascades from Waitlist
Provider Information	Transplant Center Type://Recipient Center	Display Only - Cascades from Waitlist
Candidate Information	Organ Registered:	Display Only - Cascades from Waitlist
Candidate Information	Date of Listing or Add:	Display Only - Cascades from Waitlist
Candidate Information	Last Name:	Cascades from Waitlist
Candidate Information	First Name:	Cascades from Waitlist
Candidate Information	Middle Initial://MI:	Not required
Candidate Information	Previous Surname:	Not required
Candidate Information	SSN:	Display Only - Cascades from Waitlist
Candidate Information	Gender Birth Sex:	Cascades from Waitlist
Candidate Information	HIC:	Not required
Candidate Information	Date of Birth://DOB:	Cascades from Waitlist
Candidate Information	State of Permanent Residence:	Cascades from Waitlist
Candidate Information	Permanent ZIP Code:	Cascades from Waitlist
Candidate Information	Ethnicity:	Cascades from Waitlist
Candidate Information	Race:	Cascades from Waitlist
Candidate Information	Citizenship:	
Candidate Information	Year of Entry to the U.S.	
Candidate Information	Year of Entry to the U.S Status//ST=	Value or status is reported, not both
Candidate Information	Country of Permanent Residence	******
Candidate Information	Highest Education Level:	
	8	
Patient Status	Patient on Life Support:	
	Life Support://Extra Corporeal Membrane	
Patient Status	Oxygenation	
Patient Status	Life Support://Intra Aortic Balloon Pump	
Patient Status	Life Support://Ventilator	
Patient Status	Life Support://Prostacyclin Infusion	
Patient Status	Life Support://Prostacyclin Inhalation	
Patient Status	Life Support://Inhaled NO	
Patient Status	Life Support://Other Mechanism, Specify	
Patient Status	Life Support:Other Mechanism//Specify:	
	Life Support://Patient on Ventricular Assist	
Patient Status	Device:	
Patient Status	Life Support://VAD Brand1:	
Patient Status	Life Support://VAD Brand2:	
Patient Status	Life Support:VAD Brand1//Specify:	
Patient Status	Life Support:VAD Brand2//Specify:	
Patient Status	Functional Status:	
Patient Status	Working for income:	
Patient Status	Previous Transplant//Organ	Display Only - Cascades from Database
		Display Only - Cascades from Database
Patient Status	Previous Transplant//Date	
Patient Status	Previous Transplant//Graft Fail Date	Display Only - Cascades from Database
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
611 1 1 7 4	Height Growth percentiles//%ile	6 1 1 16 11 1
Clinical Information	Major to be lear/Major to	Calculated for display only
Clinical Information	Weight in kg://Weight:	771
Clinical Information	Weight Status//ST=	Value or status is reported, not both
Clinical Information	Weight Growth percentiles//%ile	Calculated for display only
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 Waitlist
Clinical Information	Primary Diagnosis:	1 - J - J
	Primary Diagnosis//Specify:	
Clinical Information	3 0 1 3	
General Medical Factors	Diabetes:	
General Medical Factors	Any previous Malignancy:	
General Medical Factors	Any previous Malignancy//Specify Type:	
General Medical Factors	Any previous Malignancy//Specify:	
Heart Medical Factors	Implantable Defibrillator:	
Heart Medical Factors	Exercise Oxygen Consumption:	
		Value or status in manufacture in the state of the state
Heart Medical Factors	Exercise Oxygen Consumption//ST=	Value or status is reported, not both
Lung Medical Factors	Pan-Resistant Bacterial Lung Infection:	
Heart/Lung Medical Factors	PA (sys) mm/Hg:	
Heart/Lung Medical Factors	PA (sys) mm/Hg//ST=	Value or status is reported, not both
Heart/Lung Medical Factors	PA (sys) mm/Hg Inotropes/Vasodilators	• ,
Heart/Lung Medical Factors	PA (dia) mm/Hg:	
-		17-1
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:	
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Form Section
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Provider Information
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General Medical Factors

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:	
Heart/Lung Medical Condition	Prior Lung Surgery:	
Heart/Lung Medical Condition	If yes, check all that apply:	
Heart/Lung Medical Condition	Prior Lung 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 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.

Heart Medical Factors			
Lung Medical Factors			
Heart/Lung Medical Factors			
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Heart/Lung Medical Condition			

Heart/Lung Medical Condition Heart/Lung Medical Condition

Heart/Lung Medical Condition

OMB No. 0915-0157; Expiration Dar PUBLIC BURDEN STATEMENT:

The private, non-profit Organ Proct to assess whether applicants meet obligations. An agency may not cor OMB control number. The OMB cor required to obtain or retain a benel 15-0055). Data collected by the privaystem meets or exceeds the requip Departments Automated Informatia average 0.27 hours per response, ir of information. Send comments regularden, to HRSA Information Collect

TCR - Heart/Lung - Pediatric Fields to be completed by members

Field Label	Notes
Transplant Center Code	Display Only - Cascades from Waitlist
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 Cascades from Waitlist
First Name: Middle Initial://MI:	Not required
Previous Surname:	Not required Not required
SSN:	Display Only - Cascades from Waitlist
Gender Birth Sex:	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
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:	
Life Support://Extra Corporeal Membrane Oxygenation	
Life Support://Extra Corporeal Membrane Oxygenation Life Support://Intra Aortic Balloon Pump	
Life Support://Wentilator	
Life Support://Prostacyclin Infusion	
Life Support://Prostacyclin Inhalation	
Life Support://Intravenous Inotropes	
Life Support://Inhaled NO	
Life Support://Other Mechanism, Specify	
I if Compart Other Machanism // Specify	
Life Support:Other Mechanism//Specify: Life Support://Patient on Ventricular Assist 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:	
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:	
Height Measurement Date	
Height in cm://Height:	
Height Status//ST=	Value or status is reported, not both
Height Growth percentiles//%ile	Calculated for display only
Weight Measurement Date	
Weight in kg://Weight:	
Weight Status//ST=	Value or status is reported, not both
Weight Growth percentiles//%ile	Calculated for display only
BMI:	Display Only - Cascades from Databas
BMI://%ile	Calculated for display only
ABO Blood Group:	Display Only - Cascades from Waitlist
Primary Diagnosis:	
Primary Diagnosis//Specify: Diabetes:	
Any previous Malignancy: Any previous Malignancy//Specify Type:	
AUV DIEVIOUS MAUGUANCY//SDECITY TVDE	
Any previous Malignancy//Specify:	
Any previous Malignancy//Specify: Total Serum Albumin:	Value or status is reported, not both
Any previous Malignancy//Specify: Total Serum Albumin: Total Serum Albumin//ST=	Value or status is reported, not both
Any previous Malignancy//Specify: Total Serum Albumin: Total Serum Albumin//ST= Sudden Death: Implantable Defibrillator:	Value or status is reported, not both

Exercise Oxygen Consumption//ST=	Value or status is reported, not both
Pan-Resistant Bacterial Lung Infection:	
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
PCW (mean) mm/Hg 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:	

te: XX/XX/20XX

rement and Transplantation Network (OPTN) collects this information in order to perform the following OPTN functions: OPTN Bylaw requirements for membership in the OPTN; and to monitor compliance of member organizations with OPTN duct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid ntrol number for this information collection is 0915-0157 and it is valid until XX/XX/202X. This information collection is fit per 42 CFR §121.11(b)(2). All data collected will be subject to Privacy Act protection (Privacy Act System of Records #09-rate non-profit OPTN also are well protected by a number of the Contractor's security features. The Contractor's security rements as prescribed by OMB Circular A-130, Appendix III, Security of Federal Automated Information Systems, and the on Systems Security Program Handbook. The public reporting burden for this collection of information is estimated to scluding the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection garding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this cition Clearance Officer, 5600 Fishers Lane, Room 14N39, Rockville, Maryland, 20857 or paperwork@hrsa.gov.