TRF (Post 5-Year) - Heart/Lung - 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	Gender 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	Display Only - Cascades from prior TRE
Recipient Information	State of Permanent Residence	
•		
Recipient Information	Zip Code	D: 1 O 1 C 1 C TCD
Provider Information	Recipient Center Type	Display Only - Cascades from TCR
Provider Information	Recipient Center	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
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	Primary Cause of Death	
Patient Status	Primary Cause of Death//Specify	
Clinical Information	Graft Status	
Clinical Information	Date of Graft Failure	
Clinical Information	Primary Cause of Graft Failure	
Clinical Information	Primary Cause of Graft Failure//Other, Specify Coronary Artery Disease	
Clinical Information	Date Test Performed	Value or status is reported, not both
Clinical Information	FEV1	Value or status is reported, not both
Clinical Information	FVC	Value or status is reported, not both
Clinical Information	FEF 25-75	Value or status is reported, not both
Clinical Information	Date Test Performed	•
Clinical Information		Value or status is reported, not both
	FEV1	Value or status is reported, not both
Clinical Information	FVC	Value or status is reported, not both
Clinical Information	FEF 25-75	Value or status is reported, not both
Clinical Information	Date Test Performed	Value or status is reported, not both
Clinical Information	FEV1	Value or status is reported, not both
Clinical Information	FVC	Value or status is reported, not both
Clinical Information	FEF 25-75	Value or status is reported, not both
Clinical Information	Current Supplemental O2 requirements at rest and/or at exercise	
Clinical Information	At rest: FiO2 or Flow	Value or status is reported, not both
Clinical Information	With exercise: FiO2 or Flow	Value or status is reported, not both
Clinical Information	Chronic Dialysis	•
Clinical Information	Renal Tx since Thoracic Tx	
Clinical Information	Most Recent Serum Creatinine	Value or status is reported, not both
Clinical Information	Most Recent Serum Creatinine//Status	
Clinical Information	Post Transplant Malignancy	
Clinical Information	Donor Related	
Clinical Information	Recurrence of Pre-Tx Tumor	
Clinical Information	De Novo Solid Tumor	
Cimical information		
Clinical Information	De Novo Lymphoproliferative disease and Lymphoma	

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

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Follow-up
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Clinical Information
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information collection is 0915-0157 and it is valid until XX/XX/202X. This information collection is required to obtain or retain a ben 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). It 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 Automat Information Systems, and the Departments Automated Information Systems Security Program Handbook. The public reporting burd 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.	Oata s :ed den

Clinical Information	
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OMB No. 0915-0157; Expiration

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perform the following OPTN fun
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TRF (Post 5-Year) - Heart/Lung - Pediatric Fields to be completed by members

Field label	Notes
Organ Type	Display Only - Cascades from Database
Follow-up code	Display Only - Cascades from Database
Recipient First Name	Display Only - Cascades from TCR
Recipient Last Name	Display Only - Cascades from TCR
Recipient Middle Initial	Display Only - Cascades from TCR
SSN	Display Only - Cascades from TCR
HIC	Display Only - Cascades from TCR
Previous Follow-up	Display Only - Cascades from prior TRF
DOB	Display Only - Cascades from TCR
Gender Birth Sex	Display Only - Cascades from TCR
Tx Date	Display Only - Cascades from Database
Previous Px Stat Date	Display Only - Cascades from prior TRF
Transplant Discharge Date	
State of Permanent Residence	
Zip Code	Disalas Onlas Casas des frança anias TDE
Previous Follow-up	Display Only - Cascades from prior TRF
Previous Px Stat Date	Display Only - Cascades from prior TRF
Recipient Center Type	Display Only - Cascades from TCR
Recipient Center	Display Only - Cascades from TCR
Follow-up Center Code	Display Only - Cascades from Database
Follow-up Center Type	Display Only - Cascades from Database
UNOS Donor ID #	Display Only - Cascades from Database
Donor Type	Display Only - Cascades from Database
OPO	Display Only - Cascades from feedback
Date: Last Seen, Retransplanted or	
Death	
Patient Status	
Primary Cause of Death	
Primary Cause of Death//Specify	
Functional Status	
Cognitive Development	
Motor Development	
Height Measurement Date	
Height	
Height//Status	Value or status is reported, not both
Height Percentile	Calculated for display only
Weight Measurement Date	Calculated for display only
Weight	
Weight//Status	Value or status is reported, not both
Weight Percentile	Calculated for display only
BMI	Display Only - Cascades from Database
BMI	1 3 3
Graft Status	Calculated for display only
Date of Graft Failure	
Drimowy Cours of Court E 1	
Primary Cause of Graft Failure	
Primary Cause of Graft Failure//Other, Specify	
Coronary Artery Disease Since Last Follow-up	Walter an extension of the control o
Date Test Performed	Value or status is reported, not both
FEV1	Value or status is reported, not both Value or status is reported, not both
FVC	willing or craftic ic reported not both
PPP 25 75	•
	Value or status is reported, not both
Date Test Performed	Value or status is reported, not both Value or status is reported, not both
Date Test Performed FEV1	Value or status is reported, not both Value or status is reported, not both Value or status is reported, not both
Date Test Performed FEV1 FVC	Value or status is reported, not both
Date Test Performed FEV1 FVC	Value or status is reported, not both Value or status is reported, not both Value or status is reported, not both
Date Test Performed FEV1 FVC FEF 25-75	Value or status is reported, not both
Date Test Performed FEV1 FVC FEF 25-75 Date Test Performed	Value or status is reported, not both
Date Test Performed FEV1 FVC FEF 25-75 Date Test Performed FEV1	Value or status is reported, not both
Date Test Performed FEV1 FVC FEF 25-75 Date Test Performed FEV1 FVC	Value or status is reported, not both
Date Test Performed FEV1 FVC FEF 25-75 Date Test Performed FEV1 FVC FEF 25-75	Value or status is reported, not both
Date Test Performed FEV1 FVC FEF 25-75 Date Test Performed FEV1 FVC FEF 25-75 requirements at rest and/or at exercise	Value or status is reported, not both
Date Test Performed FEV1 FVC FEF 25-75 Date Test Performed FEV1 FVC FFF 25-75 requirements at rest and/or at exercise At rest: FiO2 or Flow	Value or status is reported, not both
FEF 25-75 Date Test Performed FEV1 FVC FEF 25-75 Date Test Performed FEV1 FVC FFF 25-75 requirements at rest and/or at exercise At rest: FiO2 or Flow With exercise: FiO2 or Flow	Value or status is reported, not both

Renal Tx since Thoracic Tx	
Most Recent Serum Creatinine	
Most Recent Serum Creatinine//Status	
Diabetes onset during the follow-up period	
If yes, insulin dependent	
Post Transplant Malignancy	
Donor Related	
Recurrence of Pre-Tx Tumor	
De Novo Solid Tumor	
De Novo Lymphoproliferative disease and Lymphoma	

Date: XX/XX/20XX

ocurement and Transplantation Network (OPTN) collects this information in order to inctions: to assess whether applicants meet OPTN Bylaw requirements for membership impliance of member organizations with OPTN Obligations. An agency may not conduct required to respond to, a collection of information unless it displays a currently valid control number for this information collection is 0915-0157 and it is valid until silection is required to obtain or retain a benefit per 42 CFR §121.11(b)(2). All data icy Act protection (Privacy Act System of Records #09-15-0055). Data collected by the a well protected by a number of the Contractor's security features. The Contractor's set the requirements as prescribed by OMB Circular A-130, Appendix III, Security of Systems, and the Departments Automated Information Systems Security Program burden for this collection of information is estimated to average 0.27 hours per reviewing instructions, searching existing data sources, and completing and reviewing and comments regarding this burden estimate or any other aspect of this collection of ins for reducing this burden, to HRSA Information Collection Clearance Officer, 5600 cville, Maryland, 20857 or paperwork@hrsa.gov.