

Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details
Details

[illegible]

Organ Data
Organ Data
Organ Data
Verify ABO
Verify ABO Subtype

OMB No. 0915-0157; Expiration Date:

PUBLIC BURDEN STATEMENT:

The private, non-profit Organ Procurement and Transplantation Network (OPTN) functions: to assess whether applicant member organizations with OPTN Obligation of information unless it displays a current and it is valid until XX/XX/202X. This information will be subject to Privacy Act protection and well protected by a number of the Confidentiality prescribed by OMB Circular A-130, Applicable Information Systems Security Program requirements in hours per response, including the time to provide information. Send comments regarding reducing this burden, to HRSA Information Management at paperwork@hrsa.gov.

Initial Donor Registration
Fields to be completed by members

Field Label	Notes
Donor Id	Display only - Calculated
OPO	
Donor hospital	
Time zone	
Is Daylight Savings Time observed?	
Last Name	
First Name	
Middle Initial	
KDPI	Display only - Calculated
ABO	
Date of birth	
Age (Value)	
Age (Unit)	
Height (ft)	
Height (in)	
Height (cm)	
Weight (lbs)	
Weight (kgs)	
BMI	Display only - Calculated
Cause of death	
Cause of death - Specify	
Admit date	
time	
Mechanism of injury	
Pronouncement of death date	
time	
Circumstance of death	
Cold ischemic type	Display only - Calculated
OR Date (status)	
OR Date (date)	
OR Date (time)	
Recovery Facility	
Recovery Facility (Alternate Facility Text)	
Donor meets DCD criteria	
Controlled DCD (status)	
Withdrawal of life-sustaining medical support (date)	
Withdrawal of life-sustaining medical support (time)	
Cessation of circulation, (date)	
Cessation of circulation, (time)	
Normothermic regional perfusion (NRP) (status)	

Initiation of NRP (date)	
Initiation of NRP (time)	
Cardiac arrest / downtime?	
Cardiac arrest / downtime duration (min)	
CPR administered?	
CPR duration (min)	
Ethnicity	
Race	
Was the donor born in a country currently classified as endemic for Chagas disease by the CDC?	
Donor Highlights	
Admission course comments	
History of diabetes	
History of cancer	
History of cancer, specify	
History of hypertension	
Compliant with treatment	
History of coronary artery disease (CAD)	
Previous gastrointestinal disease	
Chest trauma	
Cigarette use (>20 pack years) ever	
And continued in last six months	
Heavy alcohol use (2+ drinks/day)	
I.V. drug usage	
According to the OPTN policy in effect on the date of referral, does the donor have risk factors for blood-borne disease transmission:	Display only - Calculated
Sex (i.e., any method of sexual contact, including vaginal, anal, and oral) with a person known or suspected to have HIV, HBV, or HCV infection	
Man who has had sex with another man	
Sex in exchange for money or drugs	
Sex with a person who had sex in exchange for money or drugs	
Drug injection for nonmedical reasons	
Sex with a person who injected drugs for nonmedical reasons	
Incarceration (confinement in jail, prison, or juvenile correction facility) for ≥72 consecutive hours	
Child breastfed by a mother with HIV infection	
Child born to a mother with HIV, HBV, or HCV infection	
Unknown medical or social history	

History of myocardial infarction	
Medical and social history comments	
Begin Date	
Begin Time	
End Date	
End Time	
Average or Actual BP - Systolic	
Average or Actual BP - Diastolic	
Heart Rate - Low (bpm)	
Heart Rate - High (bpm)	
High Blood Pressure - Systolic	
High Blood Pressure - Diastolic	
Duration at high (minutes)	
Low Blood Pressure - Systolic	
Low Blood Pressure - Diastolic	
Duration at low (minutes)	
Core Body Temp - Low	
Core Body Temp - High	
Core Body Temp - Unit	
Urine output (cc/hour) - Low	
Urine output (cc/hour) - High	
CVP - Low (mm/Hg)	
CVP - High (mm/Hg)	
PA Pressure - Systolic - Low (mm/Hg)	
PA Pressure - Systolic - High (mm/Hg)	
PA Pressure - Diastolic - Low (mm/Hg)	
PA Pressure - Diastolic - High (mm/Hg)	
PCWP - Low (mm/Hg)	
PCWP - High (mm/Hg)	
PAMP - Low (mm/Hg)	
PAMP - High (mm/Hg)	
Cardiac Output - Low (L/min)	
Cardiac Output - High (L/min)	
Cardiac Input - Low (L/min/sq. m)	
Cardiac Input - High (L/min/sq. m)	
Date	
Time	
Average or Actual BP - Systolic	
Average or Actual BP - Diastolic	
Heart Rate (bpm)	
Core Body Temp (Value)	
Core Body Temp (Unit)	
Urine output (cc/hr)	

CVP (mm/Hg)	
PA Pressure - Systolic (mm/Hg)	
PA Pressure - Diastolic (mm/Hg)	
PCWP (mm/Hg)	
PAMP (mm/Hg)	
Cardiac Output (L/min)	
Cardiac Input (L/min/sq.m)	
Date	
Time	
Average or Actual BP - Systolic	
Average or Actual BP - Diastolic	
Heart Rate (bpm)	
Mean arterial pressure (MAP)	
Oxygen saturation (SpO2) - (range)	
Vital Signs Comments	
Date	
Time	
WBC (thous/mcL)	
RBC (mill/mcL)	
HgB (g/dL)	
Hct (%)	
Plt (thous/mcL)	
Bands (%)	
Date	
Time	
Serum Sodium (mEq/L)	
K+ (mmol/L)	
Cl (mmol/L)	
CO2 (mmol/L)	
BUN (mg/dL)	
Creatinine (mg/dL)	
Glucose (mg/dL)	
Total Bilirubin (mg/dL)	
Direct Bilirubin (mg/dL)	
Indirect Bilirubin (mg/dL)	
SGOT (AST) (u/L)	
SGPT (ALT) (u/L)	
Alkaline phosphatase (u/L)	
GGT (u/L)	
LDH (u/L)	
Albumin (g/dL)	
Total protein (g/dL)	
Prothrombin (PT) (seconds)	

INR	
PTT (seconds)	
Serum Amylase (u/L)	
Serum Lipase (u/L)	
Serum Lipase Upper Normal Limit (u/L)	
Date	
Time	
Color	
Appearance	
pH	
Specific gravity	
Protein	
Protein - Specify	
Glucose	
Glucose - Specify	
Blood	
Blood - Specify	
RBC	
RBC - Specify	
WBC	
WBC - Specify	
Epith (%)	
Epith (%) - Specify	
Casts	
Casts - Specify	
Bacteria	
Bacteria - Specify	
Leukocyte esterase	
Leukocyte esterase - Specify	
Date	
Time	
pH	
PaCO2 (mmHg)	
PaO2 (mmHg)	
HCO3 (mEq/L)	
SaO2 (%)	
Mode	
Mode - Specify	
FiO2 (%)	
RR	
Vt (cc)	
PEEP (cmH2O)	
Date	

Time	
CPK (u/L)	
CK-MB (ng/mL)	
Troponin I (ng/mL)	
Troponin T (ng/mL)	
Toxicology Screen	
Toxicology Screen - Results	
HbA1c (%) - Value	
HbA1c (%) - Date	
HbA1C (%) - Time	
Other labs - Specify	
Date	
Time	
Type	
Type - Specify	
Result	
Comments	
Inotropic Medication	
Inotropic Medication - Specify	
Begin Date	
Begin Time	
End Date	
End Time	
Value	
Units	
I.V. fluids (cc/hour)	
Is there dextrose in I.V. fluids?	
Steroids	
Steroids - Specify	
Diuretics	
Diuretics - Specify	
T3	
T4	
Insulin	
Insulin - Begin Date	
Insulin - Begin Time	
Insulin - End Date	
Insulin - End Time	
Antihypertensives	
Vasodilators	
Vasodilators - Begin Date	
Vasodilators - Begin Time	
Vasodilators - End Date	

Vasodilators - End Time	
DDAVP	
Arginine vasopressin	
Arginine vasopressin - Begin Date	
Arginine vasopressin - Begin Time	
Arginine vasopressin - End Date	
Arginine vasopressin - End Time	
Total Parenteral Nutrition	
Heparin	
Heparin - Begin Date	
Heparin - Begin Time	
Heparin - End Date	
Heparin - End Time	
Heparin - Units	
Other/specify 1	
Other/specify 2	
Other/specify 3	
Transfusions prior to ABO determination	
Total number	
Total volume	
Transfusions following ABO determination	
Total number	
Total volume	
Other blood products	
Other blood products - Specify	
Were any support therapies initiated?	
Support therapy	
Begin date	
Begin time	
End date	
End time	
Duration	Display only - Calculated
Anti-HBc	
Anti-HBc - Hemodilution	
HBV NAT	
HBV NAT - Hemodilution	
HBsAg	
HBsAg - Hemodilution	
HBsAb	
HBsAb - Hemodilution	
Anti-HCV	
Anti-HCV - Hemodilution	
HCV NAT	

HCV NAT - Hemodilution	
Anti-HIV I/II	
Anti-HIV I/II - Hemodilution	
HIV Ag/Ab Combo	
HIV Ag/Ab Combo - Hemodilution	
HIV NAT	
HIV NAT - Hemodilution	
Anti-HTLV I/II	
Anti-HTLV I/II - Hemodilution	
HTLV NAT	
HTLV NAT - Hemodilution	
Anti-CMV	
Anti-CMV - Hemodilution	
Syphilis	
Syphilis - Hemodilution	
EBV (VCA) (IgG)	
EBV (VCA) (IgG) - Hemodilution	
EBV (VCA) (IgM)	
EBV (VCA) (IgM) - Hemodilution	
EBNA	
EBNA - Hemodilution	
Toxoplasma (IgG)	
Toxoplasma (IgG) - Hemodilution	
Chagas-T. cruzi Ab Screen	
Chagas-T. cruzi Ab Screen - Hemodilution	
Chagas NAT	
Chagas NAT - Hemodilution	
West Nile	
West Nile - Hemodilution	
West Nile NAT	
West Nile NAT - Hemodilution	
Strongyloides Strongyloides Ab	
Strongyloides Strongyloides Ab - Hemodilution	
Was COVID-19 (SARS-CoV-2) testing performed on the donor?	
Specimen Date	
Specimen Time	
Specimen Type	
Specimen Type - Specify	
Hemodiluted Specimen	
Test Method	
Test Method - Specify	
Result	

Comments	
Was T. cruzi (Chagas) Ab diagnostic testing performed on the donor?	
Specimen Date	
Specimen Time	
Specimen Type	
Hemodiluted Specimen	
Test Method	
Test Method - Specify	
Result	
Comments	
Test Type	
Test Type - Specify	
Test Date	
Test Time	
Diagnostic evaluation/comments	
Attach medical image	
Attachment Description	
Attachment File	
Study	
Attachment Description	
Attachment File	
Attachment Category	
A1	
A2	
B1	
B2	
BW4	
BW6	
C1	
C2	
DR1	
DR2	
DR51	
DR51_2	
DR52	
DR52_2	
DR53	
DR53_2	
DQB1	
DQB1_2	
DQA1	
DQA1_2	

DPB1	
DPB1_2	
DPA1	
DPA1_2	
Is there time for a preliminary crossmatch	
Warm ischemic time (minutes)	
Core cooling flush used	
Abdominal aorta flush time (in situ), (date)	
Abdominal aorta flush time (in situ), (time)	
Portal vein flush time (in situ), (date)	
Portal vein flush time (in situ), (time)	
Thoracic aorta flush time (in situ), (date)	
Thoracic aorta flush time (in situ), (time)	
Pulmonary artery flush time (in situ), (date)	
Pulmonary artery flush time (in situ), (time)	
Left kidney biopsy	
% Global glomerulosclerosis	Read only - calculated
Biopsy type	
Number of glomeruli	
Pump Date	
Pump Time	
Flow (cc/min)	
Pressure (mmHg) - Systolic	
Pressure (mmHg) - Diastolic	
Resistance	
Left kidney pump device	
Left kidney pump device - Specify	
Left kidney pump solution	
Left kidney pump solution - Specify	
Left kidney tissue preparation technique	
Left kidney number of globally sclerotic glomeruli	
Left kidney nodular mesangial glomerulosclerosis	
Left kidney interstitial fibrosis/tubular atrophy (IFTA)	
Left kidney vascular disease (% luminal narrowing)	
Left kidney arteriolar hyalinosis	
Left kidney cortical Necrosis	
Left kidney % Cortical Necrosis	
Left kidney Fibrin thrombi	
Left kidney % Fibrin thrombi	
Left kidney comments	
Right kidney biopsy	
% Global glomerulosclerosis	Read only - calculated
Biopsy type	

Number of glomeruli	
Pump Date	
Pump Time	
Flow (cc/min)	
Pressure (mmHg) - Systolic	
Pressure (mmHg) - Diastolic	
Resistance	
Right kidney pump device	
Right kidney pump device - Specify	
Right kidney pump solution	
Right kidney pump solution - Specify	
Right kidney tissue preparation technique	
Right kidney number of globally sclerotic glomeruli	
Right kidney nodular mesangial glomerulosclerosis	
Right kidney interstitial fibrosis/tubular atrophy (IFTA)	
Right kidney vascular disease (% luminal narrowing)	
Right kidney arteriolar hyalinosis	
Right kidney cortical Necrosis	
Right kidney % Cortical Necrosis	
Right kidney Fibrin thrombi	
Right kidney % Fibrin thrombi	
Right kidney comments	
Pancreas comments	
Liver Biopsy	
Macrosteatosis %	
Liver Biopsy comments	
Liver Comments	
Intestine comments	
LV ejection fraction (%)	
Method	
Shortening fraction (SF) (%)	
Septal wall thickness (cm)	
LV posterior wall thickness (cm)	
Heart comments	
Date intubated	
Time intubated	
Length of left lung (cm)	
Length of right lung (cm)	
Aortic knob width (cm)	
Diaphragm width (cm)	
Chest circ./landmark (cm)	
Dist. RCPA to LCPA (cm)	
Chest X-ray	

Left lung comments	
Right lung comments	
VCA organs comments	
ABO	
ABO	

XX/XX/20XX

ment and Transplantation Network (OPTN) collects this information in order to perform the following
 applicants meet OPTN Bylaw requirements for membership in the OPTN; and to monitor compliance of
 gations. An agency may not conduct or sponsor, and a person is not required to respond to, a collection
 ently valid OMB control number. The OMB control number for this information collection is 0915-0157
 formation collection is required to obtain or retain a benefit per 42 CFR §121.11(b)(2). All data collected
 n (Privacy Act System of Records #09-15-0055). Data collected by the private non-profit OPTN also are
 tractor's security features. The Contractor's security system meets or exceeds the requirements as
 ethod III, Security of Federal Automated Information Systems, and the Departments Automated
 Handbook. The public reporting burden for this collection of information is estimated to average 0.27
 for reviewing instructions, searching existing data sources, and completing and reviewing the collection
 ling this burden estimate or any other aspect of this collection of information, including suggestions for
 tion Collection Clearance Officer, 5600 Fishers Lane, Room 14N39, Rockville, Maryland, 20857 or