

**OPTN Renal Waiting Time Reinstatement For  
Fields to be completed by members**

| Form Section            | Field Label  |
|-------------------------|--|
| OPTN Renal Waiting Time | CANDIDATE NAME   |
| OPTN Renal Waiting Time | CANDIDATE SSN  |
| OPTN Renal Waiting Time | TRANSPLANT PROGRAM NAME/CODE   |
| OPTN Renal Waiting Time | DATE OF TRANSPLANT   |
| OPTN Renal Waiting Time | Patient has been re-listed   |
| OPTN Renal Waiting Time | A graft failure date, which is within 90 days of transplant, has been reported in TIEDI  |
| OPTN Renal Waiting Time | Date of graft failure  |
| OPTN Renal Waiting Time | OPTION 1: Kidney graft removal within 90 days of transplantation   |
| OPTN Renal Waiting Time | Date of kidney graft removal   |
| OPTN Renal Waiting Time | Operative report of removal of the transplanted kidney   |
| OPTN Renal Waiting Time | OPTION 2: Kidney graft failure within 90 days of transplantation followed by non-function of the organ, evidenced by maintenance of the patient on dialysis or a creatinine clearance level/GFR $\leq$ 20 mL/min |
| OPTN Renal Waiting Time | Within the first 90 days of transplant   |
| OPTN Renal Waiting Time | TRANSPLANT PHYSICIAN/SURGEON SIGNATURE   |
| OPTN Renal Waiting Time | DATE   |
| OPTN Renal Waiting Time | TRANSPLANT PHYSICIAN/SURGEON NAME (Please print or type)   |
| OPTN Renal Waiting Time | Transplant Program Contact Name  |
| OPTN Renal Waiting Time | Transplant Program Contact Email   |
| OPTN Renal Waiting Time | Transplant Program Contact Phone Number  |

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 for the following functions: to assess whether applicants meet OPTN Bylaw requirements for membership in the OPTN 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. This information collection is required to obtain or retain a benefit per 42 CFR §121.11(b) Act protection (Privacy Act System of Records #09-15-0055). Data collected by the private non-profit OPTN is protected by the Contractor's security features. The Contractor's security system meets or exceeds the requirements of a Security of Federal Automated Information Systems, and the Department's Automated Information System. The burden for this collection of information is estimated to average 0.07 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, 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 the burden, to Washington Headquarters Office of Management and Budget, Paperwork Project Director (0915-0157), Washington, DC 20503.

reporting burden for this collection of information is estimated to average 0.27 hours per response, including reviewing existing data sources, searching existing data sources, gathering the data, reviewing the collection of information, and completing and reviewing the collection of information. Send comments or other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Fishers Lane, Room 14N39, Rockville, Maryland, 20857 or [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov).

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tion in order to perform the following OPTN  
; and to monitor compliance of member  
quired to respond to, a collection of information  
a collection is 0915-0157 and it is valid until  
y)(2). All data collected will be subject to Privacy  
OPTN also are well protected by a number of the  
is prescribed by OMB Circular A-130, Appendix III,  
ystems Security Program Handbook. The public  
cluding the time for reviewing instructions.

