## Pediatric Heart and HeartLung Status 1A Initial Justific Fields to be completed by members

Form Section	Field Label
1A Justification Status	Form title
1A Justification Status	Case number
1A Justification Status	Submitted date
1A Justification Status	Resolved date
1A Justification Status	Status
1A Justification Status	Effective
1A Justification Information	Transplant Center
1A Justification Information	Name
1A Justification Information	Date of birth
1A Justification Information	Waitlist ID
1A Justification Information	SSN
1A Justification Information	АВО
1A Justification Diagnosis	Diagnosis
1A Justification Criteria	By criteria
1A Justification Criteria	Congenital Heart Disease Diagnosis (Check all that apply)
1A Justification Criteria	Other
1A Justification Criteria	Dobutamine
1A Justification Criteria	Dopamine
1A Justification Criteria	Milrinone

1A Justification Criteria	Epinephrine
1A Justification Criteria	Norepinephrine (Levophed)
1A Justification Criteria	IV Nitroglycerin
1A Justification Criteria	Nesiritide (Natrecor)
1A Justification Criteria	Nitroprusside (Nipride, Nitropress)
1A Justification Criteria	Phenylephrine (Neo-Synephrine)
1A Justification Criteria	Vasopressin (Pitressin)
1A Justification Criteria	Requires assistance of a mechanical circulatory support device
1A Justification Criteria	By exception
1A Justification Justification Narrative	Justification narrative
1A Justification Authorization	Transplant physician name
1A Justification Authorization	Transplant physician NPI
1A Justification Authorization	Email decision to

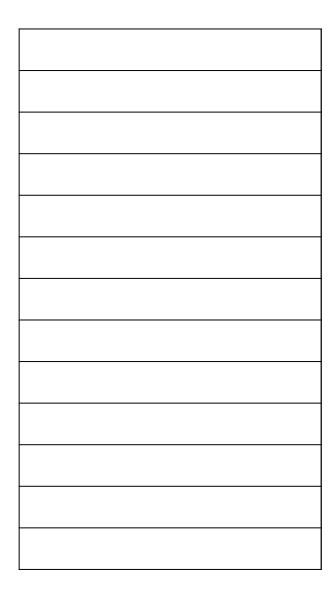
## OMB No. 0915-0157; Expiration Date: XX/XX/20XX

## PUBLIC BURDEN STATEMENT:

The private, non-profit Organ Procurement and Transplantation Network (OPTN) collects this informa 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 requirements it displays a currently valid OMB control number. The OMB control number for this information XX/XX/202X. 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 in Contractor's security features. The Contractor's security system meets or exceeds the requirements a Security of Federal Automated Information Systems, and the Departments Automated Information Sy reporting burden for this collection of information is estimated to average 0.27 hours per response, ir searching existing data sources, and completing and reviewing the collection of information. Send cor 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.

## cation Form

Notes		
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ition in order to perform the following OPTN ; and to monitor compliance of member uired to respond to, a collection of information n collection is 0915-0157 and it is valid until i)(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, /stems Security Program Handbook. The public ncluding the time for reviewing instructions, nments regarding this burden estimate or any Information Collection Clearance Officer, 5600