

Adult Heart and HeartLung Status 3 Criteria 2 Extension Justification F
Fields to be completed by members

Form Section	Field Label
Status 3 Extension Criteria 2	Multiple inotropes or a single high dose inotrope and hemodynamic monitoring
Status 3 Extension Criteria 2	Select one of the following: Candidate has an invasive pulmonary artery catheter/Candidate has daily hemodynamic monitoring to measure cardiac output and left ventricular filling pressures
Status 3 Extension Criteria 2	Candidate is supported by either: A continuous infusion of at least one high dose intravenous inotrope/A continuous infusion of at least two intravenous inotropes
Status 3 Extension Criteria 2	Was the candidate on inotropic or mechanical support at the time cardiac index was obtained?
Status 3 Extension Criteria 2	Cardiac index
Status 3 Extension Criteria 2	Cardiac index - Test Date
Status 3 Extension Criteria 2	Cardiac index - Test Time
Status 3 Extension Criteria 2	Pulmonary capillary wedge pressure
Status 3 Extension Criteria 2	Pulmonary capillary wedge pressure - Test Date
Status 3 Extension Criteria 2	Pulmonary capillary wedge pressure - Test Time
Status 3 Extension Criteria 2	Systolic blood pressure
Status 3 Extension Criteria 2	Systolic blood pressure - Test Date
Status 3 Extension Criteria 2	Systolic blood pressure - Test Time
Status 3 Extension Criteria 2	Select one of the following: Candidate has an invasive pulmonary artery catheter/Candidate has daily hemodynamic monitoring to measure cardiac output and left ventricular filling pressures

Status 3 Extension Criteria 2	Candidate is supported by either: A continuous infusion of at least one high dose intravenous inotrope/A continuous infusion of at least two intravenous inotropes
Status 3 Extension Criteria 2	Within 48 hours prior to the status expiring, either of the following are true: Cardiac index less than 2.2 L/min/m ² on the current medical regimen/Failed attempt to wean the inotrope support documented by at least one of the following

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) (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 reporting burden for this collection of information is estimated to average 0.27 hours per response, including reviewing existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate 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.

Form Medical Urgency Data

Notes
Display Only - Cascades from database
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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
) (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
including the time for reviewing instructions,
nments regarding this burden estimate or any
Information Collection Clearance Officer, 5600