Patient Details Show/Hide Anno	Hidden Show tations Stickies: Toggle All Toggle Ope	n Toggle Resolved		
Form 1: Lis	ting	Toggle Question Year/Info	Print this Form	Not Started
1	Listing Date  MM/DD/YYYY			
	WIW/DB/TTT		Question	Added: 01 JAN 1993 LISTDATE
Height and We	eight			LIGIDALE
2	Height Centimeters		Question Added: 01 JAN 1993	Calculated
	<ul><li>Inches</li></ul>	HTLISTU  Missing Rease  ○ Not Done  ○ Unknown	on: HTLIST	BSA: <b>n/a</b> BMI: <b>n/a</b>
3	Weight	wt⊔stu Missing Rease ○ Not Done	Question Added: 01 JAN 1993 on:	
		Unknown	WTLIST	
	ect only one primary reason for listing.	CHD too high risk for palliative surgice Growth failure due to the heart diseased Hypercyanosis without further palliations Malignant arrhythmia Medically refractory heart failure Plastic bronchitis Progressive liver disease Progressive pulmonary hypertension Protein losing enteropathy Unknown Other, specify	se ve surgical PRMLSOTH	Added: 01 SEPT 2015 PRM_LIST
4a Medi	failure 0	Both Diastolic Failure Systolic Failure Jnknown		
			Question A	Added: 01 SEPT 2015 PRMMRHF

# **Surgeries Prior to Listing**

Did the patient have any cardiac surgery prior to listing? No Unknown

Question Added: 01 JAN 1993 HXSURG

urgery Details				
5 If Congenital cardiac surgery, specify surgery:	<ul> <li>AP Shunt (including BT Shunt, Modif Waterson Shunt, Pott's Shunt, Centr MEE procedure)</li> <li>Arterial switch operation</li> <li>ASD Repair</li> <li>Atrial switch (Senning/Mustard)</li> <li>CABG</li> <li>Complete AV Septal Defect Repair</li> <li>Congenitally Corrected Transposition (classic)</li> <li>Congenitally Corrected Transposition (double switch)</li> <li>Damus Kaye Stansel (DKS)</li> <li>d-Transposition of the Great Vessels</li> <li>Ebstein's Anomaly Repair</li> <li>Fontan Procedure</li> <li>Glenn Procedure</li> <li>Hybrid Palliation</li> <li>Norwood Stage I: BT Shunt</li> <li>Norwood Stage I: Sano/RV-PA condition</li> <li>PA Banding</li> <li>TOF/DORV/RVOTO Repair</li> <li>Truncus Arteriosus Repair</li> <li>Valve Replacement</li> <li>VSD Repair</li> <li>Other, specify</li> </ul>	n Repair n Repair n Repair		SURGER
5 Date of Surgery			Missing Reason:  Unknown	
				SURGDT
Congenital cardiac surgery, d- Transposition of the Great Vessels Repair	<ul><li>Arterial Switch Operation</li><li>Atrial Switch (Senning/Mustard)</li></ul>	LSATTERL LSATRIAL		
	<ul> <li>Aortic Valve Replacement</li> <li>Mitral Valve Replacement</li> <li>Pulmonary Valve Replacement</li> <li>Tricuspid Valve Replacement</li> <li>Other, specify</li> </ul>	LSAORTIC LSMITRAL LSPULMV LSTRICV LSVROTH LSVROTSP		

Homograft Tissue Yes
in Aortic Valve No
Replacement? Unknown

LSAORHOM

Status Detai	ls at Listing		
6a	Status at Listing	<ul><li>Brazil</li><li>Canada</li><li>United Kingdom</li><li>United States</li></ul>	
			Question Added: 01 JAN 2010 LSCNTRY
6a.i	Brazil	<ul><li>Non-Priority</li><li>Priority</li></ul>	
			Question Added: 01 JAN 2010 LSBRZ_ST
6a.ii	Canada	<ul><li>1</li><li>2</li><li>3</li><li>3.5</li><li>4</li><li>4S</li></ul>	
			Question Added: 01 JAN 2005 LSCA_ST
6a.iii	United Kingdom	<ul><li>Routine</li><li>Urgent</li></ul>	
			Question Added: 01 JAN 2005 LSUK_ST
6a.iv	Status at Listing, US	<ul> <li>1 (this option is only for listings prior to 1999)</li> <li>1A</li> <li>1B</li> <li>2</li> <li>7</li> </ul>	
			Question Added: 01 JAN 1993 STATLIST
6b Was pation	ent in or out of hospital at time of listing?	<ul><li>In hospital</li><li>Out of hospital</li></ul>	
			Question Added: 01 JAN 1993 SLHOSP
6b.i w	as patient in the ICU at time of listing?	<ul><li>Yes</li><li>No</li><li>Unknown</li></ul>	

6b.ii

Did the patient require • Yes

mechanical ventilation?

continuous invasive No

Unknown

Question Added: 01 JAN 1999

Question Added: 01 JAN 1993 SLVENT Did the patient require Yes continuous inotropes at time of No listing? Unknown Question Added: 01 JAN 1993 Dose Unknown **Inotropes Dose** 6c.i High Dose or Multiple IV Single Low Dose Question Added: 01 JAN 2005 SLINODS Did the patient have ductal • Yes 6d dependent pulmonary or No systemic circulation, with ductal Ounknown patency maintained by stent or

prostaglandin infusion?

Question Added: 01 SEPT 2015 SLDDPSC

		Recipient B	lood Type	
<b>Donor Blood Type</b>	Α	В	AB	0
Α	ABO compatible	ABO incompatible	ABO compatible	ABO incompatible
В	ABO incompatible	ABO compatible	ABO compatible	ABO incompatible
AB	ABO incompatible	ABO incompatible	ABO compatible	ABO incompatible
0	ABO compatible	ABO compatible	ABO compatible	ABO compatible

6e Was patient listed for an ABO Incompatible transplant?	<ul><li>Yes</li><li>No</li><li>Unknown</li></ul>		Question Added: 01 JAN 2010
6f Was patient on a VAD or ECMO at time of listing?	<ul><li>□ VAD</li><li>□ ECMO</li><li>□ Not on support at time of listing</li></ul>	SLVAD SLECMO SLNOMCSD	LSABOINC
6f.i Specify initiation date (VAD)			Question Added: 01 JAN 1993  Missing Reason:  Unknown  Question Added: 01 JAN 1993
6f.ii Specify initiation date (ECMO)			Missing Reason: Unknown  Question Added: 01 JAN 2005 SLECMODT
Was patient listed for DCD (Donation after Cardiac Death) organ?	<ul> <li>Yes</li> <li>No</li> <li>Unknown</li> <li>This is not current practice at our center</li> <li>Not Applicable</li> </ul>		

Question Added: 01 SEPT 2015

						LSDCD
Infectiou	is Disease Screening					
7a	HIV Serology	<ul><li>Negative Unknown</li></ul>	O Not Done	Opositive		
	210/2					Question Added: 01 JAN 1993
7b	CMV Serology	<ul><li>Negative Unknown</li></ul>	<ul><li>Not Done</li></ul>	<ul><li>Positive</li></ul>		Question Added: 01 JAN გეგვ
7c	CMV PCR	Negative Unknown	O Not Done	Positive		Question, laude. Or or at Chito
						Question Added: 01 4600 2010
7d	EBV Serology	<ul><li>Negative Unknown</li></ul>	<ul><li>Not Done</li></ul>	<ul><li>Positive</li></ul>		
-	EBV PCR	O Nonethan	O Net Dema	O Desiries		Question Added: 01 JAN 1993
7e	EBVIOR	<ul><li>Negative</li><li>Unknown</li></ul>	<ul><li>Not Done</li></ul>	<ul><li>Positive</li></ul>		
c	IFA Toxo		- N 1 B	0 D '''		Question Added: 01 JABV2010
7f	Toxoplasma testing	<ul><li>Negative</li><li>Unknown</li></ul>	<ul><li>Not Done</li></ul>	<ul><li>Positive</li></ul>		
_	HBs Ag		0.11.15	0 5		Question Added: 01 JAN <sub>T</sub> 3983
7g	Hepatitis B surface antigen	<ul><li>Negative</li><li>Unknown</li></ul>	<ul><li>Not Done</li></ul>	<ul><li>Positive</li></ul>		Outstier Added: 04 JAN 4003
	HB core Ab	O No mations	O Net Dane	O Danitius		Question Added: 01 JAAB\$383
7h	Hepatitis B core antibody	<ul><li>Negative</li><li>Unknown</li></ul>	<ul><li>Not Done</li></ul>	<ul><li>Positive</li></ul>		Outstier Added: 04 JAN 4002
<b></b> :	HBs Ab	O No mations	O Net Dane	O Danitius		Question Added: 01 JANB1993
/	Hepatitis B surface antibody	<ul><li>Negative</li><li>Unknown</li></ul>	<ul><li>Not Done</li></ul>	<ul><li>Positive</li></ul>		0
	Hep C Ab		- N 1 B	0 D '''		Question Added: 01 JANB1993
/ J	Hepatitis C antibody	<ul><li>Negative</li><li>Unknown</li></ul>	<ul><li>Not Done</li></ul>	<ul><li>Positive</li></ul>		
	DDD/Cymbilio					Question Added: 01 JAN 1993
7k	RPR/Syphilis Syphilis testing	<ul><li>Negative Unknown</li></ul>	<ul><li>Not Done</li></ul>	<ul><li>Positive</li></ul>		
						Question Added: 01 JAN 2005
Medical	History at time of List	ing				
8	Medical History	<ul><li>Yes</li><li>No</li><li>Unknown</li></ul>				
						Question Added: 01 JAN 1993 HXMED
0 -	Type of medical history at	Arrythmia		Н	IXARRYTH	
8a	Listing	<ul><li>□ Cardiac Arre</li><li>□ Diabetes</li></ul>	est/CPR		HXCPR HXDIAB	

	GI/Nutrition	HXGI	
	■ Heterotaxy/Iso	omerism HXISO	
	■ Malignancy	HXMALIG	
	■ Metabolic/Disc	order HXMET	
	■ Mitochondrial	Disorder HXMIT	
	■ Neurologic	HXNEURO	
	■ Pacemaker	PACEMAKE	
	□ Peripheral My	opathy/Neuromuscular disease	
		HXPERMYO	
	□ Prenatal Diag		
	☐ Prior Transfus		
	Renal Insuffic	-	
	■ Respiratory	HXRESP	
	Shock     Shock	HXSHOCK	
	Syndrome	HXSYN	
	Other, specify		
		SPECOTH	
			Question Added: 01 JAN 1993
	Arrhythmia Afib/flutter	HXAF_FL	
8a.i	Complete hea		
oan	■ V Fibrillation	HXVFIB	
	∇ Tachycardia	HXARRUNK	
	Unknown		
	Other, specify		
		SPECARRY	
			Question Added: 01 JAN 1993
		M	lissing Reason:
Q ii Cardiac	arrest/CPR		
8a.ii Cardiac	Date		Unknown
8a.ii Cardiac			
8a.ii Cardiac	Date		
oa.II	Date MM/DD/YYYY		Unknown  Question Added: 01 JAN 1996 CPRDT
0a.II	Date MM/DD/YYYY  Diabetes,	M	Unknown  Question Added: 01 JAN 1996
0a.II	Date  MM/DD/YYYY  Diabetes, e of last Hgb	M	Question Added: 01 JAN 1996 CPRDT
0a.II	Date MM/DD/YYYY  Diabetes,	M	Question Added: 01 JAN 1996 CPRDT
0a.II	Date  MM/DD/YYYY  Diabetes, e of last Hgb A1c	M	Question Added: 01 JAN 1996 CPRDT lissing Reason: Unknown
0a.II	Date  MM/DD/YYYY  Diabetes, e of last Hgb A1c	M	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE
8a.iii <sub>Date</sub>	Date  MM/DD/YYYY  Diabetes, e of last Hgb A1c  MM/DD/YYYY	M	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01
8a.iii Date	Date MM/DD/YYYY  Diabetes, e of last Hgb A1c MM/DD/YYYY	M	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE
8a.iii Date	Date  MM/DD/YYYY  Diabetes, e of last Hgb A1c  MM/DD/YYYY  Detes, of last	Missing Reason:	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01
8a.iii Date	Date MM/DD/YYYY  Diabetes, e of last Hgb A1c MM/DD/YYYY	M	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01 SEPT 2015
8a.iii Date	Date  MM/DD/YYYY  Diabetes, e of last Hgb A1c  MM/DD/YYYY  Detes, of last	Missing Reason:	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01
8a.iii Date	Date  MM/DD/YYYY  Diabetes, e of last Hgb A1c  MM/DD/YYYY  Detes, of last	Missing Reason:	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01 SEPT 2015
8a.iii Date	Date MM/DD/YYYY  Diabetes, e of last Hgb A1c MM/DD/YYYY  Detes, of last b A1c	Missing Reason:	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01 SEPT 2015
8a.iii Date	Date MM/DD/YYYY  Diabetes, P of last Hgb A1c MM/DD/YYYY  Detes, of last b A1c  Diabetes,  Yes	Missing Reason:	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01 SEPT 2015
8a.iii Date	Date MM/DD/YYYY  Diabetes, P of last Hgb A1c MM/DD/YYYY  Detes, of last b A1c  Diabetes, Freating with  No	Missing Reason:  Unknown	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01 SEPT 2015 HGBVALUE
8a.iii Date	Date MM/DD/YYYY  Diabetes, P of last Hgb A1c MM/DD/YYYY  Detes, of last b A1c  Diabetes, Freating with  No	Missing Reason:	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01 SEPT 2015 HGBVALUE
8a.iii Date  8a.iii Diab Value o Hgb	Date MM/DD/YYYY  Diabetes, P of last Hgb A1c MM/DD/YYYY  Detes, of last b A1c  Diabetes, Treating with insulin  Unknown	Missing Reason: Unknown  Question Added: 01 JAN 1993 to	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01 SEPT 2015 HGBVALUE
8a.iii Date  8a.iii Date  8a.iii Value of Hgk	Date MM/DD/YYYY  Diabetes, P of last Hgb A1c MM/DD/YYYY  Detes, of last b A1c  Diabetes, reating with insulin  Unknown  Ical History, Failure to thriv	Missing Reason: Unknown  Question Added: 01 JAN 1993 to	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01 SEPT 2015 HGBVALUE
8a.iii Date  8a.iii Date  8a.iii Value of Hgk	Date MM/DD/YYYY  Diabetes, of last Hgb A1c MM/DD/YYYY  Detes, of last b A1c  Diabetes, reating with insulin  Unknown  ical History, Gl/Nutrition  Fontan associa	Missing Reason: Unknown  Question Added: 01 JAN 1993 to re/cachexia HXFAIL HXFONLVR	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01 SEPT 2015 HGBVALUE
8a.iii Date  8a.iii Date  8a.iii Value of Hgk	Date MM/DD/YYYY  Diabetes, of last Hgb A1c MM/DD/YYYY  Detes, of last b A1c  Diabetes, reating with insulin  Failure to thriv Gl/Nutrition  Fontan associ	Missing Reason: Unknown  Question Added: 01 JAN 1993 to  Ve/cachexia Lated liver disease Lated liver disease Lated liver disease Lated HXFONLVR LATED	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01 SEPT 2015 HGBVALUE
8a.iii Date  8a.iii Date  8a.iii Value of Hgk	Date MM/DD/YYYY  Diabetes, of last Hgb A1c MM/DD/YYYY  Detes, of last b A1c  Diabetes, reating with insulin  Failure to thriv Infectious hep Protein losing	Missing Reason: Unknown  Question Added: 01 JAN 1993 to Ve/cachexia HXFAIL Interdisease HXFONLVR Interdisease HXFEONLVR Interdisease HXHEP Enteropathy HXPLE	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01 SEPT 2015 HGBVALUE
8a.iii Date  8a.iii Date  8a.iii Value of Hgk	Date MM/DD/YYYY  Diabetes, of last Hgb A1c MM/DD/YYYY  Detes, of last b A1c  Diabetes, reating with insulin  Failure to thriv Gl/Nutrition  Fontan associ	Missing Reason: Unknown  Question Added: 01 JAN 1993 to Ve/cachexia HXFAIL Interdisease HXFONLVR Interdisease HXFEONLVR Interdisease HXHEP Enteropathy HXPLE	Question Added: 01 JAN 1996 CPRDT  lissing Reason: Unknown  Question Added: 01 SEPT 2015 HGBDATE  Question Added: 01 SEPT 2015 HGBVALUE

		Question Added: 01 SEPT 2015
8a.iv.1 Gl/Nutrition, Infectious hepatitis type	A HXHEPTYA B HXHEPTYB C HXHEPTYC Unknown HXHEPTYU Other, specify HXHEPSP	Question Added: 01 SEPT 2015
8a.V Medical History, Heterotaxy/Isomerism	Asplenia  Polysplenia  Unspecified  Other, specify  HXASPLEN  HXPLYSPL  HXISOUSP  HXISOUSP  HXISOTH  HXISO_SP	Question Added: 01 SEPT 2015
8a.vi Medical History, Malignancy	Lymphoma, leukemia s/p BMT hxspbmt s/p Chest Radiation Solid organ cancer Unknown Other, specify  HXLYMLEU HXSPBMT HXSPCRAD HXSPCRAD HXSOLORG HXMALUNK HXMALOTH SPECMAL	Question Added: 01 JAN 1993
8a.Vii Specify Metabolic Disorder		Question Added: 01 SEPT 2015 HXMETSP
8a.VIII Medical History, Mitochondrial Disorder, specify		Question Added: 01 SEPT 2015 HXMITTY
8a.ix Medical History, Neurologic	<ul> <li>■ Anoxic brain injury</li> <li>■ Hemorrhagic and/or thromboembolic stroke</li> <li>■ Other, specify</li> <li>NEUROTSP</li> </ul>	Question Added: 01 SEPT 2015
8a.ix.1  Neurologic, Anoxic brain injury Last Date		Missing Reason:  Unknown  Question Added: 01 SEPT 2015
8a.ix.2		Missing Reason:  Unknown

Neurologic, Hemorrhagic and/or thromboembolic stroke Date Last		
		Question Added: 01 SEPT 2015 CVADT
8a.X Pacemaker	_ Bolibilliatol// tiob	HXAICD PACEBIV LPACE
		Question Added: 01 JAN 1993
8a.x.1 Pacemaker, Defibrillator/AICD Date Placed		Missing Reason: ○ Unknown
	Question Added: (	01 JAN 1993 to 31 DEC 2004   01 JAN 2010 AICDDT
8a.x.2 Pacemaker, CRT/biventricular pacing, Date Placed		Missing Reason: ○ Unknown
		Question Added: 01 JAN 2010 BIVDTE
Pacemaker, not CRT and not ICD, Date Placed		Missing Reason: ○ Unknown
		Question Added: 01 JAN 1993 PACEMDT
8a.xi Medical History, Peripheral myopathy/neuromuscular disease	Duschenne Muscular Dystrophy Freidrich's Ataxia Unspecified Other, specify	BECKMD HXDMD KFREIDR ERMUNK RMOTHR ERMOSP  Question Added: 01 SEPT 2015
History Dishada	Dialysis, souts (within past 20 days)	
8a.xii History Dialysis	<ul> <li>Dialysis, acute (within past 30 days)</li> <li>Dialysis, chronic (&gt;1 month duration)</li> <li>Dysfunction, not dialysis</li> <li>Unknown</li> <li>Other, specify</li> </ul>	XRENSP Question Added: 01 JAN 2010 HXDYSDIA

13/2013		TTTTO - TOTAL T. Elsting		
8a.xi	Medical History, Respiratory	Asthma Plastic Bronchitis Tracheostomy Unknown Other, specify	HXPULDIS HXPB HXTRACH HXRESPUN HXOTRESP HXSPRESP	Question Added: 01 SEPT 2015
8a.xi	Shock, Date of last appropriate Shock			Missing Reason: Unknown  Question Added: 01 JAN 1996
				SHOCKDT
8a.xv	Medical History, Syndrome	Cardiofaciocutaneous Syndrome Costello Syndrome Digeorge (22q11 deletion) Down's/Trisomy 21 Ehlers-Danlos Syndrome LEOPARD/Multiple Lentigenes Loeys-Dietz Syndrome Marfan Syndrome Noonan Syndrome Other Marfan-like Syndrome Turner Syndrome Unspecified Williams Syndrome Other, specify	HXCRD HXCOSTLO HXDIGORG HXDOWNS HXELRDAN HXLEOPRD HXLYSDTZ HXMARFNS HXNOONAN HXMRFNLK HXTURNER HXSYN_U HXWILLIM HXOTHRSN	
				Question Added: 01 SEPT 2015

### Insurance

9

### **Primary Insurance**

- Charitable Donation
- Free
- Government
- Private
- Self Pay
- Unknown
- Other, Specify

P\_SPINS

Question Added: 01 JAN 1996

- Charitable Donation Indicates that a company, institution or individual(s) donated funds to pay for the care of the listed patient.
- Free Indicates that the listing hospital will not charge the patient for the cost
  of the hospitalization
- Government Other US or state government insurance. For Example, Medicaid, Medicare, CHIP (Children's Health Insurance Program), Department of VA refers to funds from the Veterans Administration or others.
- Private Refers to funds from agencies such as Blue Cross/Blue Shield, etc.

- Self Pay Indicates that the recipient will pay for the largest portion of the cost of the hospitalization.
   Other For example, funds from a foreign government. Specify foreign country in the space provided.

Percent or Pane	Reactive	Antibody	(closest t	to listing)
-----------------	----------	----------	------------	-------------

g)			
	<ul><li>Done</li><li>Not Done</li></ul>	- ,	10a ie. Serum
Question Added: 01 JAN 199: LSPF			
Question Added: 01 JAN 1993		T Cell %	10a.i
Missing Reason: ○ Not Done ○ Unknown			
LSCPRA			
Question Added: 01 JAN 1993		B Cell %	10a.ii
Missing Reason: ○ Not Done ○ Unknown			
LSCPRA			
Missing Reason:		ate (Cytotoxic PRA)	10a.iii <sup>c</sup>
Question Added: 01 JAN 1993 LSCPRAE	<ul><li>Done</li><li>Not Done</li></ul>	on serum treated with DTE or DTT (or equivalent)	Panel performed
LSCPRAE  Question Added: 01 JAN 1993		on serum treated with DTE or DTT (or	Panel performed  to reduce the IgM an
LSCPRAE		on serum treated with DTE or DTT (or equivalent) ibodies and identify high PRA results secondary to a drug or other causes.	Panel performed  to reduce the IgM an presumable
Question Added: 01 JAN 1993 LSPRADT  Question Added: 01 JAN 1993  Missing Reason:  Unknown	Not Done	on serum treated with DTE or DTT (or equivalent) ibodies and identify high PRA results secondary to a drug or other causes.	Panel performed to reduce the IgM an
Question Added: 01 JAN 1993 LSPRADT Question Added: 01 JAN 1993 Missing Reason:	Not Done	on serum treated with DTE or DTT (or equivalent) ibodies and identify high PRA results secondary to a drug or other causes.  T Cell %	to reduce the IgM an presumably
Question Added: 01 JAN 1993 LSPRADT  Question Added: 01 JAN 1993 LSPRADT  Question Added: 01 JAN 1993  Missing Reason: Unknown	Not Done	on serum treated with DTE or DTT (or equivalent) ibodies and identify high PRA results secondary to a drug or other causes.	Panel performed  to reduce the IgM an presumable
Question Added: 01 JAN 1993 LSPRADT  Question Added: 01 JAN 1993  Missing Reason:  Unknown  Unknown  Unknown  Unknown  Unknown  Unknown	Not Done	on serum treated with DTE or DTT (or equivalent) ibodies and identify high PRA results secondary to a drug or other causes.  T Cell %  B Cell	to reduce the IgM an presumably
Question Added: 01 JAN 1993 LSPRADT  Question Added: 01 JAN 1993  Missing Reason:  Unknown  Unknown  Unknown  Unknown  Unknown  Unknown  Unknown  LSPRDTE	Not Done	T Cell  B Cell  B Cell	to reduce the IgM an presumably  10b.i  10b.ii
Question Added: 01 JAN 1993 LSPRADT  Question Added: 01 JAN 1993  Missing Reason:  Unknown  Unknown  Unknown  Unknown  Unknown  Unknown	Not Done	on serum treated with DTE or DTT (or equivalent) ibodies and identify high PRA results secondary to a drug or other causes.  T Cell %  B Cell	to reduce the IgM an presumably  10b.i  10b.ii

			Question Added: 01 JAN 1996 LSFCPRA
10c.i	Class I	Missing Reason	Question Added: 01 JAN 1996
		Unknown	
4.0	Class II		LSFPRAT  Question Added: 01 JAN
10c.ii	%		1996
		Missing Reason ◯ Unknown	:
			LSFPRAB
10c.iii	Date MM/DD/YYYY		Missing Reason:  Unknown
			Question Added: 01 JAN 1996 LSFPRADT
104	Listed for prospective	○ Yes	
10d	crossmatch	○ No ○ Unknown	
			Question Added: 01 JAN 2010
			LSPROCM
10d.i	Prospective Crossmatch Results	Donor Cells	
rod.i	Crossmatch Results	<ul><li>Donor Cells and Virtual</li><li>Virtual</li></ul>	
		○ Unknown	
			Question Added: 01 JAN 2010 LSPCMT
1.0	ol: ⊿ Virtual	Avoidance of donor antigens to all antibodies	
100	d.i.1 Crossmatch	present  Avoidance of donor antigens to antibodies above	
		pre-specified threshold	
		Avoidance of donor antigens to C1q fixing antibodies only	
		Unknown	0 " 411 1 04 05 07 0045
			Question Added: 01 SEPT 2015 LSVCMA
	nics Prior to Listin	<b>g</b> pressors or inotropes. Best hemodynamics are those per	formed during the
administration of age		he pulmonary arterial pressure or the pulmonary vascular	
11 Wer	e hemodynamics done	○ Yes	
1.1	prior to listing?	<ul><li>No</li><li>Unknown</li></ul>	
		- Simulation	Question Added: 01 JAN 1993 LSHEMO
4 4	Date		Missing Reason:
11a	MM/DD/YYYY		O Not Done
			Unknown  Question Added: 01 JAN 1993
			LSHEMDT
		Range Information	

Question Added: 01 SEPT 2015 LSFPRES	Missing Reason:  Not Done Unknown	Too Low: < 0 Normal: Between 0 and 40 Question Zone: > 41 Red Flag Zone: > 41		Fontan Mean Pressure	11b
Question Added: 01 JAN 1993	Missing Reason:  Not Done Unknown	Range Information Too Low: < 0 Normal: Between 0 and 40 Question Zone: > 41 Red Flag Zone: > 41	mmHg	RAm (RAP or CVP) Right Atrial Mean Pressure	11c
LSBRAM Question Added: 01 JAN 1993	Missing Reason:  Not Done Unknown	Range Information Too Low: < 0 Normal: Between 0 and 50 Question Zone: > 51 Red Flag Zone: > 51	mmHg	<b>PAm</b> Pulmonary Artery Mean	11d
Question Added: 01 JAN 1993 LSBPCW	Missing Reason:  Not Done Unknown	Range Information Too Low: < 0 Normal: Between 0 and 60 Question Zone: > 61 Red Flag Zone: > 61	mmHg	PCW  Mean Pulmonary Capillary Wedge  Pressure	11e
Question Added: 01 JAN 2010 LSSVCSAT	Missing Reason:  Not Done Unknown	Range Information Too Low: < 0 Normal: Between 0 and 100 Question Zone: > 101 Red Flag Zone: > 101	%	SVC Sat Oxygen Saturation in the SVC	11f
Question Added: 01 JAN 2005 LSBAOSAT	Missing Reason:  Not Done Unknown	Range Information Too Low: < 0 Normal: Between 0 and 100 Question Zone: > 101 Red Flag Zone: > 101	%	AO Sat Aortic Saturation	11g
Question Added: 01 JAN 1993	Missing Reason:  Not Done Unknown	Range Information Too Low: < 0 Normal: Between 0 and 50 Question Zone: > 51 Red Flag Zone: > 51	wu × m <sup>2</sup>	Rp, PVRI Pulmonary resistance indexed to body surface area (BSA) Woods Units × m <sup>2</sup>	11h
Question Added: 01 JAN 1993 LSBRS	Missing Reason:  Not Done Unknown	Range Information Too Low: < 0 Normal: Between 0 and 40 Question Zone: > 41 Red Flag Zone: > 41	wu × m <sup>2</sup>	Rs, SVRI Systemic resistance indexed to body surface area (BSA) Woods Units × m <sup>2</sup>	11i
Question Added: 01 JAN 2010	Missing Reason:  Not Done  Unknown	Range Information Too Low: < 0 Normal: Between 0 and 60 Question Zone: > 61 Red Flag Zone: > 61	mmHg	<b>EDP</b> End diastolic pressure of systemic ventricle	11j

			LSE
11 k C.O. Cardiac Output (i.e. Qs) L/min	Range Information Too Low: < 0 Normal: Between 0 and 20 Question Zone: > 21 Red Flag Zone: > 21		Question Added: 01 JA 199
	ived i lag Zurie. > 2 i	Missing Reason:  Not Done Unknown	
		Officiowii	LSB
•	Range Information		Question Added: 01 JA
C.I. Cardiac index (i.e. C.O. divided by m²) L/min/r	Too Low: < 0 Normal: Between 0 and 15 Question Zone: > 16 Red Flag Zone: > 16		19
		Missing Reason:  Not Done Unknown	
			LS
Was patient on mechanical support	○ Yes		
at time of Hemodynamics	No		
	Unknown		
11m			
			Question Added: 01 SEPT 20
			LSMSHE
11 Hemodynamic Agents	○ Yes		
Used Used	○ No		
	<ul><li>Unknown</li></ul>		
			Question Added: 01 JAN 19
			LSHEMA
115 Indicate agent	□ 100% O2	LSHPO2	
	Dobutamine	LSDOBUT	
hemodynamics	Dopamine	LSDOPA	
	Unknown	LSUNKN	
	□ Epinephrine	LSEPI	
	☐ Isoproterenol (Isuprel)	LSISUPRO	
	■ Milrinone (Primacor)	LSMILRIN	
	Nesiritide	LSHNES	
	Nitric Oxide	LSNOX	
	Nitroglycerin	LSNITRO	
	Nitroprusside (Nipride)	LSNITROP	
	Norepinephrine	LSNOREPI	
	PGE (Alprostadil)	LSPGE LSPGI	
	PGI (Flolan)	LSPHEN	
	<ul><li>Phenylephrine/ Neosynephrine</li><li>Sildenafil</li></ul>	LSSILD	
	□ Vasopressin	LSVASO	
	Other, specify	LSOHMD	
	Outer, specify	LSOHMDSP	
			Question Added: 01 JAN 19

## **Schooling**

12

Is the patient in school?

Yes

No

Not Applicable, <6 years</li>

Unknown

			Question Added: 01 JAN 1996 LSCHOOL
12 Are they at the appropriate le			
			AASCHOOL
12b Are they in a spe education cla			Question Added: 01 JAN 1996 SPSCHOOL
Exercise Test			
13 Was exercise test performe	ed? Yes No Unknown Not Routinely Done		
			Question Added: 01 JAN 2005 LSTTPERF
13a If exercise test perform specify reas	ed, Too sick	TTNDRS	Question Added: 01 JAN 2015 TTNDR
13b Max VO <sub>2</sub> % Predicted for Age  Refers to predicted maximum VO <sub>2</sub> for patient (should be listed in exercise report; if not, exercise lab personnel should be able to provide this data)		Missing Reason: ◯ Unknown ◯ Not Done	Question Added: 01 JAN 2005
			Question Added: 01 JAN
Max VO <sub>2</sub>	nl/kg/min	Missing Reason:	1996 TTMAXVO2
13d Respiratory Value at			Question Added: 01 SEPT 2015
Respiratory Value at Peak  RER or Respiratory Quotient:R Value at peak is the respiratory quotient of carbon dioxide production divided by oxygen consumption, and is used as an index of how vigorously the patient exercised.  A value above 1.05 is generally considered to represent an adequate effort.		Missing Reason:	
			TTRMAX

	ory Values closes ay have been collected on diffe		his report		
14a	Total Bilirubin	mg/dL umol/L	Range Information Too Low: < 0 Normal: Between 0.3 and 1.2 Question Zone: > 2.4 Red Flag Zone: > 10  LSBILI_T_U	Missing Reason:  Not Done	Question Added: 01 JAN 2005
				• Unknown	LSBILI_T
14b	Direct Bilirubin	mg/dL umol/L	Range Information Too Low: < 0 Normal: Between 0 and 0.2 Question Zone: > 0.4 Red Flag Zone: > 5 LSBILI_D_U	Missing Reason:  Not Done  Unknown	Question Added: 01 JAN 2005
			Range Information		Question Added: 01 JAN
14c	AST Aspartate transaminase (also SGOT)	U/L	Too Low: < 0 Normal: Between 10 and 60 Question Zone: > 120 Red Flag Zone: > 1000	Missing Reason:	2005
				<ul><li>Not Done</li><li>Unknown</li></ul>	
					LSAST
14d	ALT Alanine transaminase (also SGPT)	U/L	Range Information Too Low: < 0 Normal: Between 7 and 45 Question Zone: > 90 Red Flag Zone: > 1000	Missing Reason:  Not Done	Question Added: 01 JAN 2005
				Unknown	
					LSALT
14e	<b>BNP</b> B-type natriuretic peptide	pg/mL or ng/L	Range Information Too Low: < 0 Normal: Between 10 and 100 Question Zone: > 1000 Red Flag Zone: > 10000	Missing Reason:  Not Done Unknown	Question Added: 01 JAN 2010
					LBNP
14f	Pro BNP Pro NT B-type natriuretic peptide	pg/mL or ng/Lpmol/L	Range Information Too Low: < 0 Normal: Between 10 and 300 Question Zone: > 3000 Red Flag Zone: > 30000 LSPBNP_U	Missing Reason:  Not Done	Question Added: 01 SEPT 2015
				Unknown	LSPBNP
			Range Information		
14g	<b>CRP</b> C reactive protein	mg/dL mg/L	Range Information Too Low: < 0  Normal: Between 0 and 0.5 Question Zone: > 5 Red Flag Zone: > 50  LCRP_U	Missing Reason:  Not Done  Unknown	Question Added: 01 JAN 2010
					LCRP
	Creatinine		Range Information Too Low: < 0		Question Added: 01 JAN 93 to 31 DEC 2004   01

**4** 

Not DoneUnknown

Question Added: 01 JAN 2005 LSRHFCL

#### **Ross Heart Failure Classes**

- Class I: No limitations or symptoms
   Class II: Mild tachypnea and/or diaphoresis with feeds in infants; dyspnea on exercise in older children. No growth failure.

  • Class III: Marked tachypnea and/or diaphoresis with feeds or exertion and
- prolonged feeding time with growth failure.

   Class IV: Symptomatic at rest with tachypnea, retractions, grunting or
- diaphoresis.

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