

DNR HAT Comp Severity

Date of Onset		
Resolution of the complication within 3 months post-operatively. This does not apply to complications that are self-limiting acute events.	O Yes O No O Not Applicable O Unknown	
If No or N/A to Resolution, Complication worsened. (requiring intervention in an effort to control the complication or its sequelae)	○ Yes ○ No	
Medications Required for Treatment	If yes to Medications Required for Treatment, Type of Medications	Routine Medications Medications for bacterial, viral or fungal infections other than prophylaxis Ulcer Therapy other than prophylaxis Other
Interventions/Procedures	○ Yes ○ No	
If yes to Interventions/Procedures, Type of Intervention or Procedure	Bedside therapeutic procedure (e.g. evacuation of pneumothorax, pleural effusion or monitoring lines) Surgical Intervention Endoscopic Intervention Radiologic Intervention	
Blood Transfusion	○ Yes ○ No	
If yes to Blood Transfusion, Units of RBC's		

ICU Admission	○ Yes ○ No	
Hospitalized for more than 14 days as a result of this complication	○ Yes ○ No	
Residual Disability/Disease resulting from the complication	○ Yes ○ No	
Was the patient listed for a liver transplant as a result of this complication?	○ Yes ○ No	
If Yes to Listing, Date of Listing	Transplantation	
Death	○ Yes ○ No	
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