

## **RCP** Neuropraxia 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	If No or N/A to Resolution,	◯ Yes	
	○ No	Complication worsened. (requiring		
	Not Applicable	intervention in an effort to control the	○ No	
	OUnknown	complication or its sequelae)		
Medications Required for Treatment		○ Yes		
		No		
If yes to Medications Required for Treatment, Type of Medications		Routine Medications		
		Medications for bacterial, viral or fungal infections other than prophylaxis		
		OUlcer 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)		
		O Surgical Intervention		
		Endoscopic Intervention		
		Radiologic Intervention		
Blood Transfusion		○ Yes		
		○ No		
If yes to Blood Transfusion, Units of RBC's				

Page	2	of	2
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ICU Admission of 5 days or more?		O Yes O No	
Management of this complication required the patient's hospital stay to be longer than 4 weeks (if initial transplant surgery admission) or 14 days (if subsequent post transplant admission) total		<ul><li>○ Yes</li><li>○ No</li></ul>	
Residual Disability/Disease resulting from the complication	O Yes   O No	Re-Listing	Yes   No
If Yes to Re-Listing, Dat	e of Re-Listing		
Re-Transplantation		<ul><li>○ Yes</li><li>○ No</li></ul>	
Death		O Yes O No	

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