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## NIDDK

## Liver Transplantation Database

## **CHANGE OF STATUS FORM**

01/30/1991

**COMPLETION LOG** 

Center

Initials

Data Collector ID

Transfer

		DATE		
	Data Collection	//_		
FORM KEYS	Data Entry	//_		
	Sysid			
Patient ID	Verification	//		
Date of Status//	Cleaned	/ /		
	1			

PATIENT ID \_\_\_\_\_-

## **CHANGE OF STATUS FORM**

NIDDK Liver Transplantation Database

URRENT STATUS (check o	one)	DATE OF CHANGE	MM	_/
Medically acceptable, look for donor			IVIIVI	DD
1.1 Contributing reas Check all that app		must be determined by a physicia	n).	
1.1.1 Bon	e disease			
1.1.2 Enc	ephalopathy			
1.1.3 Pool	r quality of life secondary	/ to fatigue		
1.1.4 Prur	ritis			
1.1.5 Rec	urrent GI bleeding			
1.1.6 SBP				
1.1.7 Tum	nor			
1.1.8 Unc	ontrolled ascites			
1.1.9 Malr	nutrition/failure to thrive/f	ailed Kasai procedure		
1.1.10 Rer	nal failure			
1.1.11 Coa	agulopathy			
1.1.12 Red	current cholangitis/sepsis	s/abscess		
1.1.13 Oth	erspecify (30 char)			-
	specify (50 char)			
1.2 Specify by code to	he <u>major</u> reason for tran	splantation from the above list _		
1.3 Code UNOS STA	TUS as listed on the op	posite page		
ļ				
2. Suitable, but too well				
3. Contraindications		0.51		
3.1 Check all that app	· -	2. Financial 3. Personal_	_	
3.2 Possibly reversibl				
IF NO	specify(30 char)			_
3.3 Taken to OR for I	iver transplant, but trans	plant was not done Yes N	No	
				l
IF YES	specify reason		l l	1