

**PEDIATRIC HEART TRANSPLANT STUDY  
PRETRANSPLANT ANNUAL FOLLOWUP  
FORM - 12  
July 1<sup>st</sup> 1996**

CODE: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

DATE LISTED: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

A. CURRENT U.N.O.S. STATUS \_\_\_\_\_

FOLLOW UP DATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**B. CHANGES OF STATUS SINCE LISTING:**

STATUS \_\_\_\_\_ TO STATUS \_\_\_\_\_ DATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ REASON \_\_\_\_\_

STATUS \_\_\_\_\_ TO STATUS \_\_\_\_\_ DATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ REASON \_\_\_\_\_

STATUS \_\_\_\_\_ TO STATUS \_\_\_\_\_ DATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ REASON \_\_\_\_\_

**C. SURGERY AND/OR CATHETERIZATION INTERVENTION SINCE LISTING:**

A. \_\_\_\_\_ DATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

B. \_\_\_\_\_ DATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

C. \_\_\_\_\_ DATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

D. \_\_\_\_\_ DATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**D. REMOVED FROM LIST: \_\_\_\_\_**

DATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**REASON:**

- |                                       |                                      |
|---------------------------------------|--------------------------------------|
| 1. CONSIDERED TOO WELL _____          | 2. PARENT/PATIENT RELUCTANCE _____   |
| 3. ALTERNATE SURGICAL TREATMENT _____ | 4. ALTERNATE MEDICAL TREATMENT _____ |
| 5. FINANCIAL _____                    | 6. PSYCHOSOCIAL _____                |
| 7. CONTRAINDICATIONS _____            |                                      |
| 8. OTHER _____                        |                                      |

**E. FOLLOWED EXCLUSIVELY ELSEWHERE: \_\_\_\_\_**

DATE OF TRANSFER: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ NAME OF INSTITUTION: \_\_\_\_\_

F. TRANSPLANTED: \_\_\_\_\_ (COMPLETE FORMS 1T, 2, AND 3)

DATE: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

G. DEATH: \_\_\_\_\_ (COMPLETE FORM 10)

DATE: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_  
TO BE SIGNED BY PRIMARY INVESTIGATOR

\_\_\_\_\_  
DATE