



Anzdata Registry

Living Kidney Donor Registry

Pre-Transplant Data

LIVING DONOR NUMBER

1 REFERRING HOSPITAL

Hospital / State	Hospital Unit No.
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2 PHYSICIAN (Optional)

3 DONOR SURNAME

DONOR GIVEN NAMES

4 DATE OF BIRTH

5 SEX

6 RACIAL ORIGIN (Record from list)

OTHER

7 COUNTRY OF BIRTH (If Australia or NZ - Tick box)

AUST	NZ	OTHER COUNTRY (specify)
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8 POSTCODE

9 ANZDATA RECIPIENT REGISTRY NUMBER

10 RECIPIENT SURNAME

RECIPIENT GIVEN NAMES

11 DONOR RELATIONSHIP TO RECIPIENT

(Record from list on back of page)

Enter if known

OTHER

12 **DONOR** CO-MORBID CONDITIONS BEFORE DONATION

HEIGHT (cms)	WEIGHT (kg)	CIGARETTE SMOKING	FAMILY HISTORY OF DIABETES	DONOR DIABETES	N = No O = Type 1 Insulin dependent P = Type 2 Non Insulin requiring Q = Type 2 Insulin requiring G = Gestational diabetes										
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>											
		N = Never F = Former C = Current	Y = Yes N = No U = Unknown												
HYPERTENSION Requiring Treatment	Number of Drugs Taken	RESTING BLOOD PRESSURE (mmHg)		GLUCOSE TOLERANCE TEST (GTT RESULT)											
<input type="text"/>	<input type="text"/>	<table border="1"> <tr> <td>Systolic</td> <td>Diastolic</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table>		Systolic	Diastolic	<input type="text"/>	<input type="text"/>	<table border="1"> <tr> <td>Fasting BGL</td> <td>2 hour BGL</td> <td>Enter N if not done</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table>		Fasting BGL	2 hour BGL	Enter N if not done	<input type="text"/>	<input type="text"/>	<input type="text"/>
Systolic	Diastolic														
<input type="text"/>	<input type="text"/>														
Fasting BGL	2 hour BGL	Enter N if not done													
<input type="text"/>	<input type="text"/>	<input type="text"/>													

OTHER CO-MORBID CONDITIONS (Write In)

13 **DONOR** LABORATORY RESULTS BEFORE DONATION

SERUM CREATININE	UREA	METHOD	MEASURED GFR
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(mmol/l)	(mmol/l)		(ml/min) Not BSA corrected
		I = Ioxehol / Iothalamate R = Radio labelled DTPA O = Other (specify)	
24 HOUR PROTEIN RESULT	PROTEIN CREATININE RATIO	OTHER PROTEIN MEASURE (Write in)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
(g/day)	(g/mol)		

COMMENTS

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Question 6 - Racial Origin

- 1 = Caucasoid
- 2 = Australian Aborigine
- 3 = Chinese
- 4 = Maori
- 5 = Arab
- 61 = Cook Islander
- 63 = Samoan
- 64 = Tongan
- 65 = Torres Strait Islander
- 69 = Pacific People - other (specify)
- 7 = Indian
- 8 = Indonesian
- 9 = Malay
- 10 = Filipino
- 11 = Vietnamese
- 20 = Other (specify)
- 00 = Donor objects to answering question

Question 10 - Source of Donor Kidney

- 2 = Sister (if twin record 6 or 7)
- 3 = Brother (if twin record 6 or 7)
- 4 = Mother
- 5 = Father
- 6 = Monozygotic (identical twin)
- 7 = Dizygotic (non-identical twin)
- 8 = Other living related donor (specify)
- 9 = Son
- 10 = Daughter
- 11 = Husband
- 12 = Wife
- 13 = Cousin
- 14 = Unrelated living donor (specify)