Transplant Center Fax Communication



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Fax:	☐ Robert Wood Johnson University Hospital ☐ Saint Barnabas Medical Center ☐ University of Pennsylvania ☐ Virtua Center for Organ Transplantation (OLOL) om: Facility Name:			
Patient Name: DOB: MBI: Modality: In-center Hemodialysis (ICHD) Peritoneal Dialysis (PD) Home Hemodialysis (HHD)				
	Information to Update	Details		
	New address and/or phone number			
	New insurance Copy of card attached			
	Transferred	New facility name: New facility contact numb CCN:	per:	
	New multiple listed	Date: Transplant center:		
	Waitlist status change	☐ Active ☐ Inactive ☐	Removed	
	Transplanted	Date: Transplant center:		
	Expired	Date: Cause of death:		
	Other (e.g. transplant requested info)			

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This tool is a product of the QIRN3 Transplant Collaborative that aims to improve communication and information exchange between dialysis facilities and transplant centers.