Recipient Form Activities Use this request type to report or request the following recipient activities: 1. Report a recipient as "Not Seen" or "Lost to Follow-Up". 2. Request generation of a new, or deletion of existing recipient follow-up forms. 3. Report that a recipient's graft has failed. Exists in categories Requestor's Information Requestor's Institution Code Requestor's Name Q (i) Requestor's Email Request Email Requestor's Phone Number Request Phone Number Recipient Demographics * First Name Middle Initial * Last Name * Date of Birth 0 * Social Security Number * Transplant Date 0 * Organ Type -- None --Request Details * Form Activity Create a Recipient Follow-up Form ▼ Specify up to 5 dates for which you have follow-up data to report for this recipient (e.g. clinic visit dates, patient status dates).UNOS Data Quality staff will use these dates to determine which follow-up forms to generate. * Date 1 0 Date 2 0 Date 3 0 Date 4 0 Date 5 0 * Briefly describe the reason for your request **Request Details** * Form Activity Delete Recipient Form * Follow form(s) to delete Collection List Search +6 MONTH --None--01 YEAR 02 YEAR 03 YEAR 04 YEAR 05 YEAR 06 YEAR 07 YEAR 08 YEAR 09 YEAR 10 YEAR Add b 4 Remove 11 YEAR 12 YEAR 13 YEAR 14 YEAR 15 YEAR 16 YEAR 17 YEAR * Briefly describe the reason for your request

