City.



Hospital: ET Donor nr. DSO Donor nr. Center: Age: Bloodgroup: Contact tel nr: Date of report: Contact person: **PRESERVATION** IU at: Heparin: Hepatectomy time: Pancreatectomy time: Cross clamp time: ml Start cold perfusion time: Perfusion solution (volume): Warm ischemia period: Perfusion solution: min **ANATOMY LIVER ANATOMY PANCREAS** Normal arterial anatomy Whole organ: □ No ☐ Yes If no, specify: With duodenum: ☐ No ☐ Yes Coeliac axis included: ☐ No ☐ Yes Gallbladder flushed: ☐ Yes ☐ No Common hepatic artery: Yes □ No Bile duct flushed: Yes ☐ No SMA: ☐ No ☐ Yes Coeliac axis: ☐ Yes □ No Aortic patch: ☐ Yes ☐ No Common hepatic artery: ☐ Yes □ No Length portal vein: ☐ Long Short SMA: Yes \square No Iliac arteries enclosed: ☐ Yes ☐ No Aortic patch: ☐ Yes ☐ No Iliac veins enclosed: ☐ No ☐ Yes Portal vein: ☐ Long ☐ Short Arteriosclerosis: None Moderate Cholecystectomy: Yes □ No Massive Iliac arteries: ☐ Yes ☐ No Iliac veins: ☐ Yes ☐ No ☐ None ☐ Moderate ☐ Massive Arteriosclerosis: Morphological variations Liver: Morphological variations Pancreas: **QUALITY PANCREAS QUALITY LIVER** Poor Perfusion: Good Acceptable Perfusion: ☐ Good Acceptable ☐ Poor Quality of liver: Good Acceptable ☐ Poor Quality of pancreas:
Good Acceptable Poor Machine perfusion: ☐ Yes □ No Machine perfusion: ☐ Yes ☐ No Reason not used: Reason not used: Procurement center: Procurement center: Surgeon: Surgeon: Signature: Signature: Please fill in QUALITY FORM online: https://isysweb.dso.de Please fill in using QF-Code: **QUALITY FORM online:** in case of split liver transplantation use https://isysweb.dso.de for right split QF-Code: using QF-Code: for left split QF-Code: Additional signature, for Germany only:

Verantwortlicher Entnahmechirurg (leitender Operateur nach Richtline der BÄK gem. § 16 Abs. 1 Satz 1 Nr 4a) und 4b) TPG)

Nachname Vorname Unterschrift

If donor-data contains any english text please pay attention to this disclaimer:

Please note that DSO cannot take warranty or liability for errors or discrepancies in the translation of the medical report. Only the original medical report is binding. Therefore, if you have any queries please do not hesitate to get in touch with the coordinator in charge directly who will be happy to clarify any areas of uncertainty.