

## 2007 Post Transplant Malignancy Changes for OMB Clearance

SECTION	FIELD	MODIFICATION/ADDITION	RATIONALE
Donor Related	Immunosuppression	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Treatment	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Treatment outcome	This question will be optional for adult and pediatric recipients.	No longer necessary.
Post Tx Lymphoproliferative Disease and Lymphoma	Clonality	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Predominant cell type	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Epstein-Barr virus (EBV) status of tumor	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Anatomy	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Lymph nodes	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Extranodal sites	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Treatment	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Ann Arbor Stage	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Treatment best response	This question will be optional for adult and pediatric recipients.	No longer necessary.

## 2007 Post Transplant Malignancy Changes for OMB Clearance

SECTION	FIELD	MODIFICATION/ADDITION	RATIONALE
Recurrence of Pretransplant Malignancy	If skin number of occurrences in follow-up period	This question will be optional for adult and pediatric recipients.	No longer necessary.
	If colo-rectal, Duke's Classification	This question will be optional for adult and pediatric recipients.	No longer necessary.
	If Lymphoma, type	This question will be optional for adult and pediatric recipients.	No longer necessary.
	If Leukemia, type	This question will be optional for adult and pediatric recipients.	No longer necessary.
	If other cancer, specify	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Pre-existing treatment date	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Pre-existing treatment	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Sites affected	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Immunosuppression	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Treatment of recurrent tumor	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Treatment of recurrent tumor outcome	This question will be optional for adult and pediatric recipients.	No longer necessary.
Post Transplant De Novo Solid Tumor	Skin, sites	This question will be optional for adult and pediatric recipients.	No longer necessary.

## 2007 Post Transplant Malignancy Changes for OMB Clearance

SECTION	FIELD	MODIFICATION/ADDITION	RATIONALE
	Skin, site location	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Skin, spread	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Skin number of occurrences	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Renal carcinoma, sites	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Carcinoma of the uterus type	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Colo-rectal Duke's Classification	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Primary hepatic tumor, specify type	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Metastatic liver tumor, specify original site	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Lung (include bronchial)	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Leukemia, type	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Sarcomas, site	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Sarcomas, specify type	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Other cancers, specify type	This question will be optional for adult and pediatric recipients.	No longer necessary.

## 2007 Post Transplant Malignancy Changes for OMB Clearance

SECTION	FIELD	MODIFICATION/ADDITION	RATIONALE
	Outcome	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Sites affected	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Immunosuppression	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Treatment	This question will be optional for adult and pediatric recipients.	No longer necessary.
	Best treatment response	This question will be optional for adult and pediatric recipients.	No longer necessary.