



Pre-Transplant Essential Data: Disease Classification

CIBMTR Use Only

Sequence Number:

Date Received:

~~(Request for OMB approval will be submitted when form is complete)~~

OMB Placeholder

OMB No: 0915-0310

Expiration Date:

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0310.

CIBMTR Center Number: _____

CIBMTR Research ID: _____

Event date: ____ - ____ - ____

HCT type: *(check all that apply)*

- Autologous
- Allogeneic, unrelated
- Allogeneic, related

Product type: *(check all that apply)*

- Bone marrow
- PBSC
- Single cord blood unit
- Multiple cord blood units
- Other product

Specify: _____

Primary Disease for HCT

1. Date of diagnosis of primary disease for HCT: _____ — _____ — _____
 YYYY MM DD
2. What was the primary disease for which the HCT was performed?
- Acute myelogenous leukemia (AML or ANLL) (10) - **Go to question 3**
 - Acute lymphoblastic leukemia (ALL) (20) - **Go to question 64**
 - ~~Other~~ **Acute leukemia of ambiguous lineage and other myeloid neoplasms** (80) - **Go to question 107**
 - Chronic myelogenous leukemia (CML) (40) - **Go to question 1121**
 - Myelodysplastic (MDS) / myeloproliferative (MPN) diseases (50) (Please classify all preleukemias) (If recipient has transformed to AML, indicate AML as the primary disease) - **Go to question 1235**
 - Other leukemia (30) (includes CLL) - **Go to question 2178**
 - Hodgkin lymphoma (150) - **Go to question 2245**
 - Non-Hodgkin lymphoma (100) - **Go to question 2278**
 - Multiple myeloma / plasma cell disorder (PCD) (170) - **Go to question 2334**
 - Solid tumors (200) - **Go to question 2656**
 - Severe aplastic anemia (300) (If the recipient developed MDS or AML, indicate MDS or AML as the primary disease) - **Go to question 2678**
 - Inherited abnormalities of erythrocyte differentiation or function (310) - **Go to question 26970**
 - Disorders of the immune system (400) - **Go to question 2723**
 - Inherited abnormalities of platelets (500) - **Go to question 2756**
 - Inherited disorders of metabolism (520) - **Go to question 2778**
 - Histiocytic disorders (570) - **Go to question 27980**
 - Autoimmune diseases (600) - **Go to question 2812**
 - Other disease (900) - **Go to question 28990**

Acute Myelogenous Leukemia (AML)

3. Specify the AML classification:

AML with recurrent genetic abnormalities

- AML with t(9;11) (p22.3;q23.3); MLLT3-~~KMT2A~~MLL (5)
- AML with t(6;9) (p23;q34.1); DEK-NUP214 (6)
- AML with inv(3) (q21.3;q26.2) or t(3;3) (q21.3;q26.2); ~~RPN1-EVI1~~GATA2, MECOM (7)

- AML (megakaryoblastic) with t(1;22) (p13.3;q13.3); RBM15-MKL1 (8)
- AML with t(8;21); (q22; q22.1); RUNX1/RUNX1T1 (281)
- AML with inv(16)(p13.1;q22) or t(16;16)(p13.1; q22); CBFβ-MYH11 (282)
- APL with t(15;17)(q22;q12); PML-RARA (283)

[AML with BCR-ABL1 \(provisional entity\)](#)

[AML with mutated NPM1](#)

[AML with biallelic mutations of CEBPA](#)

[AML with mutated RUNX1 \(provisional entity\)](#)

- AML with 11q23 (MLL) abnormalities (i.e., t(4;11), t(6;11), t(9;11), t(11;19)) (284)
- AML with myelodysplasia – related changes (285)
- Therapy related ~~AML (t-AML) (9)~~ [AML \(t-AML\) \(9\)](#)

AML, not otherwise specified

~~Myeloid sarcoma (295)~~

~~Blastic plasmacytoid dendritic cell neoplasm (296)~~

- AML ~~or ANLL~~, not otherwise specified (280)
- AML, minimally differentiated ~~(M0)~~ (286)
- AML without maturation ~~(M1)~~ (287)
- AML with maturation ~~(M2)~~ (288)
- Acute myelomonocytic leukemia ~~(M4)~~ (289)
- Acute monoblastic / acute monocytic leukemia ~~(M5)~~ (290)
- Acute erythroid leukemia (erythroid / myeloid and pure erythroleukemia) ~~(M6)~~ (291)
- Acute megakaryoblastic leukemia ~~(M7)~~ (292)
- Acute basophilic leukemia (293)
- Acute panmyelosis with myelofibrosis (294)

[Myeloid sarcoma \(295\)](#)

[Myeloid leukemia associated with Down syndrome](#)

4. _____ Did AML transform from MDS or MPN?

- Yes – **Also complete MDS Disease Classification questions**
- No

5. _____ Is the disease (AML) therapy related?

- Yes
- No
- Unknown

6. Did the recipient have a predisposing condition?

CIBMTR Center Number: _____

CIBMTR Research ID: _____

- Yes - **Go to question 7**
- No - **Go to question 9**
- Unknown - **Go to question 9**

7. Specify condition:

- Bloom syndrome - **Go to question 9**
- Down syndrome - **Go to question 9**
- Fanconi anemia - **Go to question 9**
- Neurofibromatosis type 1 - **Go to question 9**
- Other condition - **Go to question 8**

8. Specify other condition: _____

9. Were cytogenetics tested (karyotyping or FISH)?

Yes - **Go to question 10**

No - **Go to question 47**

Unknown - **Go to question 47**

10. Results of tests:

Abnormalities identified – **Go to question 11**

No evaluable metaphases - **Go to question 47**

No abnormalities - **Go to question 47**

Specify cytogenetic abnormalities identified at any time prior to the start of the preparative regimen:

Monosomy

11. -5

Yes

No

12. -7

Yes

No

13. -17

Yes

No

14. -18

Yes

No

15. -X

Yes

No

16. -Y

Yes

No

CIBMTR Center Number: _____

CIBMTR Research ID: _____

Trisomy

17. +4

Yes

No

18. +8

Yes

No

19. +11

Yes

No

20. +13

Yes

No

21. +14

Yes

No

22. +21

Yes

No

23. +22

Yes

No

Translocation

24. t(3;3)

Yes

No

25. t(6;9)

Yes

No

CIBMTR Center Number: _____

CIBMTR Research ID: _____

26. t(8;21)

Yes

No

27. t(9;11)

Yes

No

28. t(9;22)

Yes

No

29. t(15;17) and variants

Yes

No

30. t(16;16)

Yes

No

Deletion

31. del(3q) / 3q-

Yes

No

32. del(5q) / 5q-

Yes

No

33. del(7q) / 7q-

Yes

No

34. del(9q) / 9q-

Yes

No

35. del(11q) / 11q-

Yes

CIBMTR Center Number: _____

CIBMTR Research ID: _____

No

36. del(16q) / 16q-

Yes

No

37. del(17q) / 17q-

Yes

No

38. del(20q) / 20q-

Yes

No

39. del(21q) / 21q-

Yes

No

Inversion

40. inv(3)

Yes

No

41. inv(16)

Yes

No

Other

42. (11q23) any abnormality

Yes

No

43. 12p any abnormality

Yes

No

44. Complex - ≥ 3 distinct abnormalities

Yes

CIBMTR Center Number: _____

CIBMTR Research ID: _____

No

45. Other abnormality

Yes - **Go to question 46**

No - **Go to question 47**

46. Specify other abnormality: _____

47. Were tests for molecular markers performed (e.g. PCR)?

Yes – **Go to question 48**

No – **Go to question 57**

Unknown – **Go to question 57**

Specify molecular markers identified at any time prior to the start of the preparative regimen:

48. CEBPA

Positive

Negative

Not done

49. FLT3 – D835 point mutation

Positive

Negative

Not done

50. FLT3 – ITD mutation

Positive

Negative

Not done

51. IDH1

Positive

Negative

Not done

52. IDH2

Positive

Negative

Not done

CIBMTR Center Number: _____

CIBMTR Research ID: _____

53. KIT

- Positive
- Negative
- Not done

54. NPM1

- Positive
- Negative
- Not done

55. Other molecular marker

- Positive- **Go to question 56**
- Negative- **Go to question 56**
- Not done- **Go to question 57**

56. Specify other molecular marker: _____

Status at transplantation

57. _____ What was the disease status (based on hematologic test results)?

- Primary induction failure – **Go to question 63**
- 1st complete remission (no previous bone marrow or extramedullary relapse) – **Go to question 58**
- 2nd complete remission – **Go to question 58**
- ≥ 3rd complete remission – **Go to question 58**
- 1st relapse – **Go to question 62**
- 2nd relapse – **Go to question 62**
- ≥ 3rd relapse – **Go to question 62**
- No treatment – **Go to question 63**

58. How many cycles of induction therapy were required to achieve CR?

- 1
- 2
- ≥ 3

59. Was the recipient in molecular remission?

- Yes
- No
- Unknown
- Not applicable

[Natural killer \(NK\)- cell lymphoblastic leukemia/lymphoma \(provisional entity\) \(#\)](#) ~~ALL, NOS (199)~~

65. Were tyrosine kinase inhibitors (i.e. imatinib mesylate) given for pre-HCT therapy at any time prior to start of the preparative regimen?

Yes

No

66. Were cytogenetics tested (karyotyping or FISH)?

Yes - **Go to question 67**

No - **Go to question 95**

Unknown - **Go to question 95**

67. Results of tests:

Abnormalities identified – **Go to question 68**

No evaluable metaphases - **Go to question 95**

No abnormalities - **Go to question 95**

Specify cytogenetic abnormalities identified at any time prior to the start of the preparative regimen.

Monosomy

68. -7

Yes

No

Trisomy

69. +4

Yes

No

70. +8

Yes

No

71. +17

Yes

No

72. +21

CIBMTR Center Number: _____

CIBMTR Research ID: _____

Yes

No

Translocation

73. t(1;19)

Yes

No

74. t(2;8)

Yes

No

75. t(4;11)

Yes

No

76. t(5;14)

Yes

No

77. t(8;14)

Yes

No

78. t(8;22)

Yes

No

79. t(9;22)

Yes

No

80. t(10;14)

Yes

No

81. t(11;14)

Yes

No

CIBMTR Center Number: _____

CIBMTR Research ID: _____

82. t(12;21)

Yes

No

Deletion

83. del(6q) / 6q-

Yes

No

84. del(9p) / 9p-

Yes

No

85. del(12p) / 12p-

Yes

No

Addition

86. add(14q)

Yes

No

Other

87. (11q23) any abnormality

Yes

No

88. 9p any abnormality

Yes

No

89. 12p any abnormality

Yes

No

90. Hyperdiploid (> 50)

Yes

CIBMTR Center Number: _____

CIBMTR Research ID: _____

No

91. Hypodiploid (< 46)

Yes

No

92. Complex - ≥ 3 distinct abnormalities

Yes

No

93. Other abnormality

Yes - **Go to question 94**

No - **Go to question 95**

94. Specify other abnormality: _____

95. Were tests for molecular markers performed (e.g. PCR)?

Yes – **Go to question 96**

No – **Go to question 100**

Unknown – **Go to question 100**

Specify molecular markers identified at any time prior to the start of the preparative regimen:

96. BCR / ABL

Positive

Negative

Not done

97. TEL-AML / AML1

Positive

Negative

Not done

98. Other molecular marker

Positive – **Go to question 99**

Negative – **Go to question 99**

Not done – **Go to question 100**

99. Specify other molecular marker: _____

CIBMTR Center Number: _____

CIBMTR Research ID: _____

Status at Transplantation:

100. _____ What was the disease status (based on hematologic test results)?

- Primary induction failure – **Go to question 106**
- 1st complete remission (no previous marrow or extramedullary relapse) – **Go to question 101**
- 2nd complete remission – **Go to question 101**
- ≥ 3rd complete remission – **Go to question 101**
- 1st relapse – **Go to question 105**
- 2nd relapse – **Go to question 105**
- ≥ 3rd relapse – **Go to question 105**
- No treatment – **Go to question 106**

101. How many cycles of induction therapy were required to achieve CR?

- 1
- 2
- ≥ 3

102. Was the recipient in molecular remission?

- Yes
- No
- Unknown
- Not applicable

103. Was the recipient in remission by flow cytometry?

- Yes
- No
- Unknown
- Not applicable

104. Was the recipient in cytogenetic remission?

- Yes – **Go to question 461106**
- No – **Go to question 461106**
- Unknown – **Go to question 461106**
- Not applicable – **Go to question 461106**

105. Date of most recent relapse: _____

YYYY MM DD

106. Date assessed: _____ - **Go to signature line**

CIBMTR Center Number: _____

CIBMTR Research ID: _____

YYYY

MM

DD

Other Acute Leukemias of Ambiguous Lineage and Other Myeloid Neoplasms

107. _____ Specify other acute leukemias of ambiguous lineage and other myeloid neoplasm classification:

Acute leukemia of ambiguous lineage - **Go to question 108**

Blastic plasmacytoid dendritic cell neoplasm – **Go to question 110**

108. Specify acute leukemias of ambiguous lineage classification:

Acute undifferentiated leukemia (31) – **Go to question 109**

Mixed phenotype acute leukemia (MPAL) with t(9;22)(q34.1;q11.2); BCR-ABL1

Mixed phenotype acute leukemia with t(v; 11q23.3); KMT2A rearranged

Mixed phenotype acute leukemia, B/myeloid, NOS

Mixed phenotype acute leukemia, T/myeloid, NOS

Biphenotypic, bilineage or hybrid leukemia (32) – **Go to question 109**

Acute mast cell leukemia (33) – **Go to question 109**

Other acute leukemia of ambiguous lineage ~~(8#9)~~ - **Go to question 109B**

109. Specify other acute leukemia: _____

Status at Transplantation:

110. _____ What was the disease status (based on hematologic test results)?

Primary induction failure

1st complete remission (no previous marrow or extramedullary relapse)

2nd complete remission

≥ 3rd complete remission

1st relapse

2nd relapse

≥3rd relapse

No treatment

CIBMTR Center Number: _____ CIBMTR Research ID: _____

111. Date assessed: _____ - **Go to signature line**
 YYYY MM DD

Chronic Myelogenous Leukemia (CML)

Philadelphia chromosome+, Ph+, t(9;22)(q34;q11), or variant OR bcr/abl+

112. Specify CML classification:

- ~~Ph+ / bcr+ (41)~~
- ~~Ph+ / bcr- (42)~~
- ~~Ph+ / bcr unknown (43)~~
- ~~Ph- / bcr+ (44)~~
- ~~Ph unknown / bcr+ (47)~~

113. Was therapy given prior to this HCT?

- Yes - **Go to questions 1133**
- No - **Go to question 1199**

114. Combination chemotherapy

- Yes
- No

115. Hydroxyurea (Droxia, Hydrea)

- Yes
- No

116. Tyrosine kinase inhibitor (e.g. imatinib mesylate, dasatinib, nilotinib)

- Yes
- No

117. Interferon- α (Intron, Roferon) (includes PEG)

- Yes
- No

CIBMTR Center Number: _____

CIBMTR Research ID: _____

118. Other therapy

Yes - **Go to question 118**

No - **Go to question 119**

119. Specify other therapy: _____

120. ~~What was the disease status~~What was the disease status at last evaluation prior to the start of the preparative regimen?

Complete hematologic response~~mission (CHR)~~ - **Go to questions 120120**

~~C~~First chronic phase – **Go to question 124120**

~~Second or greater chronic phase~~ – **Go to question 123**

Accelerated phase - **Go to question 1213**

Blast crisis - **Go to question 1213**

Specify remission:

121. ~~Cytogenetic complete remission (Ph negative)~~Specify level of response

No cytogenetic response (No CyR)

Minimal cytogenetic response

Minor cytogenetic response

Partial cytogenetic response (PCyR)

Major cytogenetic response (MCyR)

Complete cytogenetic response (CCyR)

Major molecular remission (MMR)

Complete molecular remission (CMR) Yes

No

Unknown

122. ~~Molecular complete remission (BCR / ABL negative)~~

Yes

No

Unknown

123. ~~CML disease status before treatment that achieved this CR:~~

~~Chronic phase~~ – **Go to question 124**

~~Accelerated phase~~ – **Go to question 124**

~~Blast phase~~ – **Go to question 124**

124. Number

1st

CIBMTR Center Number: _____ CIBMTR Research ID: _____

- 2nd
- 3rd or higher

125. Date assessed: _____ - **Go to signature line**
 YYYY MM DD

Myelodysplastic (MDS) / Myeloproliferative (MPN) Diseases

126. What was the MDS / MPN subtype at diagnosis? – **If transformed to AML, indicate AML as primary disease; also complete AML Disease Classification questions**

- Refractory cytopenia with unilineage dysplasia (RCUD) (includes refractory anemia (RA)) (51)
- Refractory anemia with ringed sideroblasts (RARS) (55)
- Refractory anemia with excess blasts-1 (RAEB-1) (61)
- Refractory anemia with excess blasts-2 (RAEB-2) (62)
- Refractory cytopenia with multilineage dysplasia (RCMD) (64)
- Childhood myelodysplastic syndrome (Refractory cytopenia of childhood (RCC)) (68)
- Myelodysplastic syndrome with isolated del(5q) (5q- syndrome) (66)
- Myelodysplastic syndrome (MDS), unclassifiable (50)
- Chronic neutrophilic leukemia (165)
- Chronic eosinophilic leukemia, NOS (166)
- Essential thrombocythemia (includes primary thrombocytosis, idiopathic thrombocytosis, hemorrhagic thrombocythemia) (58)
- Polycythemia vera (PCV) (57)
- Primary myelofibrosis (includes chronic idiopathic myelofibrosis (CIMF), angiogenic myeloid metaplasia (AMM), myelofibrosis/sclerosis with myeloid metaplasia (MMM), idiopathic myelofibrosis) (167)
- Myeloproliferative neoplasm (MPN), unclassifiable (60)
- Chronic myelomonocytic leukemia (CMML) (54)
- Juvenile myelomonocytic leukemia (JMML/JCML) (no evidence of Ph¹ or BCR/ABL) (36) – **Go to question 168525**
- Atypical chronic myeloid leukemia, Ph-/bcr/abl- {CML, NOS} (45) - **Go to question 577222**
- Atypical chronic myeloid leukemia, Ph-/bcr unknown {CML, NOS} (46) - **Go to question 577222**
- Atypical chronic myeloid leukemia, Ph unknown/bcr- {CML, NOS} (48) - **Go to question 577222**
- Atypical chronic myeloid leukemia, Ph unknown/bcr unknown {CML, NOS} (49) - **Go to question 577222**
- Myelodysplastic / myeloproliferative neoplasm, unclassifiable (69)

127. Was the disease (MDS/MPN) therapy related?

- Yes
- No
- Unknown

128. Did the recipient have a predisposing condition?

- Yes – **Go to question 1268**
- No – **Go to question 12830**
- Unknown – **Go to question 12830**

129. Specify condition:

- Aplastic anemia – **Go to question 12830**
- Bloom syndrome – **Go to question 12830**
- Down syndrome – **Go to question 12830**
- Fanconi anemia – ~~**Go to question 12830**~~
- Other condition – **Go to question 1279**

130. Specify other condition: _____

Laboratory Studies at Diagnosis of MDS

131. WBC

- Known
- Unknown

132. _____ • _____ x 10⁹/L (x 10³/mm³)
 x 10⁶/L

133. Hemoglobin

- Known
- Unknown

134. _____ • _____ g/dL
 g/L
 mmol/L

135. Was RBC transfused ≤ 30 days before date of test?

- Yes
- No

136. Platelets

CIBMTR Center Number: _____ CIBMTR Research ID: _____

- Known
- Unknown

137. _____ x 10⁹/L (x 10³/mm³)
 x 10⁶/L

138. Were platelets transfused ≤ 7 days before date of test?
 Yes
 No

139. Neutrophils
 Known
 Unknown

140. _____ %

141. Blasts in bone marrow
 Known
 Unknown

142. _____ %

143. Were cytogenetics tested (karyotyping or FISH)?

- Yes – **Go to question 1413**
- No – **Go to question 16870**
- Unknown – **Go to question 1687**

144. Results of tests:

- Abnormalities identified – **Go to question 1424**
- No evaluable metaphases – **Go to question 16870**
- No abnormalities – **Go to question 16870**

Specify abnormalities identified at diagnosis:

145. Specify number of distinct cytogenetic abnormalities:
 One (1)
 Two (2)
 Three (3)
 Four or more (4 or more)

CIBMTR Center Number: _____

CIBMTR Research ID: _____

Monosomy

146. -5
 Yes
 No
147. -7
 Yes
 No
148. -13
 Yes
 No
149. -20
 Yes
 No
150. -Y
 Yes
 No

Trisomy

151. +8
 Yes
 No
152. +19
 Yes
 No

Translocation

153. t(1;3)
 Yes
 No
154. t(2;11)
 Yes

CIBMTR Center Number: _____

CIBMTR Research ID: _____

No

155. t(3;3)

Yes

No

156. t(3;21)

Yes

No

157. t(6;9)

Yes

No

158. t(11;16)

Yes

No

Deletion

159. del(3q) / 3q-

Yes

No

160. del(5q) / 5q-

Yes –

No

161. del(7q) / 7q-

Yes

No

162. del(9q) / 9q-

Yes

No

163. del(11q) / 11q-

Yes

No

164. del(12p) / 12p-

CIBMTR Center Number: _____

CIBMTR Research ID: _____

Yes

No

165. del(13q) / 13q-

Yes

No

166. del(20q) / 20q-

Yes

No

Inversion

167. inv(3)

Yes

No

Other

168. i17q

Yes

No

169. Other abnormality

Yes – **Go to question 1679**

No – **Go to question 16870**

170. Specify other abnormality: _____

171. Did the recipient progress or transform to a different MDS / MPN subtype between diagnosis and the start of the preparative regimen?

Yes – **Go to question 16971**

No – **Go to question 1724**

172. Specify the MDS / MPN subtype after transformation:

Refractory cytopenia with unilineage dysplasia (RCUD) (includes refractory anemia (RA)) (51) – **Go to question 1702**

Refractory anemia with ringed sideroblasts (RARS) (55) – **Go to question 1702**

Refractory anemia with excess blasts-1 (RAEB-1) (61) – **Go to question 1702**

Refractory anemia with excess blasts-2 (RAEB-2) (62) – **Go to question 1702**

CIBMTR Center Number: _____

CIBMTR Research ID: _____

- Refractory cytopenia with multilineage dysplasia (RCMD) (64) – **Go to question 1702**
- Childhood myelodysplastic syndrome (Refractory cytopenia of childhood (RCC)) (68) – **Go to question 1702**
- Myelodysplastic syndrome with isolated del(5q) (5q- syndrome) (66) – **Go to question 1702**
- Myelodysplastic syndrome (MDS), unclassifiable (50) – **Go to question 1702**
- Chronic neutrophilic leukemia (165) – **Go to question 1702**
- Chronic eosinophilic leukemia, NOS (166) – **Go to question 1702**
- Essential thrombocythemia (includes primary thrombocytosis, idiopathic thrombocytosis, hemorrhagic thrombocythemia) (58) – **Go to question 1702**
- Polycythemia vera (PCV) (57) – **Go to question 1702**
- Primary myelofibrosis (includes chronic idiopathic myelofibrosis (CIMF), angiogenic myeloid metaplasia (AMM), myelofibrosis/sclerosis with myeloid metaplasia (MMM), idiopathic myelofibrosis) (167) – **Go to question 1702**
- Myeloproliferative neoplasm (MPN), unclassifiable (60) – **Go to question 1702**
- Chronic myelomonocytic leukemia (CMML) (54) – **Go to question 1702**
- Myelodysplastic / myeloproliferative neoplasm, unclassifiable (69) – **Go to question 1702**
- Transformed to AML (70) – **Go to question 1713.**

173. Specify the date of the most recent transformation: _____ - _____ - _____

Go to question 1724

174. ~~Date of MDS diagnosis: _____~~ – **Go to signature line** ~~Date of MDS diagnosis: _____~~

– Go to signature line

Laboratory studies at last evaluation prior to the start of the preparative regimen:

175. WBC

- Known
- Unknown

176. _____ • _____ x 10⁹/L (x 10³/mm³)
 x 10⁶/L

177. Hemoglobin

- Known
- Unknown

178. _____ • _____ g/dL
 g/L

CIBMTR Center Number: _____ CIBMTR Research ID: _____

mmol/L

179. Was RBC transfused \leq 30 days before date of test?

Yes

No

180. Platelets

Known

Unknown

181. _____ $\times 10^9/L$ ($\times 10^3/mm^3$)

$\times 10^6/L$

182. Were platelets transfused \leq 7 days before date of test?

Yes

No

183. Neutrophils

Known

Unknown

184. _____%

185. Blasts in bone marrow

Known

Unknown

186. _____%

187. Were cytogenetics tested (karyotyping or FISH)?

Yes – **Go to question 1858**

No – **Go to question 2125**

Unknown – **Go to question 2125**

188. Results of tests:

Abnormalities identified – **Go to question 1869**

No evaluable metaphases – **Go to question 2125**

No abnormalities – **Go to question 2125**

Specify cytogenetic abnormalities identified at last evaluation prior to the start of the preparative regimen:

189. Specify number of distinct cytogenetic abnormalities:

- One (1)
- Two (2)
- Three (3)
- Four or more (4 or more)

Monosomy

190. -5
 Yes
 No

191. -7
 Yes
 No

192. -13
 Yes
 No

193. -20
 Yes
 No

194. -Y
 Yes
 No

Trisomy

195. +8
 Yes
 No

196. +19

CIBMTR Center Number: _____

CIBMTR Research ID: _____

Yes

No

Translocation

197. t(1;3)

Yes

No

198. t(2;11)

Yes

No

199. t(3;3)

Yes

No

200. t(3;21)

Yes

No

201. t(6;9)

Yes

No

202. t(11;16)

Yes

No

Deletion

203. del(3q) / 3q-

Yes

No

204. del(5q) / 5q-

Yes

No

205. del(7q) / 7q-

Yes

CIBMTR Center Number: _____

CIBMTR Research ID: _____

No

206. del(9q) / 9q-

Yes

No

207. del(11q) / 11q-

Yes

No

208. del(12p) / 12p-

Yes

No

209. del(13q) / 13q-

Yes

No

210. del(20q) / 20q-

Yes

No

Inversion

211. inv(3)

Yes

No

Other

212. i17q

Yes

No

213. Other abnormality

Yes – **Go to question 2114**

No – **Go to question 2125**

214. Specify other abnormality: _____

Status at Transplantation

215. What was the disease status?

- Complete remission (CR) – requires all of the following, maintained for ≥ 4 weeks: * bone marrow evaluation: $< 5\%$ myeloblasts with normal maturation of all cell lines * peripheral blood evaluation: hemoglobin ≥ 11 g/dL untransfused and without erythropoietin support; ANC $\geq 1000 / \text{mm}^3$ without myeloid growth factor support; platelets $\geq 100 \times 10^9/\text{L}$ without thrombopoietic support; 0% blasts - **Go to question 2169**
- Hematologic improvement (HI) – requires one measurement of the following, maintained for ≥ 8 weeks without ongoing cytotoxic therapy; specify which cell line was measured to determine HI response: * HI-E – hemoglobin increase of ≥ 1.5 g/dL untransfused; for RBC transfusions performed for Hgb ≤ 9.0 , reduction in RBC units transfused in 8 weeks by ≥ 4 units compared to the pre-treatment transfusion number in 8 weeks * HI-P – for pre-treatment platelet count of $> 20 \times 10^9/\text{L}$, platelet absolute increase of $\geq 30 \times 10^9/\text{L}$; for pre-treatment platelet count of $< 20 \times 10^9/\text{L}$, platelet absolute increase of $\geq 20 \times 10^9/\text{L}$ and $\geq 100\%$ from pre-treatment level * HI-N – neutrophil count increase of $\geq 100\%$ from pre-treatment level and an absolute increase of $\geq 500 / \text{mm}^3$ - **Go to question 2136**
- No response (NR) / stable disease (SD) – does not meet the criteria for at least HI, but no evidence of disease progression - **Go to question 2169**
- Progression from hematologic improvement (Prog from HI) – requires at least one of the following, in the absence of another explanation (e.g., infection, bleeding, ongoing chemotherapy, etc.): * $\geq 50\%$ reduction from maximum response levels in granulocytes or platelets * reduction in hemoglobin by ≥ 1.5 g/dL *transfusion dependence - **Go to question 2147**
- Relapse from complete remission (Rel from CR) – requires at least one of the following: * return to pre-treatment bone marrow blast percentage * decrease of $\geq 50\%$ from maximum response levels in granulocytes or platelets * transfusion dependence, or hemoglobin level ≥ 1.5 g/dL lower than prior to therapy - **Go to question 2158**
- Not assessed - **Go to signature line**

216. Specify the cell line examined to determine HI status:

- HI-E – hemoglobin increase of ≥ 1.5 g/dL untransfused; for RBC transfusions performed for Hgb ≤ 9.0 , reduction in RBC units transfused in 8 weeks by ≥ 4 units compared to the pre-treatment transfusion number in 8 weeks - **Go to question 2169**
- HI-P – for pre-treatment platelet count of $> 20 \times 10^9/\text{L}$, platelet absolute increase of $\geq 30 \times 10^9/\text{L}$; for pre-treatment platelet count of $< 20 \times 10^9/\text{L}$, platelet absolute increase of $\geq 20 \times 10^9/\text{L}$ and $\geq 100\%$ from pre-treatment level – **Go to question 2169**
- HI-N – neutrophil count increase of $\geq 100\%$ from pre-treatment level and an absolute increase of $\geq 500 / \text{mm}^3$ - **Go to question 2169**

217. Date of progression: _____ - **Go to question 2169**
 YYYY MM DD218. Date of relapse: _____ - **Go to question 2169**
 YYYY MM DD219. Date assessed: _____ - **Go to signature line**
 YYYY MM DD

Other Leukemia (OL)

220. Specify the other leukemia classification:

- Chronic lymphocytic leukemia (CLL), NOS (34) - **Go to question [575219](#)**
- Chronic lymphocytic leukemia (CLL), B-cell / small lymphocytic lymphoma (SLL) (71) - **Go to question [575219](#)**
- Hairy cell leukemia (35) - **Go to question [578221](#)**
- Hairy cell leukemia variant (75) - **Go to question [578221](#)**
- Monoclonal B-cell lymphocytosis (76) – **Go to signature line**
- Prolymphocytic leukemia (PLL), NOS (37) - **Go to question [575219](#)**
- PLL, B-cell (73) - **Go to question [575219](#)**
- PLL, T-cell (74) - **Go to question [575219](#)**
- Other leukemia, NOS (30) - **Go to question [577220](#)**
- Other leukemia (39) - **Go to question [218574](#)**

221. Specify other leukemia: _____ – **Go to question [577220](#)**

222. Was any 17p abnormality detected?

- Yes – **If disease classification is CLL, go to question [2202](#). If PLL, go to question [2213](#).**
- No

223. Did a histologic transformation to diffuse large B-cell lymphoma (Richter syndrome) occur at any time after CLL diagnosis?

- Yes – **Go to question [583227](#)– Also complete NHL Disease Classification questions**
- No – **Go to question [578222](#)**

Status at transplantation:

224. What was the disease status? (Atypical CML)

- Primary induction failure – **Go to question [579223](#)**
- 1st complete remission (no previous bone marrow or extramedullary relapse) – **Go to question [579223](#)**
- 2nd complete remission – **Go to question [579223](#)**
- ≥ 3rd complete remission – **Go to question [579223](#)**
- 1st relapse – **Go to question [579223](#)**
- 2nd relapse – **Go to question [579223](#)**
- ≥ 3rd relapse – **Go to question [579223](#)**
- No treatment – **Go to signature line**

CIBMTR Center Number: _____

CIBMTR Research ID: _____

225. What was the disease status? (CLL, PLL, Hairy cell leukemia)

- Complete remission (CR)
- Partial remission (PR)
- Stable disease (SD)
- Progressive disease (Prog)
- Untreated
- Not assessed - **Go to signature line**

226. Date assessed: _____ - **Go to signature line**

YYYY MM DD

Hodgkin Lymphoma

227. Specify Hodgkin lymphoma classification:

- Nodular lymphocyte predominant Hodgkin lymphoma (155)
- Lymphocyte-rich (151)
- Nodular sclerosis (152)
- Mixed cellularity (153)
- Lymphocyte depleted (154)
- Hodgkin lymphoma, NOS (150)

Status at transplantation:

228. What was the disease status?

- Disease untreated
- PIF res - Primary induction failure – resistant: NEVER in COMPLETE remission but with stable or progressive disease on treatment.
- PIF sen / PR1 - Primary induction failure – sensitive: NEVER in COMPLETE remission but with partial remission on treatment.
- PIF unk - Primary induction failure – sensitivity unknown
- CR1 - 1st complete remission: no bone marrow or extramedullary relapse prior to transplant
- CR2 - 2nd complete remission
- CR3+ - 3rd or subsequent complete remission
- REL1 unt - 1st relapse – untreated; includes either bone marrow or extramedullary relapse
- REL1 res - 1st relapse – resistant: stable or progressive disease with treatment
- REL1 sen - 1st relapse – sensitive: partial remission (if complete remission was achieved, classify as CR2)
- REL1 unk - 1st relapse – sensitivity unknown

CIBMTR Center Number: _____ CIBMTR Research ID: _____

- REL2 unt - 2nd relapse – untreated: includes either bone marrow or extramedullary relapse
- REL2 res - 2nd relapse – resistant: stable or progressive disease with treatment
- REL2 sen - 2nd relapse – sensitive: partial remission (if complete remission achieved, classify as CR3+)
- REL2 unk - 2nd relapse – sensitivity unknown
- REL3+ unt - 3rd or subsequent relapse – untreated; includes either bone marrow or extramedullary relapse
- REL3+ res - 3rd or subsequent relapse – resistant: stable or progressive disease with treatment
- REL3+ sen - 3rd or subsequent relapse – sensitive: partial remission (if complete remission achieved, classify as CR3+)
- REL3+ unk - 3rd relapse or greater – sensitivity unknown

229. Date assessed: _____ - _____ - _____ - **Go to signature line**
 YYYY MM DD

Non-Hodgkin Lymphoma

230. _____ Specify Non-Hodgkin lymphoma classification:

- Splenic marginal zone B-cell lymphoma (124)
- Extranodal marginal zone B-cell lymphoma of mucosal associated lymphoid tissue type (MALT) (122)
- Nodal marginal zone B-cell lymphoma (± monocytoid B-cells) (123)
- Follicular, predominantly small cleaved cell (Grade I follicle center lymphoma) (102)
- Follicular, mixed, small cleaved and large cell (Grade II follicle center lymphoma) (103)
- Follicular, predominantly large cell (Grade IIIA follicle center lymphoma) (162)
- Follicular, predominantly large cell (Grade IIIB follicle center lymphoma) (163)
- Follicular (grade unknown) (164)
- Mantle cell lymphoma (115)
- Intravascular large B-cell lymphoma (136)
- Primary mediastinal (thymic) large B-cell lymphoma (125)
- Primary effusion lymphoma (138)
- Diffuse, large B-cell lymphoma — NOS (107)
- Burkitt lymphoma (111)
- B-cell lymphoma, unclassifiable, with features intermediate between DLBCL and Burkitt lymphoma (140)
- B-cell lymphoma, unclassifiable, with features intermediate between DLBCL and classical Hodgkin Lymphoma (149)
- T-cell / histiocytic rich large B-cell lymphoma (120)
- Primary diffuse large B-cell lymphoma of the CNS (118)

CIBMTR Center Number: _____ CIBMTR Research ID: _____

- Waldenstrom macroglobulinemia / Lymphoplasmacytic lymphoma (173)
- Other B-cell lymphoma (129) – **Go to question 584228**
- Extranodal NK / T-cell lymphoma, nasal type (137)
- Enteropathy-type T-cell lymphoma (133)
- Hepatosplenic T-cell lymphoma (145)
- Subcutaneous panniculitis-like T-cell lymphoma (146)
- Mycosis fungoides (141)
- Sezary syndrome (142)
- Primary cutaneous CD30+ T-cell lymphoproliferative disorders [Primary cutaneous anaplastic large-cell lymphoma (C-ALCL), lymphoid papulosis] (147)
- Peripheral T-cell lymphoma (PTCL), NOS (130)
- Angioimmunoblastic T-cell lymphoma (131)
- Anaplastic large-cell lymphoma (ALCL), ALK positive (143)
- Anaplastic large-cell lymphoma (ALCL), ALK negative (144)
- T-cell large granular lymphocytic leukemia (126)
- Aggressive NK-cell leukemia (27)
- Adult T-cell lymphoma / leukemia (HTLV1 associated) (134)
- Other T-cell / NK-cell lymphoma (139) – **Go to question 584228**

231. Specify other lymphoma: _____

232. Is the non-Hodgkin lymphoma histology reported at diagnosis a transformation from CLL?

- Yes – **Go to question 587231- Also complete CLL Disease Classification questions**
- No - **Go to question 586230**

233. Is the non-Hodgkin lymphoma histology reported a transformation from, or was it diagnosed at the same time as another lymphoma (not CLL)?

- Yes
- No

Status at Transplantation

234. What was the disease status?

- Disease untreated
- PIF res - Primary induction failure – resistant: NEVER in COMPLETE remission but with stable or progressive disease on treatment.
- PIF sen / PR1 - Primary induction failure – sensitive: NEVER in COMPLETE remission but with partial remission on treatment.
- PIF unk - Primary induction failure – sensitivity unknown

CIBMTR Center Number: _____

CIBMTR Research ID: _____

- CR1 - 1st complete remission: no bone marrow or extramedullary relapse prior to transplant
- CR2 - 2nd complete remission
- CR3+ - 3rd or subsequent complete remission
- REL1 unt - 1st relapse – untreated; includes either bone marrow or extramedullary relapse
- REL1 res - 1st relapse – resistant: stable or progressive disease with treatment
- REL1 sen - 1st relapse – sensitive: partial remission (if complete remission was achieved, classify as CR2)
- REL1 unk - 1st relapse – sensitivity unknown
- REL2 unt - 2nd relapse – untreated: includes either bone marrow or extramedullary relapse
- REL2 res - 2nd relapse – resistant: stable or progressive disease with treatment
- REL2 sen - 2nd relapse – sensitive: partial remission (if complete remission achieved, classify as CR3+)
- REL2 unk - 2nd relapse – sensitivity unknown
- REL3+ unt - 3rd or subsequent relapse – untreated; includes either bone marrow or extramedullary relapse
- REL3+ res - 3rd or subsequent relapse – resistant: stable or progressive disease with treatment
- REL3+ sen - 3rd or subsequent relapse – sensitive: partial remission (if complete remission achieved, classify as CR3+)
- REL3+ unk - 3rd relapse or greater – sensitivity unknown

235. Date assessed: _____ - ***Go to signature line***
YYYY MM DD

Multiple Myeloma / Plasma Cell Disorder (PCD)

236. _____ Specify the multiple myeloma/plasma cell disorder (PCD) classification:

- Multiple myeloma-IgG (181) - **Go to questions 591235**
- Multiple myeloma-IgA (182) - **Go to questions 235591**
- Multiple myeloma-IgD (183) - **Go to questions 235591**
- Multiple myeloma-IgE (184) - **Go to questions 235591**
- Multiple myeloma-IgM (not Waldenstrom macroglobulinemia) (185) - **Go to questions 235591**
- Multiple myeloma-light chain only (186) - **Go to questions 235591**
- Multiple myeloma-non-secretory (187) - **Go to questions 592236**
- Plasma cell leukemia (172) - **Go to question 597241**
- Solitary plasmacytoma (no evidence of myeloma) (175) - **Go to question 241597**
- Amyloidosis (174) - **Go to question 241597**
- Osteosclerotic myeloma / POEMS syndrome (176) - **Go to questions 241597**

Light chain deposition disease (177) - **Go to questions 241597**

Other plasma cell disorder (179) - **Go to question 590234**

237. Specify other plasma cell disorder: _____ - **Go to question 241597**

238. _____ Light chain

kappa

lambda

239. What was the Durie-Salmon staging (at diagnosis)?

Stage I (All of the following: Hgb > 10g/dL; serum calcium normal or <10.5 mg/dL; bone x-ray normal bone structure (scale 0), or solitary bone plasmacytoma only; low M-component production rates IgG < 5g/dL, IgA < 3g/dL; urine light chain M-component on electrophoresis <4g/24h) – **Go to questions 593237**

Stage II (Fitting neither Stage I or Stage III) – **Go to questions 593237**

Stage III (One of more of the following: Hgb < 8.5 g/dL; serum calcium > 12 mg/dL; advanced lytic bone lesions (scale 3); high M-component production rates IgG >7g/dL, IgA > 5g/dL; Bence Jones protein >12g/24h) – **Go to questions 593237**

Unknown – **Go to questions 594238**

240. What was the Durie-Salmon sub classification (at diagnosis)?

A - relatively normal renal function (serum creatinine < 2.0 mg/dL)

B - abnormal renal function (serum creatinine ≥ 2.0 mg/dL)

I.S.S.:

241. Serum β_2 -microglobulin: _____ • _____

_____ μ g/dL

mg/L

nmol/L

242. Serum albumin: _____ • _____ g/dL

g/L

243. Stage

1 (β_2 -mic < 3.5, S. albumin > 3.5)

2 (β_2 -mic 3.5–< 5.5, S. albumin —)

3 (β_2 -mic ≥ 5.5; S. albumin —)

244. Were cytogenetics tested (karyotyping or FISH)?

Yes – **Go to questions 598242**

CIBMTR Center Number: _____

CIBMTR Research ID: _____

No – **Go to question [619263](#)**

Unknown – **Go to question [619263](#)**

245. Results of tests:

Abnormalities identified – **Go to question [599243](#)**

No evaluable metaphases – **Go to question [619263](#)**

No abnormalities – **Go to question [619263](#)**

Specify cytogenetic abnormalities identified at any time prior to the start of the preparative regimen:

Trisomy

246. +3

Yes

No

247. +5

Yes

No

248. +7

Yes

No

249. +9

Yes

No

250. +11

Yes

No

251. +15

Yes

No

252. +19

Yes

No

CIBMTR Center Number: _____

CIBMTR Research ID: _____

Translocation

253. t(4;14)

Yes

No

254. t(6;14)

Yes

No

255. t(11;14)

Yes

No

256. t(14;16)

Yes

No

257. t(14;20)

Yes

No

Deletion

258. del 13/13q-

Yes

No

259. del 17/17p-

Yes

No

Other

260. Hyperdiploid (>50)

Yes

No

261. Hypodiploid (<46)

Yes

CIBMTR Center Number: _____

CIBMTR Research ID: _____

No

262. Any abnormality at 1q

Yes

No

263. Any abnormality at 1p

Yes

No

264. Other abnormality

Yes — *Go to question 618*

No — *Go to question 619*

265. Specify other abnormality: _____

Status at transplantation:

266. _____ What was the disease status?

Stringent complete remission (sCR). - CR as defined, plus: normal free light chain ratio, and absence of clonal cells in the bone marrow by immunohistochemistry or immunofluorescence (confirmation with repeat bone marrow biopsy not needed). (Presence and/or absence of clonal cells is based upon the κ/λ ratio. An abnormal κ/λ ratio by immunohistochemistry and/or immunofluorescence requires a minimum of 100 plasma cells for analysis. An abnormal ratio reflecting the presence of an abnormal clone is κ/λ of $> 4:1$ or $< 1:2$.) sCR requires two consecutive assessments made at any time before the institution of any new therapy, and no known evidence of progressive or new bone lesions if radiographic studies were performed; radiographic studies are not required to satisfy sCR requirements.

Complete remission (CR) — negative immunofixation on serum and urine samples, and disappearance of any soft tissue plasmacytomas, and $\leq 5\%$ plasma cells in the bone marrow (confirmation with repeat bone marrow biopsy not needed). CR requires two consecutive assessments made at any time before the institution of any new therapy, and no known evidence of progressive or new bone lesions if radiographic studies were performed; radiographic studies are not required to satisfy CR requirements.

Near complete remission (nCR) — serum & urine M-protein detectable by immunoelectrophoresis (IFE), but not on electrophoresis (negative SPEP & UPEP); $\leq 5\%$ plasma cells in bone marrow. nCR requires two consecutive assessments made at any time before the initiation of any new therapy, and no known evidence of progressive or new bone lesions if radiographic studies were performed; radiographic studies are not required to satisfy nCR requirements.

Very good partial remission (VGPR) — serum and urine M-protein detectable by immunofixation but not on electrophoresis, or $\geq 90\%$ reduction in serum M-protein and urine M-protein level < 100 mg/24 hours. VGPR requires two consecutive assessments made at any time before the institution of any new therapy, and no known evidence of progressive or new bone lesions if radiographic studies were performed; radiographic studies are not required to satisfy VGPR requirements.

Partial remission (PR) — $\geq 50\%$ reduction in serum M-protein, and reduction in 24-hour urinary M-protein by $\geq 90\%$ or to < 200 mg/24 hours. If the serum and urine M-protein are unmeasurable (i.e., do not meet any of the following criteria: • serum M-protein ≥ 1 g/dL. Urine M-protein ≥ 200 mg/24 hours • serum free light chain assay shows involved level ≥ 10 mg/dL, provided serum free light chain ratio is abnormal), a $\geq 50\%$ decrease in

CIBMTR Center Number: _____

CIBMTR Research ID: _____

the difference between involved and uninvolved free light chain levels is required in place of the M-protein criteria. If serum and urine M-protein are unmeasurable, and serum free light assay is also unmeasurable, a $\geq 50\%$ reduction in plasma cells is required in place of M-protein, provided the baseline bone marrow plasma cell percentage was $\geq 30\%$. In addition to the above listed criteria, a $\geq 50\%$ reduction in the size of soft tissue plasmacytomas is also required, if present at baseline. PR requires two consecutive assessments made at any time before the institution of any new therapy, and no known evidence of progressive or new bone lesions if radiographic studies were performed; radiographic studies are not required to satisfy PR requirements.

Stable disease (SD) — not meeting the criteria for CR, VGPR, PR or PD. SD requires two consecutive assessments made at any time before the institution of any new therapy, and no known evidence of progressive or new bone lesions if radiographic studies were performed; radiographic studies are not required to satisfy SD requirements.

Progressive disease (PD) — requires any one or more of the following: Increase of $\geq 25\%$ from baseline in: serum M-component and/or (absolute increase ≥ 0.5 g/dL) (for progressive disease, serum M-component increases of ≥ 1 g/dL are sufficient to define relapse if the starting M-component is ≥ 5 g/dL). Urine M-component and/or (absolute increase ≥ 200 mg.24 hours) for recipients without measurable serum and urine M-protein levels: the difference between involved and uninvolved free light chain levels (absolute increase > 10 mg/dL). Bone marrow plasma cell percentage (absolute percentage $\geq 10\%$) (relapse from CR has a 5% cutoff vs. 10% for other categories of relapse) definite development of new bone lesions or soft tissue plasmacytomas, or definite increase in the size of any existing bone lesions or soft tissue plasmacytomas. Development of hypercalcemia (corrected serum calcium > 11.5 mg/dL or 2.65 mmol) that can be attributed solely to the plasma cell proliferative disorder PD requires two consecutive assessments made at any time before classification as disease progression, and/or the institution of any new therapy

Relapse from CR (Rel) (untreated) — requires one or more of the following: reappearance of serum or urine M-protein by immunofixation or electrophoresis development of $\geq 5\%$ plasma cells in the bone marrow (relapse from CR has a 5% cutoff vs. 10% for other categories of relapse) appearance of any other sign of progression (e.g., new plasmacytoma, lytic bone lesion, hypercalcemia) Rel requires two consecutive assessments made at any time before classification as relapse, and/or the institution of any new therapy.

Unknown

Not applicable (Amyloidosis with no evidence of myeloma)

267. Date assessed: _____ - **Go to signature line**

YYYY

MM

DD

Solid Tumors

268. Specify the solid tumor classification:

Breast cancer (250)

Lung, small cell (202)

Lung, non-small cell (203)

Lung, not otherwise specified (230)

Germ cell tumor, extragonadal (225)

CIBMTR Center Number: _____

CIBMTR Research ID: _____

- Testicular (210)
- Ovarian (epithelial) (214)
- Bone sarcoma (excluding Ewing family tumors) (273)
- Ewing family tumors of bone (including PNET) (275)
- Ewing family tumors, extraosseous (including PNET) (276)
- Fibrosarcoma (244)
- Hemangiosarcoma (246)
- Leiomyosarcoma (242)
- Liposarcoma (243)
- Lymphangio sarcoma (247)
- Neurogenic sarcoma (248)
- Rhabdomyosarcoma (232)
- Synovial sarcoma (245)
- Soft tissue sarcoma (excluding Ewing family tumors) (274)
- Central nervous system tumor, including CNS PNET (220)
- Medulloblastoma (226)
- Neuroblastoma (222)
- Head / neck (201)
- Mediastinal neoplasm (204)
- Colorectal (228)
- Gastric (229)
- Pancreatic (206)
- Hepatobiliary (207)
- Prostate (209)
- External genitalia (211)
- Cervical (212)
- Uterine (213)
- Vaginal (215)
- Melanoma (219)
- Wilm tumor (221)
- Retinoblastoma (223)
- Thymoma (231)
- Renal cell (208)
- Other solid tumor (269) – **Go to question [622266](#)**
- Solid tumor, not otherwise specified (200)

269. Specify other solid tumor: _____

- **Go to signature line**

Severe Aplastic Anemia

270. Specify the severe aplastic anemia classification:

- Acquired severe aplastic anemia, not otherwise specified (301)
- Acquired SAA secondary to hepatitis (302)
- Acquired SAA secondary to toxin / other drug (303)
- Acquired amegakaryocytosis (not congenital) (304)
- Acquired pure red cell aplasia (not congenital) (306)
- Dyskeratosis congenita (307)
- Other acquired cytopenic syndrome (309) – **Go to question [624268](#)**

271. Specify other acquired cytopenic syndrome: _____

- **Go to signature line**

Inherited Abnormalities of Erythrocyte Differentiation or Function

272. Specify the inherited abnormalities of erythrocyte differentiation or function classification:

- Paroxysmal nocturnal hemoglobinuria (PNH) (56)
- Shwachman-Diamond (305)
- Diamond-Blackfan anemia (pure red cell aplasia) (312)
- Other constitutional anemia (319) – **Go to question [626270](#)**
- Fanconi anemia (311) (If the recipient developed MDS or AML, indicate MDS or AML as the primary disease).
- Sickle thalassemia (355)
- Sickle cell disease (356)
- Beta thalassemia major (357)
- Other hemoglobinopathy (359) – **Go to question [627271](#)**

273. Specify other constitutional anemia: _____

274. Specify other hemoglobinopathy: _____

- **Go to signature line**

Disorders of the Immune System

275. Specify disorder of immune system classification:

- Adenosine deaminase (ADA) deficiency / severe combined immunodeficiency (SCID) (401)
- Absence of T and B cells SCID (402)
- Absence of T, normal B cell SCID (403)
- Omenn syndrome (404)
- Reticular dysgenesis (405)
- Bare lymphocyte syndrome (406)
- Other SCID (419) – **Go to question [629273](#)**
- SCID, not otherwise specified (410)
- Ataxia telangiectasia (451)
- HIV infection (452)
- DiGeorge anomaly (454)
- Common variable immunodeficiency (457)
- Leukocyte adhesion deficiencies, including GP180, CD-18, LFA and WBC adhesion deficiencies (459)
- Kostmann agranulocytosis (congenital neutropenia) (460)
- Neutrophil actin deficiency (461)
- Cartilage-hair hypoplasia (462)
- CD40 ligand deficiency (464)
- Other immunodeficiencies (479) – **Go to question [630274](#)**
- Immune deficiency, not otherwise specified (400)
- Chediak-Higashi syndrome (456)
- Griscelli syndrome type 2 (465)
- Hermansky-Pudlak syndrome type 2 (466)
- Chronic granulomatous disease (455)
- Wiskott-Aldrich syndrome (453)
- X-linked lymphoproliferative syndrome (458)

276. Specify other SCID: _____

277. Specify other immunodeficiency: _____

- **Go to signature line**

Inherited Abnormalities of Platelets

278. Specify inherited abnormalities of platelets classification:

- Congenital amegakaryocytosis / congenital thrombocytopenia (501)
- Glanzmann thrombasthenia (502)
- Other inherited platelet abnormality (509) – **Go to question [277276](#)**

279. Specify other inherited platelet abnormality: _____

- **Go to signature line**

Inherited Disorders of Metabolism

280. Specify inherited disorders of metabolism classification:

- Osteopetrosis (malignant infantile osteopetrosis) (521)

Leukodystrophies

- Metachromatic leukodystrophy (MLD) (542)
- Adrenoleukodystrophy (ALD) (543)
- Krabbe disease (globoid leukodystrophy) (544)
- Lesch-Nyhan (HGPRT deficiency) (522)
- Neuronal ceroid lipofuscinosis (Batten disease) (523)

Mucopolysaccharidoses

- Hurler syndrome (IH) (531)
- Scheie syndrome (IS) (532)
- Hunter syndrome (II) (533)
- Sanfilippo (III) (534)
- Morquio (IV) (535)
- Maroteaux-Lamy (VI) (536)
- β -glucuronidase deficiency (VII) (537)
- Mucopolysaccharidosis (V) (538)
- Mucopolysaccharidosis, not otherwise specified (530)

Mucolipidoses

CIBMTR Center Number: _____

CIBMTR Research ID: _____

- Gaucher disease (541)
- Niemann-Pick disease (545)
- I-cell disease (546)
- Wolman disease (547)
- Glucose storage disease (548)
- Mucopolysaccharidoses, not otherwise specified (540)

Polysaccharide hydrolase abnormalities

- Aspartyl glucosaminidase (561)
- Fucosidosis (562)
- Mannosidosis (563)
- Polysaccharide hydrolase abnormality, not otherwise specified (560)
- Other inherited metabolic disorder (529) – **Go to question [634278](#)**
- Inherited metabolic disorder, not otherwise specified (520)

281. Specify other inherited metabolic disorder: _____

- **Go to signature line**

Histiocytic disorders

282. Specify histiocytic disorder classification:

- Hemophagocytic lymphohistiocytosis (HLH) (571)
- Langerhans cell histiocytosis (histiocytosis-X) (572)
- Hemophagocytosis (reactive or viral associated) (573)
- Malignant histiocytosis (574)
- Other histiocytic disorder (579) – **Go to question [636280](#)**
- Histiocytic disorder, not otherwise specified (570)

283. Specify other histiocytic disorder: _____

- **Go to signature line**

Autoimmune Diseases

284. Specify autoimmune disease classification:

Arthritis

- Rheumatoid arthritis (603)
- Psoriatic arthritis / psoriasis (604)
- Juvenile idiopathic arthritis (JIA): systemic (Stills disease) (640)
- Juvenile idiopathic arthritis (JIA): oligoarticular (641)
- Juvenile idiopathic arthritis (JIA): polyarticular (642)
- Juvenile idiopathic arthritis (JIA): other (643) **Go to question [638282](#)**
- Other arthritis (633) – **Go to question [639283](#)**

Multiple sclerosis

- Multiple sclerosis (602)

Connective tissue diseases

- Systemic sclerosis (scleroderma) (607)
- Systemic lupus erythematosus (SLE) (605)
- Sjögren syndrome (608)
- Polymyositis / dermatomyositis (606)
- Antiphospholipid syndrome (614)
- Other connective tissue disease (634) – **Go to question [640284](#)**

Vasculitis

- Wegener granulomatosis (610)
- Classical polyarteritis nodosa (631)
- Microscopic polyarteritis nodosa (632)
- Churg-Strauss (635)
- Giant cell arteritis (636)
- Takayasu (637)
- Behcet syndrome (638)
- Overlap necrotizing arteritis (639)
- Other vasculitis (611) – **Go to question [641285](#)**

Other neurological autoimmune diseases

- Myasthenia gravis (601)
- Other autoimmune neurological disorder (644) – **Go to question [642286](#)**

Hematological autoimmune diseases

- Idiopathic thrombocytopenic purpura (ITP) (645)
- Hemolytic anemia (646)
- Evan syndrome (647)
- Other autoimmune cytopenia (648) – **Go to question [643287](#)**

Bowel diseases

CIBMTR Center Number: _____ CIBMTR Research ID: _____

- Crohn's disease (649)
- Ulcerative colitis (650)
- Other autoimmune bowel disorder (651) – **Go to question [644288](#)**

285. Specify other arthritis: _____
286. Specify other juvenile idiopathic arthritis (JIA): _____
287. Specify other connective tissue disease: _____
288. Specify other vasculitis: _____
289. Specify other autoimmune neurological disorder: _____
290. Specify other autoimmune cytopenia: _____
291. Specify other autoimmune bowel disorder: _____

- Go to signature line

Other Disease

292. Specify other disease: _____

First Name: _____

Last Name: _____

E-mail address: _____

Date: _____
 YYYY MM DD