Pre-Transplant Essential Data: Disease Classification

CIBMTR Use Only

Sequence Number:

Date Received:

OMB No: 0915-0310
Expiration Date: 1/31/2020

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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:~~

CIBMTR Center Number: ___ ___ ___ ___ ___ CIBMTR Research ID: ___ ___ ___ ___ ___ ___ ___ ___ ___ ___

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 85***
- ☐ Acute leukemia of ambiguous lineage and other myeloid neoplasms (80) ***- Go to question 146***
- ☐ Chronic myelogenous leukemia (CML) (40) ***- Go to question 150***
- ☐ 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 161***
- ☐ Other leukemia (30) (includes CLL) ***- Go to question 255***
- ☐ Hodgkin lymphoma (150) ***- Go to question 262***
- ☐ Non-Hodgkin lymphoma (100) ***- Go to question 265***
- ☐ Multiple myeloma / plasma cell disorder (PCD) (170) ***- Go to question 271***
- ☐ Solid tumors (200) ***- Go to question 303***
- ☐ Severe aplastic anemia (300) (If the recipient developed MDS or AML, indicate MDS or AML as the primary disease) ***- Go to question 305***
- ☐ Inherited abnormalities of erythrocyte differentiation or function (310) ***- Go to question 307***
- ☐ Disorders of the immune system (400) ***- Go to question 310***
- ☐ Inherited abnormalities of platelets (500) ***- Go to question 313***
- ☐ Inherited disorders of metabolism (520) ***- Go to question 315***
- ☐ Histiocytic disorders (570) ***- Go to question 317***
- ☐ Autoimmune diseases (600) ***- Go to question 319***
- ☐ Other disease (900) ***- Go to question 327***

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 (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); 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;1q22) or t(16;16)(p13.1; q22); CBFB-MYH11 (282)
- ☐ APL with PML-RARA (283)
- ☐ AML with BCR-ABL1 (provisional entity) (3)
- ☐ AML with mutated NPM1 (4)
- ☐ AML with biallelic mutations of CEBPA (297)
- ☐ AML with mutated RUNX1 (provisional entity) (298)
- ☐ 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, not otherwise specified

- ☐ AML, not otherwise specified (280)
- ☐ AML, minimally differentiated (286)
- ☐ AML without maturation (287)
- ☐ AML with maturation (288)
- ☐ Acute myelomonocytic leukemia (289)
- ☐ Acute monoblastic / acute monocytic leukemia (290)
- ☐ Acute erythroid leukemia (erythroid / myeloid and pure erythroleukemia) (291)
- ☐ Acute megakaryoblastic leukemia (292)
- ☐ Acute basophilic leukemia (293)
- ☐ Acute panmyelosis with myelofibrosis (294)
- ☐ Myeloid sarcoma (295)
- ☐ Myeloid leukemia associated with Down syndrome (299)

~~3.~~4. Did AML transform from MDS or MPN?

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

~~4.~~5. Is the disease (AML) therapy related?

- ☐ Yes
- ☐ No
- ☐ Unknown

~~5.~~6. Did the recipient have a predisposing condition?

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

☐ Unknown - ***Go to question 9***

~~6.~~7. Specify condition:

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

~~7.~~8. Specify other condition: _____

Labs at diagnosis

9. Were cytogenetics tested (karyotyping or FISH)? (at diagnosis)

☐ Yes - ***Go to question 10***

☐ No - ***Go to question 20***

☐ Unknown - ***Go to question 20***

10. Were cytogenetics tested via FISH?

☐ Yes – ***Go to question 11***

☐ No - ***Go to question 15***

11. Results of tests:

☐ Abnormalities identified – ***Go to question 12***

☐ No abnormalities - ***Go to question 15***

Specify cytogenetic abnormalities identified at diagnosis:

12. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

13. Specify abnormalities (check all that apply)

☐ -5

☐ -7

☐ -17

☐ -18

☐ -X

☐ -Y

☐ +4

☐ +8

☐ +11

☐ +13

☐ +14

☐ +21

☐ +22

☐ t(3;3)

☐ t(6;9)

Commented [EL1]: 1.Add some additional instructions around how to answer these for patients that had a prior fanconi, and give examples.

Commented [EL2]: 2.Same format as 2400 Q499
3.
4.Check to see what validations can be done.

Commented [EL3]: 5.For FA patients, clonal abnormalities come and go. May have gotten several bone marrow biopsies. Do we really want every abnormality detected to be reported here?
6.
7.For this question – we're looking to get abnormalities detected since the transformation to AML.
8.
9.With how it's worded, we may be capturing more than needed for patients with a previous fanconi.

☐ t(8;21)
☐ t(9;11)
☐ t(9;22)
☐ t(15;17) and variants
☐ t(16;16)
☐ del(3q) / 3q–
☐ del(5q) / 5q–
☐ del(7q) / 7q–
☐ del(9q) / 9q–
☐ del(11q) / 11q–
☐ del(16q) / 16q–
☐ del(17q) / 17q–
☐ del(20q) / 20q–
☐ del(21q) / 21q–
☐ inv(3)
☐ inv(16)
☐ (11q23) any abnormality
☐ 12p any abnormality
☐ Other abnormality - ***Go to question 14***

14. Specify other abnormality: _____

15. Were cyteogenetics tested via karyotyping?

☐ Yes – ***Go to question 16***
☐ No - ***Go to question 20***

16. Results of tests:

☐ Abnormalities identified – ***Go to question 17***
☐ No evaluable metaphases - ***Go to question 20***
☐ No abnormalities - ***Go to question 20***

Specify cytogenetic abnormalities identified at diagnosis:

17. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

Commented [EL4]: 10.Add some additional instructions around how to answer these for patients that had a prior fanconi, and give examples.

Commented [EL5]: 11.Same format as 2400 Q499
12.
13.Check to see what validations can be done.

Commented [EL6]: 14.For FA patients, clonal abnormalities come and go. May have gotten several bone marrow biopsies. Do we really want every abnormality detected to be reported here?
15.
16.For this question – we're looking to get abnormalities detected since the transformation to AML.
17.
18.With how it's worded, we may be capturing more than needed for patients with a previous fanconi.

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

18. Specify abnormalities: (check all that apply)

☐ -5

☐ -7

☐ -17

☐ -18

☐ -X

☐ -Y

☐ +4

☐ +8

☐ +11

☐ +13

☐ +14

☐ +21

☐ +22

☐ t(3;3)

☐ t(6;9)

☐ t(8;21)

☐ t(9;11)

☐ t(9;22)

☐ t(15;17) and variants

☐ t(16;16)

☐ del(3q) / 3q–

☐ del(5q) / 5q–

☐ del(7q) / 7q–

☐ del(9q) / 9q–

☐ del(11q) / 11q–

☐ del(16q) / 16q–

☐ del(17q) / 17q–

☐ del(20q) / 20q–

☐ del(21q) / 21q–

☐ inv(3)

☐ inv(16)

☐ (11q23) any abnormality

☐ 12p any abnormality

☐ Other abnormality - ***Go to question 19***

19. Specify other abnormality: _____

20. Were tests for molecular markers performed (e.g. PCR, NGS)? (at diagnosis)

☐ Yes – ***Go to question 21***

☐ No – ***Go to question 31***

☐ Unknown – ***Go to question 31***

Specify molecular markers identified at diagnosis:

21. CEBPA

☐ Positive – ***Go to question 22***

☐ Negative - ***Go to question 23***

☐ Not done - ***Go to question 23***

22. Specify CEBPA mutation

☐ Biallelic (homozygous)

☐ Monoallelic (heterozygous)

☐ Unknown

23. FLT3 – D835 point mutation

☐ Positive

☐ Negative

☐ Not done

24. FLT3 – ITD mutation

☐ Positive

☐ Negative

☐ Not done

25. IDH1

☐ Positive

☐ Negative

☐ Not done

26. IDH2

☐ Positive

☐ Negative

☐ Not done

27. KIT

☐ Positive

☐ Negative

☐ Not done

28. NPM1

☐ Positive

☐ Negative

☐ Not done

29. Other molecular marker

☐ Positive- ***Go to question 30***

☐ Negative- ***Go to question 30***

☐ Not done- ***Go to question 31***

30. Specify other molecular marker: _____

Copy and complete questions 29-30 for multiple molecular markers

Labs at last evaluation prior to the start of the preparative regimen

31. Were cytogenetics tested (karyotyping or FISH)? (at last evaluation)

☐ Yes - ***Go to question 32***

☐ No - ***Go to question 42***

☐ Unknown - ***Go to question 42***

32. Were cyteogenetics tested via FISH?

☐ Yes – ***Go to question 33***

☐ No - ***Go to question 37***

33. Results of tests:

☐ Abnormalities identified – ***Go to question 34***

☐ No abnormalities - ***Go to question 37***

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

34. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

35. Specify abnormalities (check all that apply)

☐ -5

☐ -7

☐ -17

☐ -18

☐ -X

☐ -Y

☐ +4

☐ +8

☐ +11

☐ +13

☐ +14

☐ +21

☐ +22

☐ t(3;3)

☐ t(6;9)

☐ t(8;21)

☐ t(9;11)

☐ t(9;22)

☐ t(15;17) and variants

☐ t(16;16)

☐ del(3q) / 3q–

☐ del(5q) / 5q–

☐ del(7q) / 7q–

☐ del(9q) / 9q–

☐ del(11q) / 11q–

☐ del(16q) / 16q–

☐ del(17q) / 17q–

☐ del(20q) / 20q–

☐ del(21q) / 21q–

☐ inv(3)

☐ inv(16)

☐ (11q23) any abnormality

☐ 12p any abnormality

☐ Other abnormality - ***Go to question 36***

36. Specify other abnormality: _____

37. Were cyteogenetics tested via karyotyping?

☐ Yes – ***Go to question 38***

☐ No - ***Go to question 42***

38. Results of tests:

☐ Abnormalities identified – ***Go to question 39***

☐ No evaluable metaphases - ***Go to question 42***

☐ No abnormalities - ***Go to question 42***

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

39. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

40. Specify abnormalities (check all that apply)

☐ -5

☐ -7

☐ -17

☐ -18

☐ -X

☐ -Y

☐ +4

☐ +8

☐ +11

☐ +13

☐ +14

☐ +21

☐ +22

☐ t(3;3)
☐ t(6;9)
☐ t(8;21)
☐ t(9;11)
☐ t(9;22)
☐ t(15;17) and variants
☐ t(16;16)
☐ del(3q) / 3q–
☐ del(5q) / 5q–
☐ del(7q) / 7q–
☐ del(9q) / 9q–
☐ del(11q) / 11q–
☐ del(16q) / 16q–
☐ del(17q) / 17q–
☐ del(20q) / 20q–
☐ del(21q) / 21q–
☐ inv(3)
☐ inv(16)
☐ (11q23) any abnormality
☐ 12p any abnormality
☐ Other abnormality - ***Go to question 41***

41.Specify other abnormality: _____

42. Were tests for molecular markers performed (e.g. PCR)? (at last evaluation)

☐ Yes **– *Go to question 43***
☐ No **– *Go to question 55***
☐ Unknown **– *Go to question 55***

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

43. CEBPA

☐ Positive – ***Go to question 44***
☐ Negative - ***Go to question 45***
☐ Not done **- *Go to question 45***

44. Specify CEBPA mutation

☐ Biallelic (homozygous)

☐ Monoallelic (heterozygous)

☐ Unknown

45. FLT3 – D835 point mutation

☐ Positive

☐ Negative

☐ Not done

46. FLT3 – ITD mutation

☐ Positive - ***Go to question 47***

☐ Negative - ***Go to question 49***

☐ Not done - ***Go to question 49***

47. FLT3 – ITD allelic ratio

☐ Known - ***Go to question 48***

☐ Unknown - ***Go to question 49***

48. Specify FLT3 - ITD allelic ratio: ___.___

Commented [EL7]: 19.0.3-0.7

49. IDH1

☐ Positive

☐ Negative

☐ Not done

50. IDH2

☐ Positive

☐ Negative

☐ Not done

51. KIT

☐ Positive

☐ Negative

☐ Not done

52. NPM1

☐ Positive

☐ Negative

☐ Not done

53. Other molecular marker

☐ Positive- ***Go to question 54***

☐ Negative- ***Go to question 54***

☐ Not done- ***Go to question 55***

54. Specify other molecular marker: _____

Copy and complete questions 53-54 to report multiple other molecular markers

Labs between diagnosis and last evaluation prior to the start of the preparative regimen

55. Were cytogenetics tested (karyotyping or FISH)? (between diagnosis and last evaluation)

☐ Yes - ***Go to question 56***

☐ No - ***Go to question 66***

☐ Unknown - ***Go to question 66***

56. Were cytogenetics tested via FISH?

☐ Yes – ***Go to question 57***

☐ No - ***Go to question 61***

57. Results of tests:

☐ Abnormalities identified – ***Go to question 58***

☐ No abnormalities - ***Go to question 61***

Specify cytogenetic abnormalities identified between diagnosis and last evaluation:

58. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

59. Specify abnormalities (check all that apply)

☐ -5

☐ -7

☐ -17

☐ -18

☐ -X

☐ -Y
☐ +4
☐ +8
☐ +11
☐ +13
☐ +14
☐ +21
☐ +22
☐ t(3;3)
☐ t(6;9)
☐ t(8;21)
☐ t(9;11)
☐ t(9;22)
☐ t(15;17) and variants
☐ t(16;16)
☐ del(3q) / 3q–
☐ del(5q) / 5q–
☐ del(7q) / 7q–
☐ del(9q) / 9q–
☐ del(11q) / 11q–
☐ del(16q) / 16q–
☐ del(17q) / 17q–
☐ del(20q) / 20q–
☐ del(21q) / 21q–
☐ inv(3)
☐ inv(16)
☐ (11q23) any abnormality
☐ 12p any abnormality
☐ Other abnormality - ***Go to question 60***

60. Specify other abnormality: _____

61. Were cyteogenetics tested via karyotyping?

☐ Yes – ***Go to question 62***
☐ No - ***Go to question 66***

62. Results of tests:

☐ Abnormalities identified – ***Go to question 63***

☐ No evaluable metaphases - ***Go to question 66***

☐ No abnormalities - ***Go to question 66***

Specify cytogenetic abnormalities identified between diagnosis and last evaluation:

63. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

64. Specify abnormalities (check all that apply)

☐ -5

☐ -7

☐ -17

☐ -18

☐ -X

☐ -Y

☐ +4

☐ +8

☐ +11

☐ +13

☐ +14

☐ +21

☐ +22

☐ t(3;3)

☐ t(6;9)

☐ t(8;21)

☐ t(9;11)

☐ t(9;22)

☐ t(15;17) and variants

☐ t(16;16)

☐ del(3q) / 3q–

☐ del(5q) / 5q–

☐ del(7q) / 7q–

☐ del(9q) / 9q–

☐ del(11q) / 11q–

☐ del(16q) / 16q–

☐ del(17q) / 17q–

☐ del(20q) / 20q–

☐ del(21q) / 21q–

☐ inv(3)

☐ inv(16)

☐ (11q23) any abnormality

☐ 12p any abnormality

☐ Other abnormality - ***Go to question 65***

65. Specify other abnormality: _____

66. Were tests for molecular markers performed (e.g. PCR)? (between diagnosis and last evaluation)

☐ Yes – ***Go to question 67***

☐ No – ***Go to question 79***

☐ Unknown – ***Go to question 79***

Specify molecular markers identified between diagnosis and last evaluation:

67. CEBPA

☐ Positive – ***Go to question 68***

☐ Negative - ***Go to question 69***

☐ Not done - ***Go to question 69***

68. Specify CEBPA mutation

☐ Biallelic (homozygous)

☐ Monoallelic (heterozygous)

☐ Unknown

69. FLT3 – D835 point mutation

☐ Positive

☐ Negative

☐ Not done

70. FLT3 – ITD mutation

☐ Positive - ***Go to question 71***

☐ Negative - ***Go to question 73***

☐ Not done - ***Go to question 73***

71. FLT3 – ITD allelic ratio

☐ Known - ***Go to question 72***

☐ Unknown - ***Go to question 73***

72. Specify FLT3 - ITD allelic ratio: ___.___

Commented [EL8]: 20.0.3-0.7

73. IDH1

☐ Positive

☐ Negative

☐ Not done

74. IDH2

☐ Positive

☐ Negative

☐ Not done

75. KIT

☐ Positive

☐ Negative

☐ Not done

76. NPM1

☐ Positive

☐ Negative

☐ Not done

77. Other molecular marker

☐ Positive- ***Go to question 78***

☐ Negative- ***Go to question 78***

☐ Not done- ***Go to question 79***

78. Specify other molecular marker: _____

Copy and complete questions 77-78 to report multiple other molecular markers

CNS Leukemia

79. Did the recipient have central nervous system leukemia at any time prior to the start of the preparative regimen / infusion?

☐ Yes

☐ No

☐ Unknown

Commented [EL9]: 21.Need to clarify that this is negative lp. If not tested, need to mark UK, Not tested.

8. Were cytogenetics tested (karyotyping or FISH)?

3. ☐ Yes - ***Go to question 10***

4. ☐ No - ***Go to question 47***

5. ☐ Unknown - ***Go to question 47***

9. Results of tests:

6. ☐ Abnormalities identified - ***Go to question 11***

7. ☐ No evaluable metaphases - ***Go to question 47***

8. ☐ No abnormalities - ***Go to question 47***

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

10. Monosomy

10. 5

11. ☐ Yes

~~12.~~ ~~☐ No~~

~~11. –7~~

~~13.~~ ~~☐ Yes~~

~~14.~~ ~~☐ No~~

~~12. –17~~

~~15.~~ ~~☐ Yes~~

~~16.~~ ~~☐ No~~

~~13. –18~~

~~17.~~ ~~☐ Yes~~

~~18.~~ ~~☐ No~~

~~14. –X~~

~~19.~~ ~~☐ Yes~~

~~20.~~ ~~☐ No~~

~~15. –Y~~

~~21. ☐ Yes~~

~~22. ☐ No~~

~~23. Triso my~~

~~16. +4~~

~~24. ☐ Yes~~

~~25. ☐ No~~

~~17. +8~~

~~26. ☐ Yes~~

~~27. ☐ No~~

~~18. +11~~

~~28. ☐ Yes~~

~~29. ☐ No~~

~~19. +13~~

~~30. ☐ Yes~~

31. ☐ No

20. +14

32. ☐ Yes

33. ☐ No

21. +21

34. ☐ Yes

35. ☐ No

22. +22

36. ☐ Yes

37. ☐ No

38. Translocation

23. t(3;3)

39. ☐ Yes

40. ☐ No

24. t(6;9)

41. _____.
☐ Yes

42. _____.
☐ No

25. _____ t(8;21)

43. _____.
☐ Yes

44. _____.
☐ No

26. _____ t(9;11)

45. _____.
☐ Yes

46. _____.
☐ No

27. _____ t(9;22)

47. _____.
☐ Yes

48. _____.
☐ No

28. _____ t(15;17) and variants

49. _____.
☐ Yes

50. _____.
☐ No

29. t(16;16)

51. ☐ Yes

52. ☐ No

53. Deletion

30. del(3q) / 3q–

54. ☐ Yes

55. ☐ No

31. del(5q) / 5q–

56. ☐ Yes

57. ☐ No

32. del(7q) / 7q–

58. ☐ Yes

59. ☐ No

33. _____ del(9q) / 9q-

60. _____
☐ Yes

61. _____
☐ No

34. _____ del(11q) / 11q-

62. _____
☐ Yes

63. _____
☐ No

35. _____ del(16q) / 16q-

64. _____
☐ Yes

65. _____
☐ No

36. _____ del(17q) / 17q-

66. _____
☐ Yes

67. _____
☐ No

37. _____ del(20q) / 20q-

68. _____. ☐ Yes

69. _____. ☐ No

38. _____ del(21q) / 21q–

70. _____. ☐ Yes

71. _____. ☐ No

72. _____ Inversion

39. _____ inv(3)

73. _____. ☐ Yes

74. _____. ☐ No

40. _____ inv(16)

75. _____. ☐ Yes

76. _____. ☐ No

77. _____ Other

41. _____
(11q23) any abnormality

78. _____. ☐ Yes

79. _____. ☐ No

42. _____ 12p any abnormality

80. _____. ☐ Yes

81. _____. ☐ No

43. _____ Complex ≥ 3 distinct abnormalities

82. _____. ☐ Yes

83. _____. ☐ No

44. _____ Other abnormality

84. _____. ☐ Yes – ***Go to question 46***

85. _____. ☐ No – ***Go to question 47***

45. _____ Specify other abnormality: _____

46. _____ 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:**~~

~~47. CEBPA~~
~~☐ Positive~~
~~☐ Negative~~
~~☐ Not done~~

~~48. FLT3 – D835 point mutation~~
~~☐ Positive~~
~~☐ Negative~~
~~☐ Not done~~

~~49. FLT3 – ITD mutation~~
~~☐ Positive~~
~~☐ Negative~~
~~☐ Not done~~

~~50. IDH1~~
~~☐ Positive~~
~~☐ Negative~~
~~☐ Not done~~

~~51. IDH2~~
~~☐ Positive~~
~~☐ Negative~~
~~☐ Not done~~

~~52. KIT~~
~~☐ Positive~~
~~☐ Negative~~
~~☐ Not done~~

~~53. NPM1~~
~~☐ Positive~~
~~☐ Negative~~
~~☐ Not done~~

~~54. _____ Other molecular marker~~

~~☐ Positive *Go to question 56*~~

~~☐ Negative *Go to question 56*~~

~~☐ Not done *Go to question 57*~~

~~55. Specify other molecular marker: _____~~

Status at transplantation:

~~56.~~80. _____What was the disease status (based on hematological test results)?

- ☐ Primary induction failure – ***Go to question 84***
- ☐ 1st complete remission (no previous bone marrow or extramedullary relapse) (include CRi and CRp)~~–~~ ***Go to question 81***
- ☐ 2nd complete remission – ***Go to question 81***
- ☐ ≥ 3rd complete remission – ***Go to question 81***
- ☐ 1st relapse – ***Go to question 83***
- ☐ 2nd relapse – ***Go to question 83***
- ☐ ≥ 3rd relapse – ***Go to question 83***
- ☐ No treatment – ***Go to question 84***

~~57.~~81. How many cycles of induction therapy were required to achieve 1st complete remission? (~~e CR~~includes CRi, CRp)~~?~~

- ☐ 1
- ☐ 2
- ☐ ≥ 3

~~58. Was the recipient in molecular remission?~~

~~3. ☐ Yes~~

~~4. ☐ No~~

~~5. ☐ Unknown~~

~~*6.* ☐ Not applicable~~

~~59.~~82. Was the recipient in remission by flow cytometry?

- ☐ Yes – ***Go to question 84***
- ☐ No – ***Go to question 84***
- ☐ Unknown – ***Go to question 84***
- ☐ Not applicable – ***Go to question 84***

~~60. Was the recipient in cytogenetic remission?~~

~~7. ☐ Yes – **Go to question 63**~~

~~8. ☐ No – **Go to question 63**~~

~~9. ☐ Unknown – **Go to question 63**~~

~~10. ☐ Not applicable– **Go to question 63**~~

~~61.~~83. Date of most recent relapse: ___ ___ ___ ___ – ___ ___ – ___ ___
YYYY MM DD

~~62.~~84. _____ Date assessed: ___ ___ ___ ___ – ___ ___ – ___ ___ - ***Go to signature line***
YYYY MM DD

Acute Lymphoblastic Leukemia (ALL)

~~86.~~85. Specify ALL classification:

B-lymphoblastic leukemia / lymphoma

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☐ B-lymphoblastic leukemia / lymphoma, NOS (B-cell ALL, NOS) (191)

☐ B-lymphoblastic leukemia / lymphoma with t(9;22)(q34.1;q11.2); BCR-ABL1 (192)

☐ B-lymphoblastic leukemia / lymphoma with t(v;11q23.3); KMT2A rearranged (193)

☐ B-lymphoblastic leukemia / lymphoma with t(1;19)(q23;p13.3); TCF3-PBX1 (194)

☐ B-lymphoblastic leukemia / lymphoma with t(12;21) (p13.2;q22.1); ETV6-RUNX1 (195)

☐ B-lymphoblastic leukemia / lymphoma with t(5;14) (q31.1;q32.3); IL3-IGH (81)

☐ B-lymphoblastic leukemia / lymphoma with Hyperdiploidy (51-65 chromosomes) (82)

☐ B-lymphoblastic leukemia / lymphoma with Hypodiploidy (<45 chromosomes) (83)

☐ B-lymphoblastic leukemia / lymphoma, BCR-ABL1-like (provisional entity) (94)

☐ B-lymphoblastic leukemia / lymphoma, with iAMP21 (provisional entity) (95)

T-cell lymphoblastic leukemia / lymphoma

☐ Early T-cell precursor lymphoblastic leukemia (provisional entity) (96)

☐ Natural killer (NK)- cell lymphoblastic leukemia / lymphoma (provisional entity) (97)

86. Did the recipient have a predisposing condition?

☐ Yes - ***Go to question 66***

☐ No - ***Go to question 68***

☐ Unknown - ***Go to question 68***

87. Specify condition:

☐ Aplastic anemia ***- Go to question 68*** **Also complete CIBMTR Form 2028 — APL**

☐ Bloom syndrome - ***Go to question 68***

☐ Down syndrome - ***Go to question 68***

☐ Fanconi anemia ***- Go to question 68*** **Also complete CIBMTR Form 2029 — FAN**

☐ Other condition - ***Go to question 67***

~~87.~~88. Specify other condition: _____

~~88.~~89. 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

Laboratory studies at diagnosis:

90. Were cytogenetics tested (karyotyping or FISH)? **(at diagnosis)**

☐ Yes - ***Go to question 70***

☐ No - ***Go to question 81***

☐ Unknown - ***Go to question 81***

91. Were cytogenetics tested via FISH? (at diagnosis)

☐ Yes - ***Go to question 71***

☐ No - ***Go to question 75***

92. Results of tests: (at diagnosis)

☐ Abnormalities identified - ***Go to question 72***

☐ No abnormalities - ***Go to question 75***

Specify cytogenetic abnormalities identified:

93. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

94. Specify abnormalities: (check all that apply)

- ☐ –7
- ☐ +4
- ☐ +8
- ☐ +17
- ☐ +21
- ☐ t(1;19)
- ☐ t(2;8)
- ☐ t(4;11)
- ☐ t(5;14)
- ☐ t(8;14)
- ☐ t(8;22)
- ☐ t(9;22)
- ☐ t(10;14)
- ☐ t(11;14)
- ☐ t(12;21)
- ☐ del(6q) / 6q–
- ☐ del(9p) / 9p–
- ☐ del(12p) / 12p–
- ☐ add(14q)
- ☐ (11q23) any abnormality
- ☐ 9p any abnormality
- ☐ 12p any abnormality
- ☐ Hyperdiploid (> 50)
- ☐ Hypodiploid (< 45)
- ☐ Other abnormality ***– Go to question 74***

95. Specify other abnormality: _____

96. Were cytogenetics tested via karyotyping? (at diagnosis)

- ☐ Yes - ***Go to question 76***
- ☐ No - ***Go to question 80***

97. Results of tests: (at diagnosis)

- ☐ Abnormalities identified - ***Go to question 77***
- ☐ No evaluable metaphases - ***Go to question 80***
- ☐ No abnormalities - ***Go to question 80***

Specify cytogenetic abnormalities identified:

98. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

99. Specify abnormalities: (check all that apply)

☐ –7

☐ +4

☐ +8

☐ +17

☐ +21

☐ t(1;19)

☐ t(2;8)

☐ t(4;11)

☐ t(5;14)

☐ t(8;14)

☐ t(8;22)

☐ t(9;22)

☐ t(10;14)

☐ t(11;14)

☐ t(12;21)

☐ del(6q) / 6q–

☐ del(9p) / 9p–

☐ del(12p) / 12p–

☐ add(14q)

☐ (11q23) any abnormality

☐ 9p any abnormality

☐ 12p any abnormality

☐ Hyperdiploid (> 50)

☐ Hypodiploid (< 45)

☐ Other abnormality – ***Go to question 79***

~~89.~~100. Specify other abnormality: _____

~~90. Were cytogenetics tested (karyotyping or FISH)?~~

~~☐ Yes – *Go to question 67*~~

☐ No - ***Go to question 95***

☐ Unknown - ***Go to question 95***

91. 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

92. -7

☐ Yes

☐ No

Trisomy

93. +4

☐ Yes

☐ No

94. +8

☐ Yes

☐ No

95. +17

☐ Yes

☐ No

96. +21

☐ Yes

☐ No

Translocation

97. t(1;19)

☐ Yes

☐ No

98. t(2;8)
☐ Yes
☐ No

99. t(4;11)
☐ Yes
☐ No

100. t(5;14)
☐ Yes
☐ No

101. t(8;14)
☐ Yes
☐ No

102. t(8;22)
☐ Yes
☐ No

103. t(9;22)
☐ Yes
☐ No

104. t(10;14)
☐ Yes
☐ No

105. t(11;14)
☐ Yes
☐ No

106. t(12;21)
☐ Yes
☐ No

Deletion

107. del(6q) / 6q-
☐ Yes

~~☐ No~~

~~108. del(9p) / 9p-~~

~~☐ Yes~~

~~☐ No~~

~~109. del(12p) / 12p-~~

~~☐ Yes~~

~~☐ No~~

~~**Addition**~~

~~110. add(14q)~~

~~☐ Yes~~

~~☐ No~~

~~**Other**~~

~~111. (11q23) any abnormality~~

~~☐ Yes~~

~~☐ No~~

~~112. 9p any abnormality~~

~~☐ Yes~~

~~☐ No~~

~~113. 12p any abnormality~~

~~☐ Yes~~

~~☐ No~~

~~114. Hyperdiploid (> 50)~~

~~☐ Yes~~

~~☐ No~~

~~115. Hypodiploid (< 46)~~

~~☐ Yes~~

~~☐ No~~

~~116. Complex - ≥3 distinct abnormalities~~

~~☐ Yes~~

~~☐ No~~

~~117. Other abnormality~~

~~☐ Yes – *Go to question 94*~~

~~☐ No – *Go to question 95*~~

~~***118.*** Specify other abnormality: _____~~

~~119.~~101. _____ Were tests for molecular markers performed (e.g. PCR)? (at diagnosis)

☐ Yes **– *Go to question 96***

☐ No **– *Go to question 100***

☐ Unknown **– *Go to question 100***

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

~~120.~~102. _____ BCR / ABL

☐ Positive

☐ Negative

☐ Not done

~~121.~~103. _____ TEL-AML / AML1

☐ Positive

☐ Negative

☐ Not done

~~122.~~104. _____ Other molecular marker

☐ Positive **– *Go to question 99***

☐ Negative **– *Go to question 99***

☐ Not done **– *Go to question 100***

~~123.~~105. _____ Specify other molecular marker: _____

Copy and complete questions 98-99 for additional molecular markers

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

106. Were cytogenetics tested (karyotyping or FISH)? (at last evaluation prior to the start of the preparative regimen)

☐ Yes - ***Go to question 86***

☐ No - ***Go to question 97***

☐ Unknown - ***Go to question 97***

107. Were cytogenetics tested via FISH?

☐ Yes - ***Go to question 87***

☐ No - ***Go to question 91***

108. Results of tests:

☐ Abnormalities identified - ***Go to question 88***

☐ No abnormalities - ***Go to question 91***

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

109. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

110. Specify abnormalities: (check all that apply)

☐ –7

☐ +4

☐ +8

☐ +17

☐ +21

☐ t(1;19)

☐ t(2;8)

☐ t(4;11)

☐ t(5;14)

☐ t(8;14)

☐ t(8;22)

☐ t(9;22)

☐ t(10;14)

☐ t(11;14)

☐ t(12;21)

☐ del(6q) / 6q–

☐ del(9p) / 9p–

☐ del(12p) / 12p–

☐ add(14q)

☐ (11q23) any abnormality

☐ 9p any abnormality

☐ 12p any abnormality

☐ Hyperdiploid (> 50)

☐ Hypodiploid (< 45)

☐ Other abnormality ***– Go to question 90***

111. Specify other abnormality: _____

112. Were cytogenetics tested via karyotyping? (at last evaluation prior to the start of the preparative regimen)

☐ Yes - ***Go to question 92***

☐ No - ***Go to question 97***

113. Results of tests:

☐ Abnormalities identified - ***Go to question 93***

☐ No evaluable metaphases - ***Go to question 97***

☐ No abnormalities - ***Go to question 97***

Commented [EL12]: 24. Need to look at this for analysis.

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

114. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

115. Specify abnormalities: (check all that apply)

☐ –7

☐ +4

☐ +8

☐ +17

☐ +21

☐ t(1;19)

☐ t(2;8)

☐ t(4;11)

☐ t(5;14)

☐ t(8;14)
☐ t(8;22)
☐ t(9;22)
☐ t(10;14)
☐ t(11;14)
☐ t(12;21)
☐ del(6q) / 6q–
☐ del(9p) / 9p–
☐ del(12p) / 12p–
☐ add(14q)
☐ (11q23) any abnormality
☐ 9p any abnormality
☐ 12p any abnormality
☐ Hyperdiploid (> 50)
☐ Hypodiploid (< 45)
☐ Other abnormality – ***Go to question 95***

116. Specify other abnormality: _____

117. Was documentation submitted to the CIBMTR? (e.g. cytogenetic or FISH report)
☐ Yes
☐ No

118. Were tests for molecular markers performed (e.g. PCR)? (at last evaluation prior to the start of the preparative regimen)
☐ Yes – ***Go to question 98***
☐ No – ***Go to question 102***
☐ Unknown – ***Go to question 102***

Specify molecular markers identified at last evaluation prior to the start of the preparative regimen:

119. BCR / ABL
☐ Positive
☐ Negative
☐ Not done

120. TEL-AML / AML1
☐ Positive
☐ Negative

☐ Not done

121. Other molecular marker

☐ Positive **– *Go to question 102***

☐ Negative **– *Go to question 102***

☐ Not done **– *Go to question 103***

122. Specify other molecular marker: _____

Copy and complete questions 100-101 for additional molecular markers

Commented [EL13]: 25.Max of 3

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

123. Were cytogenetics tested (karyotyping or FISH)? (between diagnosis and last evaluation)

☐ Yes - ***Go to question 103***

☐ No - ***Go to question 114***

☐ Unknown - ***Go to question 114***

124. Were cytogenetics tested via FISH? (between diagnosis and the last evaluation)

☐ Yes - ***Go to question 104***

☐ No - ***Go to question 108***

125. Results of tests: (between diagnosis and the last evaluation)

☐ Abnormalities identified - ***Go to question 105***

☐ No abnormalities - ***Go to question 108***

Specify cytogenetic abnormalities identified at diagnosis:

126. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

127. Specify abnormalities: (check all that apply)

☐ –7

☐ +4

☐ +8

☐ +17

☐ +21

☐ t(1;19)
☐ t(2;8)
☐ t(4;11)
☐ t(5;14)
☐ t(8;14)
☐ t(8;22)
☐ t(9;22)
☐ t(10;14)
☐ t(11;14)
☐ t(12;21)
☐ del(6q) / 6q–
☐ del(9p) / 9p–
☐ del(12p) / 12p–
☐ add(14q)
☐ (11q23) any abnormality
☐ 9p any abnormality
☐ 12p any abnormality
☐ Hyperdiploid (> 50)
☐ Hypodiploid (< 45)
☐ Other abnormality – ***Go to question 107***

128. Specify other abnormality: _____

129. Were cytogenetics tested via karyotyping? (between diagnosis and the last evaluation)

☐ Yes - ***Go to question 109***
☐ No - ***Go to question 114***

130. Results of tests: (between diagnosis and the last evaluation)

☐ Abnormalities identified - ***Go to question 110***
☐ No evaluable metaphases - ***Go to question 114***
☐ No abnormalities - ***Go to question 114***

Specify cytogenetic abnormalities identified at diagnosis:

131. Specify number of distinct cytogenetic abnormalities:

☐ One (1)
☐ Two (2)
☐ Three (3)

☐ Four or more (4 or more)

132. Specify abnormalities: (check all that apply)

☐ –7
☐ +4
☐ +8
☐ +17
☐ +21
☐ t(1;19)
☐ t(2;8)
☐ t(4;11)
☐ t(5;14)
☐ t(8;14)
☐ t(8;22)
☐ t(9;22)
☐ t(10;14)
☐ t(11;14)
☐ t(12;21)
☐ del(6q) / 6q–
☐ del(9p) / 9p–
☐ del(12p) / 12p–
☐ add(14q)
☐ (11q23) any abnormality
☐ 9p any abnormality
☐ 12p any abnormality
☐ Hyperdiploid (> 50)
☐ Hypodiploid (< 45)
☐ Other abnormality – ***Go to question 112***

133. Specify other abnormality: _____

134. Was documentation submitted to the CIBMTR? (e.g. cytogenetic or FISH report)

☐ Yes
☐ No

135. Were tests for molecular markers performed (e.g. PCR)? (between diagnosis and last evaluation prior to the start of the preparative regimen)

☐ Yes – ***Go to question 115***

☐ No – ***Go to question 119***

☐ Unknown – ***Go to question 119***

Specify molecular markers identified between diagnosis last evaluation prior to the start of the preparative regimen:

136. BCR / ABL

☐ Positive

☐ Negative

☐ Not done

137. TEL-AML / AML1

☐ Positive

☐ Negative

☐ Not done

138. Other molecular marker

☐ Positive – ***Go to question 118***

☐ Negative – ***Go to question 118***

☐ Not done – ***Go to question 119***

139. Specify other molecular marker: _____

Copy and complete questions 117-118 for additional molecular markers

Commented [EL14]: 26.Max of 3

CNS Leukemia

140. Did the recipient have central nervous system leukemia at any time prior to the start of the preparative regimen?

☐ Yes

☐ No

☐ Unknown

Status at transplantation:

CIBMTR Center Number: ___ ___ ___ ___ ___ CIBMTR Research ID: ___ ___ ___ ___ ___ ___ ___ ___ ___ ___

~~124.~~141. What was the disease status (based on hematological 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***

~~125.~~142. How many cycles of induction therapy were required to achieve 1st complete remission~~CR~~?

- ☐ 1
- ☐ 2
- ☐ ≥ 3

~~126. Was the recipient in molecular remission?~~

- ~~☐ Yes~~
- ~~☐ No~~
- ~~☐ Unknown~~
- ~~☐ Not applicable~~

~~127.~~143. Was the recipient in remission by flow cytometry?

- ☐ Yes
- ☐ No
- ☐ Unknown
- ☐ Not applicable

~~128. Was the recipient in cytogenetic remission?~~

- ~~☐ Yes – ***Go to question 106***~~
- ~~☐ No – ***Go to question 106***~~
- ~~☐ Unknown – ***Go to question 106***~~
- ~~☐ Not applicable – ***Go to question 106***~~

~~129.~~144. Date of most recent relapse: ___ ___ ___ ___ — ___ ___ — ___ ___

YYYY MM DD

CIBMTR Center Number: ___ ___ ___ ___ ___ CIBMTR Research ID: ___ ___ ___ ___ ___ ___ ___ ___ ___ ___

~~130.~~145. Date assessed: ___ ___ ___ ___ — ___ ___ — ___ ___ - ***Go to signature line***

YYYY MM DD

Acute Leukemias of Ambiguous Lineage and Other Myeloid Neoplasms

1. Specify acute leukemias of ambiguous lineage and other myeloid neoplasm classification:
   - ☐ Blastic plasmacytoid dendritic cell neoplasm (296)– ***Go to question 109***
   - ☐ Acute undifferentiated leukemia (31) – ***Go to question 109***
   - ☐ Mixed phenotype acute leukemia (MPAL) with t(9;22)(q34.1;q11.2); BCR-ABL1 (84) – ***Go to question 109***
   - ☐ Mixed phenotype acute leukemia with t(v; 11q23.3); KMT2A rearranged (85) – ***Go to question 109***
   - ☐ Mixed phenotype acute leukemia, B/myeloid, NOS (86) – ***Go to question 109***
   - ☐ Mixed phenotype acute leukemia, T/myeloid, NOS (87) – ***Go to question 109***
   - ☐ Other acute leukemia of ambiguous lineage or myeloid neoplasm (88) - ***Go to question 108***

2. Specify other acute leukemia of ambiguous lineage or myeloid neoplasm: _____

Status at transplantation:

3. What was the disease status (based on hematological 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

4. Date assessed: ___ ___ ___ ___ — ___ ___ — ___ ___ - ***Go to signature line***

YYYY MM DD

Chronic Myelogenous Leukemia (CML)

5. Was therapy given prior to this HCT?
   - ☐ Yes - ***Go to questions 112***
   - ☐ No - ***Go to question 118***

6. Combination chemotherapy
   - ☐ Yes
   - ☐ No

7. Hydroxyurea (Droxia, Hydrea)
   - ☐ Yes
   - ☐ No

8. Tyrosine kinase inhibitor (e.g.imatinib mesylate, dasatinib, nilotinib)
   - ☐ Yes
   - ☐ No

9. Interferon-α (Intron, Roferon) (includes PEG)
   - ☐ Yes
   - ☐ No

10. Other therapy
    - ☐ Yes - ***Go to question 117***
    - ☐ No - ***Go to question 118***

11. Specify other therapy: _____

12. What was the disease status?
    - ☐ Complete hematologic response (CHR) - ***Go to questions 119***
    - ☐ Chronic phase – ***Go to question 119***
    - ☐ Accelerated phase - ***Go to question 120***

☐ Blast phase - ***Go to question 120***

13. Specify level of response
    - ☐ No cytogenetic response (No CyR)
    - ☐ Minimal cytogenetic response
    - ☐ Minor cytogenetic response
    - ☐ Partial cytogenetic response (PCyR)
    - ☐ Complete cytogenetic response (CCyR)
    - ☐ Major molecular remission (MMR)
    - ☐ Complete molecular remission (CMR)

14. Number
    - ☐ 1st
    - ☐ 2nd
    - ☐ 3rd or higher

15. Date assessed: ___ ___ ___ ___ — ___ ___ — ___ ___ - ***Go to signature line***
    YYYY MM DD

Myelodysplastic (MDS) / Myeloproliferative (MPN) Diseases

16. 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 (CMMoL) (54)

☐ Juvenile myelomonocytic leukemia (JMML/JCML) (no evidence of Ph[1] or BCR/ABL) (36) – ***Go to question 167***

☐ Atypical chronic myeloid leukemia, Ph-/bcr/abl- {CML, NOS} (45) - ***Go to question 220***

☐ Atypical chronic myeloid leukemia, Ph-/bcr unknown {CML, NOS} (46) - ***Go to question 220***

☐ Atypical chronic myeloid leukemia, Ph unknown/bcr- {CML, NOS} (48) - ***Go to question 220***

☐ Atypical chronic myeloid leukemia, Ph unknown/bcr unknown {CML, NOS} (49) - ***Go to question 220***

☐ Myelodysplastic / myeloproliferative neoplasm, unclassifiable (69)

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

☐ Yes

☐ No

☐ Unknown

18. Did the recipient have a predisposing condition?

☐ Yes – ***Go to question 125***

☐ No – ***Go to question 127***

☐ Unknown – ***Go to question 127***

19. Specify condition:

☐ Aplastic anemia – ***Go to question 127***

☐ Bloom syndrome – ***Go to question 127***

☐ Down syndrome – ***Go to question 127***

☐ Fanconi anemia – – ***Go to question 127***

☐ Other condition – ***Go to question 126***

20. Specify other condition: _____

Laboratory studies at diagnosis of MDS:

21. WBC

☐ Known

☐ Unknown

22. ___ ___ ___ ___ ___ ___ • ___ ☐ x 10^9/L (x 10^3/mm^3)

☐ x 10^6/L

23. Hemoglobin
☐ Known
☐ Unknown

24. ___ ___ ___ ___ • ___ ___ ☐ g/dL
☐ g/L
☐ mmol/L

25. Was RBC transfused ≤ 30 days before date of test?
☐ Yes
☐ No

26. Platelets
☐ Known
☐ Unknown

27. ___ ___ ___ ___ ___ ___ ___ ☐ x 10^9/L (x 10^3/mm^3)
☐ x 10^6/L

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

29. Neutrophils
☐ Known
☐ Unknown

30. ___ ___**%**

31. Blasts in bone marrow
☐ Known
☐ Unknown

32. ___ ___ ___ %

33. Were cytogenetics tested (karyotyping or FISH)?
☐ Yes – ***Go to question 140***
☐ No – ***Go to question 167***

☐ Unknown – ***Go to question 167***

34. Results of tests:

☐ Abnormalities identified – ***Go to question 141***

☐ No evaluable metaphases – ***Go to question 167***

☐ No abnormalities – ***Go to question 167***

Specify abnormalities identified at diagnosis:

35. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

Monosomy

36. –5

☐ Yes

☐ No

37.–7

☐ Yes

☐ No

38.–13

☐ Yes

☐ No

39. –20

☐ Yes

☐ No

40. –Y

☐ Yes

☐ No

Trisomy

41. +8

- ☐ Yes
- ☐ No

42. +19

- ☐ Yes
- ☐ No

Translocation

43. t(1;3)

- ☐ Yes
- ☐ No

44. t(2;11)

- ☐ Yes
- ☐ No

45. t(3;3)

- ☐ Yes
- ☐ No

46. t(3;21)

- ☐ Yes
- ☐ No

47. t(6;9)

- ☐ Yes
- ☐ No

48. t(11;16)

- ☐ Yes
- ☐ No

Deletion

49. del(3q) / 3q-

- ☐ Yes
- ☐ No

50.del(5q) / 5q-

☐ Yes –

☐ No

51.del(7q) / 7q-

☐ Yes

☐ No

52.del(9q) / 9q-

☐ Yes

☐ No

53.del(11q) / 11q-

☐ Yes

☐ No

54.del(12p) / 12p-

☐ Yes

☐ No

55.del(13q) / 13q-

☐ Yes

☐ No

56. del(20q) / 20q-

☐ Yes

☐ No

Inversion

57. inv(3)

☐ Yes

☐ No

Other

58. i17q

☐ Yes

☐ No

59. Other abnormality

☐ Yes – ***Go to question 166***

☐ No – ***Go to question 167***

60. Specify other abnormality: _____

61. 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 168***

☐ No – ***Go to question 171***

62. Specify the MDS / MPN subtype after transformation:

☐ Refractory cytopenia with unilineage dysplasia (RCUD) (includes refractory anemia (RA)) (51) – ***Go to question 169***

☐ Refractory anemia with ringed sideroblasts (RARS) (55) – ***Go to question 169***

☐ Refractory anemia with excess blasts-1 (RAEB-1) (61) – ***Go to question 169***

☐ Refractory anemia with excess blasts-2 (RAEB-2) (62) – ***Go to question 169***

☐ Refractory cytopenia with multilineage dysplasia (RCMD) (64) – ***Go to question 169***

☐ Childhood myelodysplastic syndrome (Refractory cytopenia of childhood (RCC)) (68) – ***Go to question 169***

☐ Myelodysplastic syndrome with isolated del(5q) (5q– syndrome) (66) – ***Go to question 169***

☐ Myelodysplastic syndrome (MDS), unclassifiable (50) – ***Go to question 169***

☐ Chronic neutrophilic leukemia (165) – ***Go to question 169***

☐ Chronic eosinophilic leukemia, NOS (166) – ***Go to question 169***

☐ Essential thrombocythemia (includes primary thrombocytosis, idiopathic thrombocytosis, hemorrhagic thrombocythemia) (58) – ***Go to question 169***

☐ Polycythemia vera (PCV) (57) – ***Go to question 169***

☐ Primary myelofibrosis (includes chronic idiopathic myelofibrosis (CIMF), angiogenic myeloid metaplasia (AMM), myelofibrosis/sclerosis with myeloid metaplasia (MMM), idiopathic myelofibrosis) (167) – ***Go to question 169***

☐ Myeloproliferative neoplasm (MPN), unclassifiable (60) – ***Go to question 169***

☐ Chronic myelomonocytic leukemia (CMMoL) (54) – ***Go to question 169***

☐ Myelodysplastic / myeloproliferative neoplasm, unclassifiable (69) – ***Go to question 169***

☐ Transformed to AML (70) – ***Go to question 170***

63. Specify the date of the most recent transformation:___ ___ ___ ___ — ___ ___ — ___ ___ - ***Go to question 171***

64. Date of MDS diagnosis: ___ ___ ___ ___ - ___ ___ - ___ ___ – ***Go to signature line***

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

65. WBC
- ☐ Known
- ☐ Unknown

66. ___ ___ ___ ___ ___ ___ • ___ ☐ x 10^9/L (x 10^3/mm^3)
☐ x 10^6/L

67. Hemoglobin
- ☐ Known
- ☐ Unknown

68. ___ ___ ___ ___ • ___ ___ ☐ g/dL
☐ g/L
☐ mmol/L

69. Was RBC transfused ≤ 30 days before date of test?
- ☐ Yes
- ☐ No

70. Platelets
- ☐ Known
- ☐ Unknown

71. ___ ___ ___ ___ ___ ___ ___ ☐ x 10^9/L (x 10^3/mm^3)
☐ x 10^6/L

72. Were platelets transfused ≤ 7 days before date of test?
- ☐ Yes
- ☐ No

73. Neutrophils
- ☐ Known
- ☐ Unknown

74. ___ ___**%**

75. Blasts in bone marrow
- ☐ Known

☐ Unknown

76. ___ ___ ___ %

77. Were cytogenetics tested (karyotyping or FISH)?

☐ Yes – ***Go to question 184***

☐ No – ***Go to question 211***

☐ Unknown – ***Go to question 211***

78. Results of tests:

☐ Abnormalities identified – ***Go to question 185***

☐ No evaluable metaphases – G***o to question 211***

☐ No abnormalities – G***o to question 211***

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

79. Specify number of distinct cytogenetic abnormalities:

☐ One (1)

☐ Two (2)

☐ Three (3)

☐ Four or more (4 or more)

Monosomy

80. –5

☐ Yes

☐ No

81.–7

☐ Yes

☐ No

82.–13

☐ Yes

☐ No

83. –20

☐ Yes
☐ No

84. –Y
☐ Yes
☐ No

Trisomy

85. +8
☐ Yes
☐ No

86. +19
☐ Yes
☐ No

Translocation

87. t(1;3)
☐ Yes
☐ No

88. t(2;11)
☐ Yes
☐ No

89. t(3;3)
☐ Yes
☐ No

90. t(3;21)
☐ Yes
☐ No

91. t(6;9)
☐ Yes
☐ No

92. t(11;16)

☐ Yes
☐ No

Deletion

93. del(3q) / 3q-
☐ Yes
☐ No

94.del(5q) / 5q-
☐ Yes
☐ No

95.del(7q) / 7q-
☐ Yes
☐ No

96.del(9q) / 9q-
☐ Yes
☐ No

97.del(11q) / 11q-
☐ Yes
☐ No

98.del(12p) / 12p-
☐ Yes
☐ No

99.del(13q) / 13q-
☐ Yes
☐ No

100. del(20q) / 20q-
☐ Yes
☐ No

Inversion

101. inv(3)

☐ Yes

☐ No

Other

102. i17q

☐ Yes

☐ No

103. Other abnormality

☐ Yes – ***Go to question 210***

☐ No – ***Go to question 211***

104. Specify other abnormality: _____

Status at transplantation:

105. 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 ≥ 1000/mm^3 without myeloid growth factor support; platelets ≥ 100 x 10^9/L without thrombopoietic support; 0% blasts - ***Go to question 215***

☐ 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 x 10^9/L, platelet absolute increase of ≥ 30 x 10^9/L; for pre-treatment platelet count of < 20 x 10^9/L, platelet absolute increase of ≥ 20 x 10^9/L and ≥ 100% from pre-treatment level * HI-N – neutrophil count increase of ≥ 100% from pre-treatment level and an absolute increase of ≥ 500/mm^3 - ***Go to question 212***

☐ No response (NR) / stable disease (SD) – does not meet the criteria for at least HI, but no evidence of disease progression - ***Go to question 215***

☐ 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.): * ≥ 50% reduction from maximum response levels in granulocytes or platelets * reduction in hemoglobin by ≥ 1.5 g/dL *transfusion dependence - ***Go to question 213***

☐ Relapse from complete remission (Rel from CR) – requires at least one of the following: * return to pre-treatment bone marrow blast percentage * decrease of ≥ 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 214***

☐ Not assessed - ***Go to signature line***

106. 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 215***

☐ HI-P – for pre-treatment platelet count of > 20 x 10^9/L, platelet absolute increase of ≥ 30 x 10^9/L; for pre-treatment platelet count of < 20 x 10^9/L, platelet absolute increase of ≥ 20 x 10^9/L and ≥ 100% from pre-treatment level – ***Go to question 215***

☐ HI-N – neutrophil count increase of ≥ 100% from pre-treatment level and an absolute increase of ≥ 500/mm^3 - ***Go to question 215***

107. Date of progression: ___ ___ ___ ___ — ___ ___ — ___ ___ - ***Go to question 215***
YYYY MM DD

108. Date of relapse: ___ ___ ___ ___ — ___ ___ — ___ ___ - ***Go to question 215***
YYYY MM DD

109. Date assessed: ___ ___ ___ ___ — ___ ___ — ___ ___- ***Go to signature line***
YYYY MM DD

Other Leukemia (OL)

110. Specify the other leukemia classification:

☐ Chronic lymphocytic leukemia (CLL), NOS (34) - ***Go to question 218***

☐ Chronic lymphocytic leukemia (CLL), B-cell / small lymphocytic lymphoma (SLL) (71) - ***Go to question 218***

☐ Hairy cell leukemia (35) - ***Go to question 221***

☐ Hairy cell leukemia variant (75) - ***Go to question 221***

☐ Monoclonal B-cell lymphocytosis (76) – ***Go to signature line***

☐ Prolymphocytic leukemia (PLL), NOS (37) - ***Go to question 218***

☐ PLL, B-cell (73) - ***Go to question 218***

☐ PLL, T-cell (74) - ***Go to question 218***

☐ Other leukemia, NOS (30) - ***Go to question 220***

☐ Other leukemia (39) - ***Go to question 217***

111. Specify other leukemia: _____ – ***Go to question 220***

112. Was any 17p abnormality detected?

☐ Yes – ***If disease classification is CLL, go to question 219. If PLL, go to question 221.***

☐ No

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

☐ Yes – ***Go to question 226*** **– Also complete NHL Disease Classification questions**

☐ No – ***Go to question 221***

Status at transplantation:

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

☐ Primary induction failure – ***Go to question 222***

☐ 1st complete remission (no previous bone marrow or extramedullary relapse) – ***Go to question 222***

☐ 2nd complete remission – ***Go to question 222***

☐ ≥ 3rd complete remission – ***Go to question 222***

☐ 1st relapse – ***Go to question 222***

☐ 2nd relapse – ***Go to question 222***

☐ ≥ 3rd relapse – ***Go to question 222***

☐ No treatment – ***Go to signature line***

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

☐ Complete remission (CR) – ***Go to question 222***

☐ Partial remission (PR) – ***Go to question 222***

☐ Stable disease (SD) – ***Go to question 222***

☐ Progressive disease (Prog) – ***Go to question 222***

☐ Untreated - ***Go to question 222***

☐ Not assessed - ***Go to signature line***

116. Date assessed: ___ ___ ___ ___ — ___ ___ — ___ ___ - ***Go to signature line***
YYYY MM DD

Hodgkin Lymphoma

117. 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:

118. 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

☐ 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

119. Date assessed: ___ ___ ___ ___ - ___ ___ - ___ ___ - ***Go to signature line***

YYYY MM DD

Non-Hodgkin Lymphoma

120. 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)
- ☐ Waldenstrom macroglobulinemia / Lymphoplasmacytic lymphoma (173)
- ☐ Other B-cell lymphoma (129) ***– Go to question 227***
- ☐ 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 227***

121. Specify other lymphoma: _____

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

☐ Yes – ***Go to question 230-*** **Also complete CLL Disease Classification questions**

☐ No - ***Go to question 229***

123. 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:

124. 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

☐ 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

125. Date assessed: ___ ___ ___ ___ — ___ ___ — ___ ___ - ***Go to signature line***

YYYY MM DD

Multiple Myeloma / Plasma Cell Disorder (PCD)

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

- ☐ Multiple myeloma-IgG (181) - ***Go to questions 234***
- ☐ Multiple myeloma-IgA (182) - ***Go to questions 234***
- ☐ Multiple myeloma-IgD (183) - ***Go to questions 234***
- ☐ Multiple myeloma-IgE (184) - ***Go to questions 234***
- ☐ Multiple myeloma-IgM (not Waldenstrom macroglobulinemia) (185) - ***Go to questions 234***
- ☐ Multiple myeloma-light chain only (186) - ***Go to questions 234***
- ☐ Multiple myeloma-non-secretory (187) - ***Go to questions 235***
- ☐ Plasma cell leukemia (172) - ***Go to question 240***
- ☐ Solitary plasmacytoma (no evidence of myeloma) (175) - ***Go to question 240***
- ☐ Amyloidosis (174) - ***Go to question 240***
- ☐ Osteosclerotic myeloma / POEMS syndrome (176) - ***Go to questions 240***
- ☐ Light chain deposition disease (177) - ***Go to questions 240***
- ☐ Other plasma cell disorder (179) - ***Go to question 233***

127. Specify other plasma cell disorder: _____ - ***Go to question 240***

128. Light chain

- ☐ kappa
- ☐ lambda

129. 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 236***

☐ Stage II (Fitting neither Stage I or Stage III) – ***Go to questions 236***

☐ 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 236***

☐ Unknown – ***Go to questions 237***

130. 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.:

131. Serum β2-microglobulin: ___ ___ ___ • ___ ___ ___ ☐ µg/dL ☐ mg/L ☐ nmol/L

132. Serum albumin: ___ ___ • ___ ☐ g/dL ☐ g/L

133. 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 —)

134. Were cytogenetics tested (karyotyping or FISH)?

- ☐ Yes – ***Go to questions 241***
- ☐ No – ***Go to question 262***
- ☐ Unknown – ***Go to question 262***

135. Results of tests:

- ☐ Abnormalities identified – ***Go to question 242***
- ☐ No evaluable metaphases – ***Go to question 262***
- ☐ No abnormalities – ***Go to question 262***

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

Trisomy

136. +3
- ☐ Yes
- ☐ No

137. +5
- ☐ Yes
- ☐ No

138. +7
- ☐ Yes
- ☐ No

139. +9

- ☐ Yes
- ☐ No

140. +11
- ☐ Yes
- ☐ No

141. +15
- ☐ Yes
- ☐ No

142. +19
- ☐ Yes
- ☐ No

Translocation

143. t(4;14)
- ☐ Yes
- ☐ No

144. t(6;14)
- ☐ Yes
- ☐ No

145. t(11;14)
- ☐ Yes
- ☐ No

146. t(14;16)
- ☐ Yes
- ☐ No

147. t(14;20)
- ☐ Yes
- ☐ No

Deletion

148. del (13)/13q-

☐ Yes
☐ No

149. del (17)/17p-
☐ Yes
☐ No

Other

150. Hyperdiploid (>50)
☐ Yes
☐ No

151. Hypodiploid (<46)
☐ Yes
☐ No

152. Any abnormality at 1q
☐ Yes
☐ No

153. Any abnormality at 1p
☐ Yes
☐ No

154. Other abnormality
☐ Yes
☐ No

155. Specify other abnormality:_____

Status at transplantation:

156. 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. ***- Go to question 263***

☐ Complete remission (CR) — negative immunofixation on serum and urine samples, and disappearance of any soft tissue plasmacytomas, and < 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. ***- Go to question 263***

☐ Near complete remission (nCR) — serum and urine M-protein detectable by immunoelectrophoresis (IFE), but not on electrophoresis (negative SPEP & UPEP); < 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. ***- Go to question 263***

☐ Very good partial remission (VGPR) — serum and urine M-protein detectable by immunofixation but not on electrophoresis, or ≥ 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. ***- Go to question 263***

☐ Partial remission (PR) — ≥ 50% reduction in serum M-protein, and reduction in 24-hour urinary M-protein by ≥ 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 ≥ 50% decrease in 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 ≥ 50% reduction in plasma cells is required in place of M-protein, provided the baseline bone marrow plasma cell percentage was ≥ 30%. In addition to the above listed criteria, a ≥ 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. ***- Go to question 263***

☐ 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. ***- Go to question 263***

☐ Progressive disease (PD) — requires any one or more of the following: Increase of ≥ 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 ≥ 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 ***- Go to question 263***

☐ 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 ≥ 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. ***– Go to question 263***

☐ Unknown ***– Go to signature line***

☐ Not applicable (Amyloidosis with no evidence of myeloma) ***– Go to signature line***

157. Date assessed: ___ ___ ___ ___ — ___ ___ — ___ ___ - ***Go to signature line***

Solid Tumors

158. 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)
- ☐ 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 (270) ***– Go to question 265***
- ☐ Solid tumor, not otherwise specified (200)

159. Specify other solid tumor: _____

- ***Go to signature line***

Severe Aplastic Anemia

160. 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 267***

161. Specify other acquired cytopenic syndrome: _____

- ***Go to signature line***

Inherited Abnormalities of Erythrocyte Differentiation or Function

162. 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 269***
- ☐ 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 270***

163. Specify other constitutional anemia: _____

164. Specify other hemoglobinopathy:_____

- ***Go to signature line***

Disorders of the Immune System

165. 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 272***
- ☐ 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 273***
- ☐ 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)

166. Specify other SCID: _____

167. Specify other immunodeficiency: _____

- ***Go to signature line***

Inherited Abnormalities of Platelets

168. Specify inherited abnormalities of platelets classification:
    - ☐ Congenital amegakaryocytosis / congenital thrombocytopenia (501)
    - ☐ Glanzmann thrombasthenia (502)
    - ☐ Other inherited platelet abnormality (509) – ***Go to question 275***

169. Specify other inherited platelet abnormality: _____

- ***Go to signature line***

Inherited Disorders of Metabolism

170. 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

- ☐ Gaucher disease (541)
- ☐ Niemann-Pick disease (545)
- ☐ I-cell disease (546)
- ☐ Wolman disease (547)
- ☐ Glucose storage disease (548)
- ☐ Mucolipidoses, 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 277***
- ☐ Inherited metabolic disorder, not otherwise specified (520)

171. Specify other inherited metabolic disorder: _____

- ***Go to signature line***

Histiocytic disorders

172. 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 279***
- ☐ Histiocytic disorder, not otherwise specified (570)

173. Specify other histiocytic disorder: _____

- ***Go to signature line***

Autoimmune Diseases

174. 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 282***
- ☐ Other arthritis (633) – ***Go to question 281***

Multiple sclerosis

- ☐ Multiple sclerosis (602)

Connective tissue diseases

- ☐ Systemic sclerosis (scleroderma) (607)
- ☐ Systemic lupus erythematosis (SLE) (605)
- ☐ Sjögren syndrome (608)
- ☐ Polymyositis / dermatomyositis (606)
- ☐ Antiphospholipid syndrome (614)
- ☐ Other connective tissue disease (634) – ***Go to question 283***

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 284***

Other neurological autoimmune diseases

- ☐ Myasthenia gravis (601)
- ☐ Other autoimmune neurological disorder (644) – ***Go to question 285***

Hematological autoimmune diseases

- ☐ Idiopathic thrombocytopenic purpura (ITP) (645)
- ☐ Hemolytic anemia (646)
- ☐ Evan syndrome (647)
- ☐ Other autoimmune cytopenia (648) – ***Go to question 286***

Bowel diseases

- ☐ Crohn's disease (649)
- ☐ Ulcerative colitis (650)
- ☐ Other autoimmune bowel disorder (651) – ***Go to question 287***

175. Specify other arthritis:_____

176. Specify other juvenile idiopathic arthritis (JIA):_____

177. Specify other connective tissue disease:_____

178. Specify other vasculitis:_____

179. Specify other autoimmune neurological disorder:_____

180. Specify other autoimmune cytopenia:_____

181. Specify other autoimmune bowel disorder:_____

- ***Go to signature line***

Other Disease

182. Specify other disease: _____

First Name: _____

Last Name: _____

E-mail address: _____

Date: ___ ___ ___ ___ — ___ ___ — ___ ___

YYYY MM DD