COVID-19 Reinfection Data Collection

Reporting COVID-19 Reinfection

There have been cases of patients recovering from COVID-19 infection, only to later test positive again. For CIBMTR purposes, a new COVID-19 infection should be reported when a patient tests positive again >21 days from resolution (resolution defined as no signs or symptoms of infection).

In these instances, CIBMTR is requesting submission of the Respiratory Virus Post-Infusion (2149) Form as soon as it is known when COVID-19 reinfection occurs. It is critical for CIBMTR to capture COVID-19 reinfection details via this form. The form should be completed and submitted as soon as it is known when a recipient has been diagnosed with COVID-19 reinfection. Please see details below for reporting process.

Process to Report COVID-19 Reinfection

At this time, FormsNet3 capabilities do not allow for multiple Respiratory Virus Post-Infusion (2149) Forms to automatically come due for the same HCT or cellular therapy event (i.e., COVID-19 reinfection). To request manual addition of the 2149 form(s) in FormsNet3 for completion, please follow the steps listed below to submit a ticket via CIBMTR Center Support.
Log into CIBMTR Center Support: https://nmdp.service-now.com/csm
1. Username = FormsNet3 username
2. Password = FormsNet3 password
3. Click Login

*If your email is wrong in the FormsNet3 application, your primary data manager can update your email.

*If you cannot remember your FormsNet3 username and password, please contact the Service Desk 1-800-526-7809 x3411 or 763-406-3411.

Next, click Need Help? and complete the form using the example below.
FormsNet3 capabilities are anticipated to be updated in the Fall (October) Quarterly Release, to allow for multiple Respiratory Virus Post Infusion (2149) Forms to come due automatically in COVID-19 reinfection scenarios.

If you have any questions or concerns, please contact CIBMTR Center Support (https://nmdp.service-now.com/csm).

Sincerely,
Data Operations
Forms Scheduled for Release in FormsNet3

<table>
<thead>
<tr>
<th>Forms</th>
</tr>
</thead>
<tbody>
<tr>
<td>2030 R3 – Sickle Cell Disease Pre-Infusion Data</td>
</tr>
<tr>
<td>2130 R3 – Sickle Cell Disease Post-Infusion Data</td>
</tr>
<tr>
<td>2543* R1 – Gemtuzumab Ozogamicin (Mylotarg™) Supplemental</td>
</tr>
</tbody>
</table>

*New form

To preview the forms and review high level changes you can anticipate, navigate to “Upcoming FormsNet3 Releases” here.

Updates to Follow-up Reporting

In addition to the forms listed above, CIBMTR has now defined a hard stop when reporting multiple genetically modified cellular therapies and HCTs that require follow-up forms. This new functionality has been implemented to reduce center reporting burden and redundancies when having to report multiple cellular therapy and HCT events for a single patient. Instead of having two sets of forms due at different timepoints, all applicable follow-up forms will be due at the same timepoints moving forward (i.e. Forms 2450 +4100 or 2100+4100). Duplicate questions on the paired forms will be disabled in identified reporting scenarios, listed here. Defined hard stops in addition to the custom enabling and disabling will streamline follow-up reporting when a patient receives infusions for multiple indications with overlapping time periods.

Along with the newly revised forms and validation updates, the corresponding Forms Instruction Manual sections are being updated and will also be posted to “Upcoming FormsNet3 Releases” as they are completed. If you have any questions or comments about the manuals, please send them to: CIBMTRFormsManualComments@nmdp.org.

As sections of the Forms Instruction Manual are updated or eLearning courses are added to the website, you will receive an email alerting you to the new materials available.

If you have any questions about the forms or upcoming release, please contact cibmtr-form-feedback@NMDP.ORG.

Sincerely,
Data Operations

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