Form 2118 R3.0: Hodgkin and Non-Hodgkin Lymphoma (LYM) Post-HCT Data

Center: CRID:

Key Fields

Sequence Number: _____

Date Received: __ __ __ __ - __ __- __ __

CIBMTR Center Number: _____

CIBMTR Recipient ID: _____

Date of HCT for which this form is being completed: __ __ __ __ - __ __- __ __

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: _____

Visit

☐ 100 day ☐ 6 months ☐ 1 year ☐ 2 years ☐ > 2 years,

Specify: _____

Disease Assessment at the Time of Best Response to HCT

Questions: 1 - 9

1 Compared to the disease status prior to the preparative regimen, what was the best response to HCT since the date of the last report?
(Include response to any therapy given for post-HCT maintainance or consolidation, but exclude any therapy given for relapsed, persistent, or progressive disease.)

☐ Continued complete remission (CCR) (for patients transplanted in CR)

☐ Complete remission (CR) - complete disappearance of all known disease. For typically FDG-avid lymphoma, a post-treatment residual mass of any size is permitted as long as it is PET negative. For variably FDG-avid lymphomas, all lymph nodes and nodal masses must have regressed via CT to <1.5 cm (for nodes >1.5 cm before therapy) or <1 cm (for nodes 1.1 to 1.5 cm before therapy)

☐ Partial remission (PR) - ≥ 50% reductions in greatest diameter of up to six largest dominant nodes or nodal masses and no new sites. For typically FDG-avid lymphomas, post-treatment PET should be positive in at least one site. For variably PET-avid lymphoma, use CT criteria.

☐ Stable disease (SD) - failure to attain CR, PR, or PD

☐ Progressive disease (PD) - increase by >50% of previously involved sites from nadir or any new lesion

☐ Not assessed

2 Was the date of best response previously reported?

☐ yes ☐ no

3 Date assessed: __ __ __ __ - __ __- __ __

4 Was the disease status assessed by molecular testing (e.g. PCR)?

☐ yes ☐ no

5 Date assessed: __ __ __ __ - __ __- __ __

6 Was disease detected?

☐ yes ☐ no

7 Was the status considered a disease relapse?

☐ yes ☐ no

8 Was a PET (or PET/CT) scan performed?

☐ yes ☐ no

9 Was the PET (or PET/CT) scan positive for lymphoma involvement at any disease site?

☐ yes ☐ no

Post-HCT Therapy

Questions: 10 - 24

10 Was therapy given since the date of the last report for reasons other than relapse or progressive disease?
(Include any maintenance and consolidation therapy.)

☐ yes ☐ no

Specify therapy given:

11 Systemic therapy

☐ yes ☐ no

Specify therapy given:

12 Aldesleukin (interleukin-2, IL-2)

☐ yes ☐ no

13 Alemtuzumab (Campath)

☐ yes ☐ no

14 Lenalidomide (Revlimid)

☐ yes ☐ no

15 Rituximab (Rituxan, MabThera)

☐ yes ☐ no

16 Other systemic therapy

☐ yes ☐ no

17 Specify other systemic therapy: _____

18 Radiation therapy

☐ yes ☐ no

Specify radiation site(s)

19 Mediastinum / chest

☐ yes ☐ no

20 Other site

☐ yes ☐ no

21 Specify other site: _____

22 Surgery

☐ yes ☐ no

23 Other therapy

☐ yes ☐ no

24 Specify other therapy: _____

Disease Relapse or Progression Post-HCT

Questions: 25 - 54

25 Was a disease relapse or progression detected by molecular testing (e.g. PCR)?

☐ yes ☐ no

26 Date assessed: __ __ __ __ - __ __- __ __

27 Was a disease relapse or progression detected by cytogenetic testing (conventional or FISH)?

☐ yes ☐ no

28 Was a disease relapse or progression detected via FISH?

☐ yes ☐ no

29 Date assessed: __ __ __ __ - __ __- __ __

30 Was a disease relapse or progression detected via conventional cytogenetics?

☐ yes ☐ no

31 Date assessed: __ __ __ __ - __ __- __ __

32 Was a disease relapse or progression detected by clinical / hematologic assessment?

☐ yes ☐ no

33 Date assessed: __ __ __ __ - __ __- __ __

34 Was a PET (or PET/CT) scan performed?

☐ yes ☐ no

35 Date of most recent PET (or PET/CT) scan: __ __ __ __ - __ __- __ __

36 Results of most recent PET (or PET/CT) scan

☐ Positive ☐ Negative ☐ indeterminate

37 Was the positive result considered a disease recurrence or progression?

☐ yes ☐ no

38 Did the recipient have known nodal involvement?

☐ yes ☐ no

39 Specify the total number of nodal regions involved

☐ one nodal region

☐ two or more nodal regions

☐ Unknown

40 Was there any known extranodal or splenic involvement?

☐ yes ☐ no ☐ Unknown

Specify site(s) of involvement:

41 Bone

☐ yes ☐ no

42 Bone marrow

☐ yes ☐ no

43 Brain

☐ yes ☐ no

44 Cerebrospinal fluid (CSF)

☐ yes ☐ no

45 Epidural space

☐ yes ☐ no

46 Gastrointestinal (GI) tract

☐ yes ☐ no

47 Kidney

☐ yes ☐ no

48 Liver

☐ yes ☐ no

49 Lung

☐ yes ☐ no

50 Pleura

☐ yes ☐ no

51 Skin

☐ yes ☐ no

52 Spleen

☐ yes ☐ no

53 Other site

☐ yes ☐ no

54 Specify other site: _____

Disease Status at the Time of Evaluation for This Reporting Period

Questions: 55 - 65

55 Was the disease status assessed by molecular testing (e.g. PCR)?

☐ yes ☐ no

56 Date assessed: __ __ __ __ - __ __ - __ __

57 Was disease detected?

☐ yes ☐ no

58 Was the disease status assessed by cytogenetic testing (conventional or FISH)?

☐ yes ☐ no

59 Date assessed: __ __ __ __ - __ __- __ __

60 Was disease detected?

☐ yes ☐ no

61 Was the disease status assessed by clinical / hematologic assessment?

☐ yes ☐ no

62 Date assessed: __ __ __ __ - __ __- __ __

63 Was disease detected?

☐ yes ☐ no

64 What is the current disease status?

☐ Continued complete remission (for patients transplanted in CR)

☐ Complete remission - complete disappearance of all known disease. For typically FDG-avid lymphoma, a post-treatment residual mass of any size is permitted as long as it is PET negative. For variably FDG-avid lymphomas, all lymph nodes and nodal masses must have regressed via CT to <1.5 cm (for nodes >1.5 cm before therapy) or <1 cm (for nodes 1.1 to 1.5 cm before therapy)

☐ Partial remission - ≥ 50% reductions in greatest diameter of up to six largest dominant nodes or nodal masses and no new sites. For typically FDG-avid lymphomas, post-treatment PET should be positive in at least one site. For variably PET-avid lymphoma, use CT criteria.

☐ Stable disease - failure to attain CR, PR, or PD

☐ Progressive disease - increase by >50% of previously involved sites from nadir or any new lesion

☐ Relapse

☐ Not assessed

65 Date assessed: __ __ __ __ - __ __- __ __

First Name: _____

Last Name: _____

E-mail address: _____

Date: __ __ __ __ - __ __- __ __