

**FOLLOW-UP INSERT XXXIX**  
**Congenital Amegakaryocytic Thrombocytopenia**

FOR REGISTRY USE ONLY:

I.D.  -  -

Date received:

TEAM:

IUBMID:

(Institutional Unique Blood or Marrow  
Transplant Identification Number)

1. Date of HSCT/DCI  
for which this form  
is being completed:

Month Day Year

Registry (circle one): IBMTR ABMTR EBMT

2. Date of report:        
 Month Day Year

(Use same date on Graft Insert & Core Insert for this HSCT/DCI)

**Follow-up Information\***

\* Report data up to date of last contact as reported in Q.4 of Follow-up Core Insert  
(see instructions above 002-COREFU Q.3)

**Current Hematologic Parameters**

3. Date of last platelet transfusion during this reporting period:

Month Day Year

4. Date of last red blood cell transfusion during this reporting period:

Month Day Year

5. Was bone marrow examined at any time during this reporting period:

1  Yes  
 0  No

Specify results:

6. Date of most recent examination:        
 Month Day Year

Date unknown

7. Cellularity:

1  Decreased 2  Normal 3  Increased

8. Megakaryocytes:

1  Absent 2  Decreased

9. Were myelodysplastic features present?

1  Yes 0  No

10. Blasts in marrow:    %

11. Is a copy of this bone marrow report attached?

1  Yes 0  No

Remove all identifiers, except Team/IUBMID #s  
and birth dates, and reference Q.5

Retired - Not for Data Submission

TEAM:

IUBMID:

12. Was bone marrow karyotype performed for this reporting period?

- 1  Yes
- 0  No
- 8  Unknown

Specify:

13. Was karyotype normal?

- 1  Yes
- 0  No

Specify cytogenetic abnormalities:

Yes No Unknown

- 14. 1  0  8  -5/5q-
- 15. 1  0  8  -7/7q-
- 16. 1  0  8  -20/20q-
- 17. 1  0  8  -X
- 18. 1  0  8  -Y
- 19. 1  0  8  +8
- 20. 1  0  8  +21
- 21. 1  0  8  +22
- 22. 1  0  8  Abnormal 3q/t(3;3)
- 23. 1  0  8  Abnormal 11q
- 24. 1  0  8  Abnormal 12p
- 25. 1  0  8  Inv(16); t(16;16)
- 26. 1  0  8  t(1;7)
- 27. 1  0  8  t(5;7)
- 28. 1  0  8  t(3;7)
- 29. 1  0  8  t(6;6)
- 30. 1  0  8  t(8;16)
- 31. 1  0  8  t(8;21)
- 32. 1  0  8  t(9;22)
- 33. 1  0  8  t(15;17)
- 34. 1  0  8  Other

35. Specify:

36. Is a copy of the cytogenetics report attached?

- 1  Yes
- 0  No

**Remove all identifiers, except Team/IUBMID #s and birth dates, and reference Q.12**

**Retired - Not for Data Submission**