

## 13. Recipient Transfers [table of contents](#)

- 13.1 Recipient's care is transferred to another transplant center; all follow-up forms will be completed by receiving transplant center.** If a recipient transfers his or her care to another transplant center, for either subsequent HSCT or follow-up care, the form Request for Recipient Transfer (Form 2801) should be completed and submitted to the CIBMTR. The Form 2801 can be completed by either the referring or receiving transplant center, but should be completed only after all negotiations between the two transplant centers have taken place. The recipient transfer will be complete when both transplant centers have signed the Form 2801 and submitted it to the CIBMTR. The Form 2801 must be submitted on paper as representatives from each transplant center must sign the form. A copy of the submitted form should be maintained at each transplant center.
- 13.2 Recipient's care transferred to referring or another physician; all follow-up forms completed by transplant center.** If a recipient is transferred back to his or her referring physician, or another physician outside of the transplant center, it is the continued responsibility of the transplant center to obtain source documentation of post-HSCT evaluations. Submit all follow-up forms to the CIBMTR as these data are critical for all outcome-based analyses. Examples of source documentation include, but are not limited to: inpatient and outpatient progress notes, laboratory reports, and pathological analyses. These source documents will be used to report data fields such as disease status, presence of GVHD, engraftment, etc.