

3. Center Type and Data Collection Forms [table of contents](#)

The type of data collection forms that a transplant center submits to the CIBMTR is based on the center's level of participation. A transplant center may participate as either a *TED only* center, or a *Comprehensive Report Form* center.

Data from the TED series and Comprehensive Report Forms will be used for evaluation of the Program operations, including federally required research such as analyses of center-specific outcomes, and evaluation of optimal registry and cord blood bank size. Data from the Comprehensive Report Forms will typically be included in research studies, though TED-level data may occasionally be used. When appropriate, CIBMTR will share data from these forms with another registry, such as the National Cord Blood Inventory bank.

3.1 *TED only* centers

A transplant center designated as a *TED only* center is required to submit the following forms: the Unique ID Assignment (CRID) (Form 2804), the Pre-TED (Form 2400), and the Post-TED (Form 2450). The HSCT Infusion Form (Form 2006) is required for some allogeneic recipients (see Table 1). The Form 2804 is due only for a recipient's first reported (to the CIBMTR) HSCT.

If the recipient receives a HSCT from a non-NMDP cord blood bank, the IDM Form 2004, the HLA Form 2005, and the INF Form 2006 must be submitted. These forms are not required for recipients receiving non-NMDP marrow, PBSC or other product (with the exception of cord blood) from a related or unrelated donor.

If the recipient receives a HSCT from a NMDP donor or cord blood unit, the INF Form 2006 must be submitted. The IDM Form 2004 and the HLA Form 2005 are not required, as the data will be obtained from existing systems at the NMDP (i.e. the Form 22 for HLA; and the Forms 24 and 50 for IDM).

Table 1 explains the data collection forms required for a *TED only* center that does not participate in the EBMT.

**Table 1. Forms Due for allogeneic (related or unrelated) recipients for
TED only Centers**

TED only Centers			
Donor Origin	NMDP	Non-NMDP (related or unrelated)	
Graft Type	bone marrow, PBSC, cord blood or other	bone marrow, PBSC, or other	cord blood
Forms Due			
Unique ID Assignment (Form 2804)	Yes (First HSCT only)*	Yes (First HSCT only)	Yes (First HSCT only)
Pre-TED (Form 2400)	Yes	Yes	Yes
Infectious Disease Markers (Form 2004)	No, complete NMDP Forms 24 & 50	Yes, only if the recipient has signed consent for Related Sample Repository	Yes
Confirmation of HLA Typing (Form 2005)	No, complete NMDP Form 22		
HSCT Infusion (Form 2006)	Yes		
Post-TED (Form 2450)	Yes	Yes	Yes
Comprehensive Report Forms, including Pre- and Post-HSCT Disease and/or Infection Forms	No	No	No

* If a recipient receives an allogeneic HSCT following a previous autologous HSCT and a Unique ID (CRID) has already been assigned, then the Form 2804 is not required. Report the Unique ID (CRID) from the autologous HSCT.

3.2 Comprehensive Report Form centers

A transplant center designated as a *Comprehensive Report Form* center will submit data on the Pre-TED Form, followed by either the Post-TED Form or the Comprehensive Report Forms. The type of follow-up forms a *Comprehensive Report Form* center uses for a specific recipient is determined by the CIBMTR's form selection algorithm (see 3.3).

A *Comprehensive Report Form* center is required to submit the following forms: the Unique ID Assignment (CRID) (Form 2804), the Pre-TED (Form 2400), and in some circumstances, the HSCT Infusion Form (Form 2006). The Forms 2804 and 2400 are due only for a recipient's first reported (to the CIBMTR) HSCT. If the recipient consents to participate in research, the algorithm will determine if HSCT follow-up data will be submitted on the Post-TED Form, or the Comprehensive Report Forms. If the recipient does not consent to participate in research, then the algorithm will not be used, and HSCT follow-up data must be submitted on the Post-TED Form.

If the recipient receives a HSCT from a non-NMDP donor (related or unrelated), or cord blood bank **and** is selected for Comprehensive Report Forms, then the IDM Form 2004 and the HLA Form 2005 must be submitted along with the INF Form 2006.

If the recipient receives a HSCT from a NMDP donor or cord blood unit, the INF Form 2006 must be submitted. The IDM Form 2004 and the HLA Form 2005 are not required, as the data will be obtained from existing systems at the NMDP (i.e. the Form 22 for HLA; and the Forms 24 and 50 for IDM).

Table 2 explains the data collection forms required for a *Comprehensive Report Form* center.

Table 2. Forms Due for allogeneic (related or unrelated) recipients for Comprehensive Report Form Centers

Comprehensive Report Form Centers			
Donor Origin	NMDP	Non-NMDP (related or unrelated)	
Graft Type	bone marrow, PBSC, cord blood or other	bone marrow, PBSC, or other	cord blood
Forms Due			
Unique ID Assignment (Form 2804)	Yes (First HSCT only)*	Yes (First HSCT only)	Yes (First HSCT only)
Pre-TED (Form 2400)	Yes (Subsequent HSCT(s) follow the same form submission track as HSCT #1. The form selection algorithm is not repeated.)	Yes (Subsequent HSCT(s) follow the same form submission track as HSCT #1. The form selection algorithm is not repeated.)	Yes (Subsequent HSCT(s) follow the same form submission track as HSCT #1. The form selection algorithm is not repeated.)
Infectious Disease Markers (Form 2004)	No, complete NMDP Forms 24 & 50	Yes, if Comprehensive Report Form track is selected or if TED track is selected and the recipient consented to the Related Sample Repository	Yes
Confirmation of HLA Typing (Form 2005)	No, complete NMDP Form 22		
HSCT Infusion (Form 2006)	Yes		
Post-TED (Form 2450)	Yes, only if TED track is selected by algorithm	Yes, only if TED track is selected by algorithm	Yes, only if TED track is selected by algorithm
Comprehensive Report Forms, including Pre- and Post-HSCT Disease and/or Infection Forms	Yes, only if Comprehensive Report Form track is selected by algorithm	Yes, only if Comprehensive Report Form track is selected by algorithm	Yes, only if Comprehensive Report Form track is selected by algorithm

* If a recipient receives an allogeneic HSCT following a previous autologous HSCT and a Unique ID (CRID) has already been assigned, then the Form 2804 is not required. Report the Unique ID (CRID) from the autologous HSCT.

For more information regarding research consent, see [section 6](#). See [appendix C](#) for a complete list of CIBMTR data collection forms and the time points at which each form becomes due and past due.

The printable data collection forms are available on the CIBMTR website. <http://www.cibmtr.org/DataManagement/DataCollectionForms/index.html>

- 3.3 Form selection algorithm:** For *Comprehensive Report Form* centers, the CIBMTR developed an algorithm to determine which set of forms will be required for each HSCT recipient. The goal of the algorithm is to randomly select an epidemiologic sample of recipients for whom a Comprehensive Report Form will be requested. The algorithm includes, but is not limited to, type of HSCT, age of the recipient, disease, etc. The algorithm will be periodically reviewed to assess the burden of data submission for transplant centers.