

MDS/MPN Pre-HCT Data Manual Change History through 3/31/15

Version Number	Date of Change	Type of Change (Add / Remove / Modify)	Description of Change
1.1	06/01/2014	Add	<p>Added explanatory text to question 47:</p> <p><i>Note: Currently there is an issue on the 2014 form regarding RBC transfusion dates. The question should read: "Were RBCs transfused ≤ 30 days before the date of test?"</i></p> <p><i>Transfusions temporarily increase the red blood cell count. It is important to distinguish between a recipient whose body is creating these cells and a recipient who requires transfusions to support the counts.</i></p> <p><i>Indicate if red blood cells were transfused less than or equal to 30 days prior to the testing.</i></p>
1.1	06/01/2014	Add	<p>Added explanatory text to question 51:</p> <p><i>Note: Currently there is an issue on the 2014 form regarding platelet transfusion dates. The question should read: "Were platelets transfused ≤ 7 days before the date of test?"</i></p> <p><i>Transfusions temporarily increase the platelet count. It is important to distinguish between a recipient whose body is creating the platelets and a recipient who received these cells from a transfusion.</i></p> <p><i>Indicate if platelets were transfused less than or equal to 7 days prior to the testing.</i></p>
1.1	06/01/2014	Modify	Updated formatting to match CIBMTR brand standards
1.1	06/01/2014	Add	Added "Revision 3" to the title of the document

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1.2	09/24/2014	Modify	<p>Modified explanatory text for Question 123:</p> <p>...</p> <p><i>MDS/MPN subtypes may also transform/progress from one into another. For example RAEB-1 may transform into RAEB-2. A progression from one subtype of MDS to another indicates that the number of cytopenias, number of blasts, and/or morphology of marrow sufficiently qualified them for a higher grade (i.e., more severe) MDS. For example, an MDS classified as RCUD at diagnosis whose blast count rises to 8% as documented on bone marrow aspirate would have progressed to RAEB-1.</i></p> <p><i>Conversely, do not report a progression/transformation if the recipient's assessments after diagnosis show that they qualify for a lower grade (i.e., less severe MDS). For example, a recipient who is diagnosed with RAEB-2, but whose assessments show that they meet the criteria for RAEB-1 as a response to treatment, would not qualify as a progression or transformation. In this example, the disease is lower grade (i.e., less severe), rather than a higher grade (i.e., more severe) so it should not be reported as a progression/transformation. See the table below for guidance in determining the severity of MDS/MPN progressions and transformations.</i></p> <p><i>[See table in text]</i></p>
1.3	01/15/2015	Add	<p>Added explanatory test to question 121:</p> <p><i>Progression or relapse should be reported even if it was reported in the previous set of questions regarding response to transplant (questions 118-120).</i></p>