APBMT Registry “LMD”
Follow up sheet  1st year post transplant and yearly follow-up

CENTRE IDENTIFICATION
APBMT Center #: ________________
Hospital: ___________________ Unit: _____________________
Contact person: _______________
Country: □ Australia  □ China  □ Hong Kong  □ India
□ Indonesia  □ Iran  □ Japan  □ Korea  □ Malaysia
□ New Zealand  □ Pakistan  □ Philippines
□ Singapore  □ Taiwan  □ Thailand  □ Vietnam

PATIENT IDENTIFICATION
Unique Patient Number or Code: ___________________
Date of transplant: _______ - _____ - _____
                     yyyy - mm - dd

DISEASE STATUS
Best disease status (response) after transplant
(Malignancy only):
(prior to treatment modification in response to a post transplant
disease assessment)
□ Continued complete remission (CR)
□ CR achieved: Date achieved : _______ - _____ - _____
□ Never in CR: Date assessed: _______ - _____ - _____
□ Previously reported

COMPLICATIONS OF TRANSPLANT
Late graft failure (Allo only): □ No □ Yes
Chronic Graft Versus Host Disease present during this period
(Allo only):
□ No (never) □ Limited □ Extensive □ Unknown
Date of diagnosis of cGvHD (Allo only): _______ - _____ - _____
                     yyyy - mm - dd
Did a secondary malignancy, lymphoproliferative or
myeloproliferative disorder occur?:
□ No □ Yes 
    Date of diagnosis: _______ - _____ - _____
    Diagnosis: __________________________

FIRST RELAPSE OR PROGRESSION
First Relapse or Progression after HSCT (Malignancy only):
Relapse/progression detected by clinical/hematological method:
□ No: Date assessed: _______ - _____ - _____
□ Yes: Date first seen: _______ - _____ - _____
□ Previously reported
□ Continuous progression since HSCT
□ Not evaluated

DATE OF LAST CONTACT
Date of last follow up or death: _______ - _____ - _____
                     yyyy - mm - dd

PATIENT STATUS
Survival Status:
□ Alive □ Dead
Check here if patient lost to follow up □
Main Cause of Death (Check only one main cause):
□ Relapse or Progression/Persistent disease
□ Secondary malignancy
□ HSCT Related Cause
    (check as many as appropriate):
    □ GVHD □ Cardiac Toxicity
    □ Rejection/Poor graft function □ Infection
    □ Pulmonary toxicity □ Veno occlusive disorder
    □ Post transplant lymphoproliferative disorder
    □ Other: ________________________________
□ Unknown
□ Other: ________________________________