

Blood and Marrow Transplant Clinical
Trials Network

Demographics (DEM)

Web Version: 1.0; 6.02; 12-02-15

1. Name Code:(NAMECODE)

2. IUBMID # (if available):(IUBMID)

3. Gender:(GENDER)

 1 - Male 2 - Female

4. Date of Birth:(DOB)

 (mm/dd/yyyy)

5. Ethnicity:(ETHNIC)

1- Hispanic or Latino
2- Not Hispanic or Latino
8- Unknown
9- Not Answered

6. Race:(RACE)

White
10 - White (Not Otherwise Specified)
11 - European (Not Otherwise Specified)
13 - Mediterranean
14 - White North American
*Additional Options Listed Below

Specify race:(RACESP)

7. Secondary Race:(RACE2)

White
10 - White (Not Otherwise Specified)
11 - European (Not Otherwise Specified)
13 - Mediterranean
14 - White North American
*Additional Options Listed Below

Specify secondary race:(RACE2SP)

Comments:(DEMCOMM1)

Additional Selection Options for DEM

Race:

15 - South or Central American

16 - Eastern European

17 - Northern European

18 - Western European

81 - White Caribbean

82 - North Coast of Africa

83 - Middle Eastern

Black

20 - Black (Not Otherwise Specified)

21 - African American

22 - African Black (Both Parents Born in Africa)

23 - Caribbean Black

24 - South or Central American Black

29 - Black, Other Specify

Asian

30 - Asian (Not Otherwise Specified)

31 - Indian/South Asian

32 - Filipino (Pilipino)

34 - Japanese

35 - Korean

36 - Chinese

37 - Other Southeast Asian

38 - Vietnamese

American Indian or Alaska Native

50 - Native American (Not Otherwise Specified)

51 - Native Alaskan/Eskimo/Aleut

52 - American Indian (Not Otherwise Specified)

53 - North American Indian

54 - South or Central American Indian

55 - Caribbean Indian

Native Hawaiian or Other Pacific Islander

60 - Native Pacific Islander (Not Otherwise Specified)

61 - Guamanian

62 - Hawaiian

63 - Samoan

Other

88 - Unknown

90 - Other, Specify

99 - Not Answered

Blood and Marrow Transplant Clinical
Trials Network

12030 (ENR)

Web Version: 1.0; 1.01; 10-16-15

GVHD Prophylaxis Enrollment Form: Segment 0

1. Patient's date of birth: (GVBRTHDT)

06/22/1977 (mm/dd/yyyy)

2. Date BMT CTN 1203 informed consent form signed: (GVCNSTDT)

(mm/dd/yyyy)

3. Patient's donor type: (GVDNRTYP)

1 - Related Donor
2 - Unrelated Donor

Comments: (GVOCOMM)

Blood and Marrow Transplant Clinical Trials Network

GVHD HLA Form - Page 1 (HA1)

Web Version: 1.0; 1.01; 10-16-15

Segment (PROTSEG): 0

Visit Number (VISNO):

HLA Typing

Patient's Donor Type: (HLADNTYP)

1 - Related Donor
2 - Unrelated Donor

Type of HLA Match required by this protocol: (HT1MATCH)

Loci A, B: Low Level DNA, Locus DRB1: High Level DNA
Loci A, B: Serologic, Locus DRB1: High Level DNA
Loci A, B: Serologic, Locus DRB1: Low Level DNA
Loci A, B, C: Low Level DNA, Locus DRB1: High Level DNA
Loci A, B, C: Serologic, Locus DRB1: High Level DNA
*Additional Options Listed Below

Recipient HLA Typing

Upload HLA-typing source documents. Be sure to remove patient identifiers prior to uploading.

HLA-A

Typing method: (HLAAMET)

1 - DNA Technology
2 - Serology

Antigens/alleles provided: (HLAANUM)

1 - One
2 - Two

1st: (HLAA11X) (HLAA12X) / (HLAA13X) / (HLAA14X) /
(HLAA15X) (HLAA16X) / (HLAA17X) / (HLAA18X) /
2nd: (HLAA21X) (HLAA22X) / (HLAA23X) / (HLAA24X) /
(HLAA25X) (HLAA26X) / (HLAA27X) / (HLAA28X) /

HLA-B

Typing method: (HLABMET)

1 - DNA Technology
2 - Serology

Antigens/alleles provided: (HLABNUM)

1 - One
2 - Two

1st: (HLAB11X) (HLAB12X) / (HLAB13X) / (HLAB14X) /
(HLAB15X) (HLAB16X) / (HLAB17X) / (HLAB18X) /
2nd: (HLAB21X) (HLAB22X) / (HLAB23X) / (HLAB24X) /
(HLAB25X) (HLAB26X) / (HLAB27X) / (HLAB28X) /

HLA-C

Typing method: (HLACMET)

1 - DNA Technology
2 - Serology

Antigens/alleles provided: (HLACNUM)

1 - One
2 - Two

1st: (HLAC11X) (HLAC12X) / (HLAC13X) / (HLAC14X) /
 (HLAC15X) (HLAC16X) / (HLAC17X) / (HLAC18X) /
 2nd: (HLAC21X) (HLAC22X) / (HLAC23X) / (HLAC24X) /
 (HLAC25X) (HLAC26X) / (HLAC27X) / (HLAC28X) /

HLA-DRB1

Typing method:(HLADMET)

1 - DNA Technology
 2 - Serology

Antigens/alleles provided:(HLADNUM)

1 - One
 2 - Two

1st: (HLAD11X) (HLAD12X) / (HLAD13X) / (HLAD14X) /
 (HLAD15X) (HLAD16X) / (HLAD17X) / (HLAD18X) /
 2nd: (HLAD21X) (HLAD22X) / (HLAD23X) / (HLAD24X) /
 (HLAD25X) (HLAD26X) / (HLAD27X) / (HLAD28X) /

Comments:(HA 1COMM)

Additional Selection Options for HA1

Type of HLA Match required by this protocol:

Loci A, B, C, DQ: Low Level DNA, Locus DRB1: High Level DNA

High Level DNA

Low Level DNA

Serologic

**Blood and Marrow Transplant Clinical
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GVHD HLA Form - Page 2 (HA2)

Web Version: 1.0; 1.01; 10-16-15

Segment (PROTSEG): 0

Visit Number (VISNO):

HLA Typing

Type of HLA Match required by this protocol: (HT2MATCH)

Loci A, B: Low Level DNA, Locus DRB1: High Level DNA
Loci A, B: Serologic, Locus DRB1: High Level DNA
Loci A, B: Serologic, Locus DRB1: Low Level DNA
Loci A, B, C: Low Level DNA, Locus DRB1: High Level DNA
Loci A, B, C: Serologic, Locus DRB1: High Level DNA
*Additional Options Listed Below

Donor HLA Typing

Upload HLA-typing source documents. Be sure to remove patient identifiers prior to uploading.

HLA-A

Typing method: (HLAAMET)

1 - DNA Technology
2 - Serology

Antigens/alleles provided: (HLAANUM)

1 - One
2 - Two

1st:	(HLAA11X) <input type="text"/>	(HLAA12X) / <input type="text"/>	(HLAA13X) / <input type="text"/>	(HLAA14X) / <input type="text"/>
	(HLAA15X) <input type="text"/>	(HLAA16X) / <input type="text"/>	(HLAA17X) / <input type="text"/>	(HLAA18X) / <input type="text"/>
2nd:	(HLAA21X) <input type="text"/>	(HLAA22X) / <input type="text"/>	(HLAA23X) / <input type="text"/>	(HLAA24X) / <input type="text"/>
	(HLAA25X) <input type="text"/>	(HLAA26X) / <input type="text"/>	(HLAA27X) / <input type="text"/>	(HLAA28X) / <input type="text"/>

HLA-B

Typing method: (HLABMET)

1 - DNA Technology
2 - Serology

Antigens/alleles provided: (HLABNUM)

1 - One
2 - Two

1st:	(HLAB11X) <input type="text"/>	(HLAB12X) / <input type="text"/>	(HLAB13X) / <input type="text"/>	(HLAB14X) / <input type="text"/>
	(HLAB15X) <input type="text"/>	(HLAB16X) / <input type="text"/>	(HLAB17X) / <input type="text"/>	(HLAB18X) / <input type="text"/>
2nd:	(HLAB21X) <input type="text"/>	(HLAB22X) / <input type="text"/>	(HLAB23X) / <input type="text"/>	(HLAB24X) / <input type="text"/>
	(HLAB25X) <input type="text"/>	(HLAB26X) / <input type="text"/>	(HLAB27X) / <input type="text"/>	(HLAB28X) / <input type="text"/>

HLA-C

Typing method: (HLACMET)

1 - DNA Technology
2 - Serology

Antigens/alleles provided: (HLACNUM)

1 - One
2 - Two

1st:	(HLAC11X) <input type="text"/>	(HLAC12X) / <input type="text"/>	(HLAC13X) / <input type="text"/>	(HLAC14X) / <input type="text"/>
	(HLAC15X) <input type="text"/>	(HLAC16X) / <input type="text"/>	(HLAC17X) / <input type="text"/>	(HLAC18X) / <input type="text"/>
2nd:	(HLAC21X) <input type="text"/>	(HLAC22X) / <input type="text"/>	(HLAC23X) / <input type="text"/>	(HLAC24X) / <input type="text"/>

(HLAC25X) (HLAC26X) / (HLAC27X) / (HLAC28X) /

HLA-DRB1

Typing method:(HLADMET)

1 - DNA Technology
2 - Serology

Antigens/alleles provided:(HLADNUM)

1 - One
2 - Two

1st: (HLAD11X) (HLAD12X) / (HLAD13X) / (HLAD14X) /

(HLAD15X) (HLAD16X) / (HLAD17X) / (HLAD18X) /

2nd: (HLAD21X) (HLAD22X) / (HLAD23X) / (HLAD24X) /

(HLAD25X) (HLAD26X) / (HLAD27X) / (HLAD28X) /

Recipient-to-Donor HLA Match Scores

Recipient-to-Donor HLA Match Score required by this protocol:(HT2HRQD)

Recipient-to-Donor Locus A calculated HLA Match Score(HT2SCRA)

Recipient-to-Donor Locus B calculated HLA Match Score(HT2SCRB)

Recipient-to-Donor Locus C calculated HLA Match Score(HT2SCRC)

Recipient-to-Donor Locus DRB1 calculated HLA Match Score(HT2SCRD)

Recipient-to-Donor total calculated HLA Match Score(HT2HLA)

Indicate your institution's HLA Match Score for Recipient-to-Donor:(HT2SISC)

0/6
1/6
2/6
3/6
4/6
*Additional Options Listed Below

Comments:(HA2COMM)

Additional Selection Options for HA2

Type of HLA Match required by this protocol:

Loci A, B, C, DQ: Low Level DNA, Locus DRB1: High Level DNA

High Level DNA

Low Level DNA

Serologic

Indicate your institution's HLA Match Score for Recipient-to-Donor:

5/6

6/6

0/8

1/8

2/8

3/8

4/8

5/8

6/8

7/8

8/8