Contents

Fungal Infection Pre-Infusion Data (2046 R6) / Fungal Infection Post-Infusion Data (2146 R5)

2046R5/2146R4	Data Change Description	2046R6/2146R5	Rationale
F2046R6 / F2146R5 - Organism (Q1)			
Organism list is dropdown	Replacement	Organism list is autopopulated	Technical maintenance less involved

Post-Cellular Therapy Essential Data (4100 R10)

General Updates

- **Updates made to applicable questions that include the wording 'since the date of last report' / 'within the reporting period'.**
  - Update: Removed wording 'since the date of last report'/ 'within the reporting period' from the question text.
  - Rationale: This update was made to align with data capture best practices, as it should be understood that the applicable value (best/worst/highest/lowest/most recent) should come from assessments within the reporting period.

- **Updates made to applicable questions to remove 'unknown' option.**
  - Update: Removed 'unknown' option from the option list. For example, on F4100, 'unknown' option is removed.
  - Rationale: Updates to remove 'unknown' option to align with data capture best practices, when the 'unknown' option was not being selected.

- **Updates made to applicable questions to remove 'Be the Match' text.**
  - Update: Updated question text from 'Did NMDP/Be the Match facilitate the procurement, collection, or transportation of the product?' to 'Did NMDP facilitate the procurement, collection, or transportation of the product?
  - Rationale: Align with corporate rebranding and data capture best practices.

- **Updates made to remove questions related to COVID.**
  - Removal: Removed questions to capture data on COVID from F4000 / F4100.
  - Rationale: This data is no longer relevant for research. Removing these questions reduces data burden.

- **Updates made to question "Name of cellular therapy product *(for most recent cell therapy infusion)*"**
  - Removal: This question is removed from F4100.
  - Rationale: The question is removed because new validation functionality allows for this information to only be collected once and then used in validations on other forms.

- **Updates made to remove applicable parent questions containing known/unknown options.**
  - Update: Removed known / unknown parent question. For example, on F4100, removed parent questions asking whether date was known/unknown and leaving just the collection date and date of ANC recovery, respectively.
  - Rationale: Align with data capture best practices. The parent question was removed because the data being collected were known most of the time.

- **Updates made to remove disease and organism codes throughout CT forms.**
  - Update: Organism list was updated to remove organism codes from the option lists from F4000 / F4100. Diagnosis codes were removed from the Indication for Cellular Therapy options on F4000.
  - Rationale: Not necessary on form display, only for internal purposes per data capture best practices.

Post-Cellular Therapy Essential Data (4100 R10)

Subsequent Cellular Infusions

- **Q5 "Has the recipient received a new course of cellular therapy (unplanned) since the date of last report?", Q6 "Was this infusion a donor lymphocyte infusion (DLI)?*(see forms instruction manual for definition)*", Q7 "Number of DLIs in this reporting period", Q8 "Are any of the products, associated with this course of cellular therapy, genetically modified?", Q9 "Date of cellular therapy", Q10 "Did the recipient receive an HCT since the date of last report?", & Q11 "Date of HCT" on R9**
  - Update: Removed questions.
  - Rationale: These questions are removed because they are captured on Indication for CIBMTR Data Reporting (2814) form and to align with recent updates made to Post-Transplant Essential Data (2450R9) form.

Best Response to Cellular Therapy

- **Q4 "What was the best response to the cellular therapy?"**
  - Update: Added new option 'not evaluated' to the option list.
  - Rationale: The new option is added to align with recent updates to TED forms and to improve data quality.

Peripheral Blood Count Recovery

- **Q7 "Was there evidence of initial recovery?"**
  - Update: Updated the option text from 'Not applicable (ANC never dropped below 500/mm^3 at any time after the start of lymphodepleting therapy / no lymphodepleting therapy given)' to 'Not applicable (ANC never dropped below 500/mm^3 at any time post-infusion / no lymphodepleting therapy given)'
  - Rationale: The option text is updated to match the manual instructions.

- **Q13 "Was an initial platelet count ≥ 20 x 10^9/L achieved?"**
  - Update: Updated the option text from 'Not applicable (ANC never dropped below 500/mm^3 at any time after the start of lymphodepleting therapy / no lymphodepleting therapy given)' to 'Not applicable (ANC never dropped below 500/mm^3 at any time post-infusion / no lymphodepleting therapy given)'
  - Rationale: The option text is updated to match the manual instructions.

- **Q15 "Following the initial platelet recovery, was there subsequent decline in platelets to < 20 x 10^9/L for > 3 days?", Q16 "Date of decline in platelets to < 20 x 10^9/L for ≥ 3 days: *(first of 3 days that the platelets declined)*", Q17 "Did recipient recover and maintain platelets ≥ 20 x 10^9/L following the decline?" & Q18 "Date of platelet recovery"**
  - Addition: New questions.
  - Rationale: The new questions are added to capture additional information about platelet recovery important to outcomes research.

New Malignancy, Lymphoproliferative or Myeloproliferative Disease / Disorder

- **Instructional text above Q21: "Do not report malignancies that are the same disease / disorder for which this infusion was performed. Do not include relapse, progression or transformation of the same disease subtype".**
  - Update: Updated instructional text from 'Report new malignancies that are different than the indicated disease / disorder for which this cellular therapy was performed. Do not include relapse, progression or transformation of the same disease subtype' to 'Do not report malignancies that are the same disease / disorder for which this infusion was performed. Do not include relapse, progression or transformation of the same disease subtype'.

- Rationale: The instructional text is updated for clarity and to align with recent updates to Post-Transplant Essential Data (F2450R9).

Autoimmune Disorder

- **Autoimmune Disorder, Q22 "Was a subsequent autoimmune disorder diagnosed?", Q23 "Specify the autoimmune disorder", Q24 "Specify other autoimmune disorder" & Q25 "Date of diagnosis"**
  - Addition: New section and questions.
  - Rationale: The new section and questions are added because it is important to know subsequent autoimmune disorder diagnoses in CT research.

Graft vs. Host Disease

- **Q29 "Overall grade of acute GVHD at diagnosis"**
  - Update: Floating text of the option list was updated as follows:
    - **From** 'Rash on > 50% of skin, bilirubin 2-3 mg/dL, or diarrhea 500 – 1000 mL/day or persistent nausea or vomiting' **to** 'Rash on > 50% of skin, bilirubin 2-3 mg/dL, or diarrhea 500 – 1000 mL/day or persistent nausea (adult) / diarrhea 280-555 mL/m^2/day or 10-19.9 mL/kg/day (pediatric)'.
    - **From** 'Bilirubin 3-15 mg/dL, or gut stage 2-4, diarrhea > 1000 mL/day or severe abdominal pain with or without ileus' **to** 'Bilirubin 3-15 mg/dL, or diarrhea > 1000 mL/day or severe abdominal pain with or without ileus and/or grossly bloody stool (adult) / 556-833+ mL/m^2/day or 20-30+ mL/kg/day or severe abdominal pain, with or without ileus, and / or grossly bloody stool'
    - **From** 'Generalized erythroderma with bullous formation, or bilirubin >15 mg/dL, and/or grossly bloody stool' **to** 'Generalized erythroderma with bullous formation, or bilirubin >15 mg/dL'.
  - Rationale: The floating text is updated to align with recent updates to Post-Transplant Essential Data (F2450R9).

- **Q30 "Skin *(at diagnosis)*"**
  - Update: Floating text of the question is updated by adding 'at diagnosis' after the question text. The floating text of the option list is updated as follows:
    - **From** 'Maculopapular rash, < 25% of body surface' **to** 'Rash on < 25% of skin'
    - **From** 'Maculopapular rash, 25–50% of body surface' **to** 'Rash on 25–50% of skin'
    - **From** 'Generalized erythroderma, > 50% of body surface' **to** 'Rash on > 50% of skin'
    - **From** 'Generalized erythroderma with bullae formation and/or desquamation' **to** 'Generalized erythroderma with bullous formation'.
  - Rationale: The floating text is updated to align with recent updates to Post-Transplant Essential Data (F2450R9).

- **Q31 "Lower intestinal tract *(at diagnosis)*"**

- Update: Floating text of the question is updated from 'use mL per day for adult recipients and mL/kg/day for pediatric recipients' to 'at diagnosis'. The floating text of the option list is updated as follows:
  - **From** 'No diarrhea, no diarrhea attributable to acute GVHD / diarrhea < 500 mL/day (adult), or < 10 mL/kg/day (pediatric)' **to** 'No diarrhea, no diarrhea attributable to acute GVHD / diarrhea < 500 mL/day (adult) / <280 mL/m^2/day or <10 mL/kg/day (pediatric)'
  - **From** 'Diarrhea 500 - 1000 mL/day (adult), or 10 - 19.9 mL/kg/day (pediatric)' **to** 'Diarrhea 500 - 1000 mL/day (adult) / 280-555 mL/m^2/day or 10 - 19.9 mL/kg/day (pediatric)'
  - **From** Diarrhea 1001 - 1500 mL/day (adult), or 20 - 30 mL/kg/day (pediatric) **to** Diarrhea >1000 mL/day (adult) / 556-833 mL/m^2/day or 20 - 30 mL/kg/day (pediatric)
  - **From** Diarrhea >1500 mL/day (adult), or >30 mL/kg/day (pediatric) **to** Diarrhea >1500 mL/day (adult), / >833 mL/m^2/day or >30 mL/kg/day (pediatric)
- Rationale: The floating text is updated to align with recent updates to Post-Transplant Essential Data (F2450R9).

- **Q32 "Upper intestinal tract *(at diagnosis)*"**
  - Update: Floating text updated by adding 'at diagnosis' after the question text.
  - Rationale: The floating text is updated to align with recent updates to Post-Transplant Essential Data (2450R9) form.

- **Q33 "Liver *(at diagnosis)*"**
  - Update: Floating text updated by adding 'at diagnosis' after the question text.
  - Rationale: The floating text is updated to align with recent updates to Post-Transplant Essential Data (2450R9) form.

- **Instructional text "Specify the maximum overall grade and maximum organ staging of acute GVHD"**
  - Update: Updated instructional text from 'Specify the maximum overall grade of acute GVHD since the date of last report' to 'Specify the maximum overall grade and maximum organ staging of acute GVHD'.
  - Rationale: The instructional text is updated to align with recent updates to Post-Transplant Essential Data (2450R9) form.

- **Q36 "Maximum overall grade of acute GVHD"**
  - Update: The floating text of the option list is updated as follows:
    - **From** 'Rash on > 50% of skin, bilirubin 2-3 mg/dL, or diarrhea 500 – 1000 mL/day or persistent nausea or vomiting **to** 'Rash on > 50% of skin, bilirubin 2-3 mg/dL, or diarrhea >500 – 1000 mL/day or persistent nausea (adult) / diarrhea 280-555 mL/m^2/day or 10-19.9 mL/kg/day (pediatric)'.
    - **From** 'Bilirubin 3-15 mg/dL, or gut stage 2-4 diarrhea > 1000 mL/day or severe abdominal pain with or without ileus **to** 'Bilirubin 3-15 mg/dL or diarrhea > 1000 mL/day or severe abdominal pain with or without ileus and/or grossly bloody

stool (adult) / 556-833+ mL/m^2/day or 20-30+ mL/kg/day or severe abdominal pain, with or without ileus, and / or grossly bloody stool (pediatric)'.
    - **From** 'Generalized erythroderma with bullous formation, or bilirubin >15 mg/dL, and/or grossly bloody stool **to** 'Generalized erythroderma with bullous formation, or bilirubin >15 mg/dL'.
  - Rationale: The floating text is updated to align with recent updates to Post-Transplant Essential Data (2450R9) form.

- **Q38 "Skin *(maximum stage)*", Q39 "Lower intestinal tract *(maximum stage)*" , Q40 "Upper intestinal tract *(maximum stage)*", Q41 "Liver*(maximum stage)*", Q42 "Other site(s) involved with acute GVHD" & Q43 "Specify other site(s)"**
  - Update: Questions related to maximum organ staging for acute GVHD are included.
  - Rationale: The questions are added to align with recent updates to Post-Transplant Essential Data (2450R9) form.

- **Q43 "Specify if chronic GVHD was limited or extensive" on R9**
  - Removal: Removed the question.
  - Rationale: The question is removed because the data is no longer reported in medical records or relevant for research.

- **Instructional text above Q47 "Specify the maximum overall grade of chronic GVHD"**
  - Update: The instructional text is updated from 'Specify the maximum grade of chronic GVHD since the date of last report' to 'Specify the maximum overall grade of chronic GVHD'.
  - Rationale: The instructional text is updated to align with recent updates to Post-Transplant Essential Data (2450R9) form.

- **Q49 "Is the recipient still taking systemic steroids? (*do not report steroids for adrenal insufficiency, ≤10 mg/day for adults, <0.1 mg/kg/day for children)*"**
  - Update: The floating text 'recipient did not receive systemic steroids within the reporting period' is added to the 'not applicable' option.
  - Rationale: The floating text is added to align with recent updates to Post-Transplant Essential Data (2450R9) form.

- **Q50 "Is the recipient still taking (non-steroid) immunosuppressive agents (including PUVA) for GVHD?"**
  - Update: The floating text 'recipient did not receive non-steroid immunosuppressive agents within the reporting period' is added to the 'not applicable' option.
  - Rationale: The floating text is added to align with recent updates to Post-Transplant Essential Data (2450R9) form.

Toxicities

Cytokine Release Syndrome (CRS)

- **The section (Q52-80) is now a multiple in FormsNet3.**
  - Update: the CRS questions are now a multiple.
  - Rationale: Additional instances of Q52-80 can added to FN3 to allow for capture of multiple CRS events in a reporting period.

- **Q56 "Start date of first therapy"**
  - Addition: New question.
  - Rationale: Knowing the interval between CRS diagnosis date and start date of the first therapy is important in CT research.

- **Q69 "Specify the laboratory values collected *(check all that apply)***

Question number	Question text
70	Maximum C-reactive protein collected
71	Date C-reactive protein collected
72	C-reactive protein upper limit of normal for your institution
73	Maximum interleukin-6
74	Date interleukin-6 collected
75	Maximum total serum ferritin
76	Date total serum ferritin collected

  - Data Move: Moved questions from standalone subsection to 'cytokine release syndrome (CRS)' subsection within the toxicity section.
  - Rationale: These lab values are important for grading the CRS event.

Immune effector cell-associated hemophagocytic lymphohistiocytosis-like syndrome (IEC-HS)

- **Update the toxicity name to "Immune effector cell-associated hemophagocytic lymphohistiocytosis-like syndrome (IEC-HS)" (Q81, Q82, Q83, Q111)**
  Update: Updated the name of the toxicity from "macrophage activation syndrome (MAS) / hemophagocytic lymphohistiocytosis (HLH)-like toxicities" to "immune effector cell-associated hemophagocytic lymphohistiocytosis-like syndrome (IEC-HS)".
  - Rationale: The name was updated in accordance with the latest scientific update.

- **Q83 "Specify therapy given for IEC-HS *(check all that apply)*"**
  - Update: Removed options 'Dasatinib', 'Siltuximab', 'Tocilizumab' from the option list.
  - Rationale: The options are removed because they are not used as treatment for IEC-HS

- **Q85 "Date of last dose of therapy"**

- Addition: New question.
- Rationale: Knowing the date of last dose of therapy is important to determine the length of treatment.

- **Q88 "Specify the laboratory values collected *(check all that apply)*"**
  - Update: Added new options 'AST (SGOT)', 'ALT(SGPT), 'CXCL9', 'Direct bilirubin', 'LDH', 'Prothrombin Time (PT)', 'Partial Thromboplastin (PTT)', 'Soluble interleukin-2 receptor α (sIL2RA or soluble CD25)', 'Total serum ferritin' to the option list and added associated child questions.

Question number	Question text
89 & 90	Maximum AST (SGOT) & Upper limit of normal for your institution
91 & 92	Maximum ALT(SGPT) & Upper limit of normal for your institution
93 & 94	Maximum CXCL-9 & Upper limit of normal for your institution
95 & 96	Maximum direct bilirubin & Upper limit of normal for your institution
98 & 99	Maximum LDH & Upper limit of normal for your institution
100 & 101	Maximum prothrombin Time (PT) & Upper limit of normal for your institution
102 & 103	Maximum partial thromboplastin (PTT) & Upper limit of normal for your institution
104 & 105	Maximum soluble interleukin-2 receptor α & Date collected
106 & 107	Maximum total serum ferritin & Date collected

  Rationale: The new options are added because these lab values are important in grading the IEC-HS event.

- **Q108 "Maximum triglyceride level"**
  - Update: Updated question text from 'Highest triglyceride level' to 'Maximum triglyceride level'.
  - Rationale: The question text is updated for clarity of question intent and for consistency across forms.

- **Q76 "Date fibrinogen sample collected" & Q78 "Date triglyceride sample collected" on R9**

- Update: Removed questions.
- Rationale: The questions have been removed as they are no longer relevant.

- **Q109 "Was there a fever associated with IEC-HS?"**
  - Addition: New question.
  - Rationale: Important for grading the IEC-HS event.

- **Q110 "Were there organ toxicities associated with IEC-HS? *(check all that apply)*"**
  - Addition: New question.
  - Rationale: Important for grading the IEC-HS event.

Neurotoxicity

- **Questions about "neurotoxicity" as a general category were removed and new subsections were added for specific types of neurotoxicities**
  - Removal: Removed questions associated with the broad term "neurotoxicity".
  - Rationale: The questions are removed to capture the specific neurotoxicity categories such as ICANS, Parkinsonism, TIAN, etc.

ICANS

- **Q113 "Did the recipient experience immune effector cell-associated neurotoxicity syndrome (ICANS)?", Q114 "Was the date of onset previously reported?", Q115 "Date of ICANS onset", Q116 "Specify therapy given for ICANS *(check all that apply)*" & Q117 "Specify other therapy"**
  - Addition: New questions.
  - Rationale: News questions were added specific to ICANS. Understanding ICANS is crucial for developing strategies to prevent and manage this toxicity.

- **Q118 "What was the lowest ICE score?"**
  - Update: Updated the question text from 'What was the lowest score?' to 'What was the lowest ICE score?'.
  - Rationale: Only ICE scores will be collected, and is important for grading the event.

- **Q119 "Indicate the manifestations of ICANS *(check all that apply)*", Q125 "Did ICANS resolve?"& Q126 "Date resolved"**
  - Addition: New questions.
  - Rationale: New questions were added specific to ICANS. Understanding ICANS is crucial for developing strategies to prevent and manage this toxicity.

- **Q122 "Specify type of motor findings *(check all that apply)*"**
  - Update: Removed the following options 'Cranial nerve palsy (III, VI, VII)', 'Facial weakness / paralysis', 'Guillian Barre syndrome', 'Myelitis' from the option list.

- Rationale: Removed the options not defined as ICANS.

- Update: Updated the question text from 'Specify type of motor neuron disorder (check all that apply)' to 'Specify type of motor findings (check all that apply)'.
- Rational: To be consistent with ICANs grading terminology.

Parkinsonism

- **Q127 "Did the recipient experience parkinsonism?", Q128 "Was the date of onset previously reported?", Q129 "Date of parkinsonism onset", Q130 "Specify therapy given for parkinsonism *(check all that apply)*", Q131 "Specify other therapy", Q132 "Indicate the manifestations of parkinsonism *(check all that apply)*, Q133 "Specify other manifestation", Q134 "Did parkinsonism resolve?", & Q135 "Date resolved"**
  - Addition: New questions.
  - Rationale: Added new questions specific to Parkinsonism, to recognize this neurotoxicity and to collect data for research.

Cranial nerve palsy (III, VI, VII)

- **Q136 "Did the recipient experience cranial nerve palsy (III, VI, VII)?", Q137 "Was the date of onset previously reported?", Q138 "Date of cranial nerve palsy onset", Q139 "Specify therapy given for cranial nerve palsy (III, VI, VII) *(check all that apply)*", Q140 "Specify other therapy", Q141 "Did cranial nerve palsy (III, VI, VII) resolve?", & Q142 "Date of cranial nerve palsy resolution"**
  - Addition: New questions.
  - Rationale: Added new questions specific to cranial nerve palsy (III, VI, VII) to recognize this neurotoxicity and to collect data for research.

Tumor inflammation-associated neurotoxicity (TIAN)

- **Q143 "Did the recipient experience tumor inflammation-associated neurotoxicity (TIAN)?", Q144 "Was the date of onset previously reported?", Q145 "Date of TIAN onset", Q146 "Specify therapy given for TIAN *(check all that apply)*", Q147 "Specify other therapy", Q148 "Did TIAN resolve?" & Q149 "Date of TIAN resolution"**
  - Addition: New questions.
  - Rationale: Added new questions specific to TIAN are to recognize this neurotoxicity and to collect data for research.

Guillian-Barre Syndrome (GBS)

- **Q150 "Did the recipient experience Guillian-Barre syndrome?", Q151 "Was the date of onset previously reported?", Q152 "Date of Guillian-Barre syndrome onset", Q153 "Specify therapy given for Guillian-Barre syndrome *(check all that***

***apply)*", Q154 "Specify other therapy", Q155 "Did Guillian-Barre syndrome resolve?" & Q156 "Date of Guillian-Barre syndrome resolution"**

- Addition: New questions.
- Rationale: Added new questions specific to Guillian-Barre syndrome to recognize this neurotoxicity and to collect data for research.

Other neurotoxicities

- **Q157 "Other neurotoxicity", Q158 "Specify other neurotoxicity", Q159 "Date of onset" & Q160 "Specify type of cerebrovascular accident"**
  - Update: New questions.
  - Rationale: Added new questions to collect other neurotoxicities that do not fit in a category above.

Other toxicities

Hypogammaglobulinemia

- **Q162 "Specify the reason the recipient received immunoglobulin therapy"**
  - Update: New question.
  - Rationale: Added new question to understand if the intent of the therapy was for prophylaxis or replacement.

- **Q139 "Is the recipient still requiring replacement therapy?" on R9**
  - Removal: Removed a question.
  - Rationale: The question was removed.

- **Q163 "Date of first administration of immunoglobulin therapy"**
  - Update: New question.
  - Rationale: Added new question to determine length of the therapy.

- **Q164 "Did the immunoglobulin therapy stop?", Q165 "Date of last immunoglobulin therapy infusion"**
  - Update: New questions.
  - Rationale: Added new question to determine length of the therapy.

Infection

- **Q181 "Organism"**

F4100R9	Data Change Description	F4100R10	Rationale
	Addition	Achromobacter xylosoxidans	The organism list is revised in accordance with recommendations from the Infection working

			committee, to ensure alignment with clinically relevant organisms commonly identified in laboratory reports
	Addition	Actinomyces (all species)	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms commonly identified in laboratory reports
	Addition	Bacillus cereus	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms commonly identified in laboratory reports
	Addition	Bacteroides fragilis	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms commonly identified in laboratory reports
Pseudomonas or Burkholderia cepacia	Replacement	Burkholderia cepacia	The old name of Pseudomonas cepacia was dropped in 1992, so this entry is to simplify to minimize incorrect selections
Citrobacter (freundii, other species)	Replacement	Citrobacter (all species, including freundii)	Updated the option text to standardize across the forms

Clostridium difficile	Replacement	Clostridioides difficile (previously Clostridium difficile)	Updated the option due to name change in 2016.
	Addition	Cutibacterium acnes (previously, Propionibacterium acnes)	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms commonly identified in laboratory reports
Lactobacillus (bulgaricus, acidophilus, other species)	Replacement	Lactobacillus (all species, including bulgaricus, acidophilus)	Updated the option text to standardize across the forms
	Addition	Moraxella catarrhalis	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms commonly identified in laboratory reports
	Addition	Rothia (all species)	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms commonly identified in laboratory reports
	Addition	Staphylococcus epidermidis	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms

			commonly identified in laboratory reports
	Addition	Staphylococcus coagulase negative (excluding Staphylococcus epidermidis)	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms commonly identified in laboratory reports
Streptococcus, alpha-hemolytic	Update: retire and add new	Streptococci, viridans group (all species including mitis, anginosus, mutans, salivarius, bovis)	This updated option is matching the most likely way the organism will be reported by the lab, these are frequently reported currently in "other"
	Addition	Streptococcus, Group A (Streptococcus pyogenes)	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms commonly identified in laboratory reports
Streptococcus, Group B	Replacement	Streptococcus, Group B (Streptococcus agalactiae)	The option is updated because labs sometimes report the species in place of the group.
	Addition	Yersinia enterocolitica	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms commonly identified in laboratory reports

Blastomyces (dermatitidis)	Update: retire and add new	Blastomyces (all species, including dermatitidis)	Updated the option text to standardize across the forms
Candida non-albicans	Update: retire and add new entries	Candida auris Candida parapsilosis	Added 2 new individual entries for important candida species in HCT / cellular therapy
		Candida non-albicans (excluding C. parapsilosis and C. auris)	Updated the option to account for the two new entries
Histoplasma (capsulatum)	Update: retire and add new	Histoplasma (all species, including capsulatum)	Updated the option text to standardize across the forms
	Addition	Lomentospora prolificans	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms commonly identified in laboratory reports
Mucorales (all species)	Replacement	Mucorales (all species including Rhizopus, Mucor, Rhizomucor, Absidia, Lichtheimia, Cunninghamella species)	Updated the organisms to list the words that data managers are likely to see in the lab report.
Rhizopus (all species)	Removal		The option is removed because 'Rhizopus' is part of the option " Mucorales"
Zygomycetes, NOS	Removal		This was an old term for "Mucorales", but won't be used by any labs now.
	Addition	Astrovirus	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure

			alignment with clinically relevant organisms commonly identified in laboratory reports
Enterovirus (ECHO, Coxsackie) Enterovirus, NOS	Update: retire and add new	Enterovirus except polioviruses and D68 (including echoviruses and coxsackieviruses)	These options are now grouped together under updated Enterovirus entry
Enterovirus (polio)	Replacement	Polioviruses	This option is a group of species. Most accurate to call it "Polioviruses"
Hepatitis E	Replacement	Hepatitis E virus	Updated the organism to account for virus terminology
	Addition	Parvovirus B19	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms commonly identified in laboratory reports
Rhinovirus (all species)	Update: retire and add new	Rhinovirus (all species except Rhinovirus / enterovirus (not differentiated)	Updated to account for new entry for the non-differentiated group.
		Rhinovirus / enterovirus (not differentiated)	Added option to account for testing that does not differentiate between Rhinovirus and Enterovirus
	Addition	Sapovirus	The organism list is revised in accordance with recommendations from the Infection working committee, to ensure alignment with clinically relevant organisms

			commonly identified in laboratory reports