This is a supplement to the report Forms previously submitted to CIBMTR (formerly IBMTR/ABMTR) and NMDP. Before starting the supplement we suggest pulling the copy of the legacy Disease Insert(s) submitted for the recipient's first HSCT through the time of first relapse post-HSCT and using it for reference. Potential Forms include: 095-MDS, 095-MDSFU, NMDP 120 insert V, 520 insert V, 620 insert V, 130, 530, 630, 140, 540 or 640. This will help identify why questions in the supplemental Form are set up the way they are. Reference to data reported should come from the recipient's medical record to help confirm the data originally reported is accurate.

All questions in this study refer to the period after the recipient's first HSCT. The subjects (recipients) were reported as having a Post-HSCT relapse treated by DCI (e.g., donor lymphocyte infusion). If a DCI was not given to treat relapse Post-HSCT #1, CIBMTR Check here and submit form. NMDP use Error Correction Form and do not complete this Form.

New supplemental data questions are designated by this font. These questions should be answered for MDS HSCT recipients included in this study.

I have reviewed the recipient's medical record and the data previously reported is confirmed accurate. If yes, check here. If no:
- This form also includes questions that appeared on the CIBMTR or NMDP Disease Insert previously submitted by your center. Corrections to CIBMTR data should be made on this Form.
- Corrections to NMDP data should be made on NMDP Error Correction forms and submitted with this Supplemental Form.

See Supplement Form — Sup-R02-09 Manual for additional information to complete this form.

**FORM ABBREVIATION KEY**
CIBMTR Forms 095-MDS
NMDP Forms 120 insert V, 520 insert V, 620 insert V, 130, 530, 630, 140, 540, 640
### Pre-HSCT Details

1. Were cytogenetics tested at diagnosis, before start of treatment? [MDS Q26] [120-V Q26]?

   1. **Yes**
   2. **No**

20. Was genetic testing using FISH performed at diagnosis, before start of treatment?  

   1. **Yes**
   2. **No**

---

**Note:** In order to compare cytogenetic, FISH and/or molecular test results at relapse, confirm data reported on the legacy Report Form "at diagnosis" as well. If corrections to the legacy "at diagnosis" data is needed make 095 Report Form corrections on this Form, send an Error Correction Form for any NMDP Form corrections.

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### Results of cytogenetic testing at diagnosis:

2. Results of cytogenetic testing at diagnosis:

   1. **Yes abnormalities identified**
   2. **No evaluable metaphases**
   3. **No abnormalities**

   Specify abnormalities:

   3. **-5/5q-** {MDS Q29} {120-V Q29a}  
      4. **-7/7q-** {MDS Q30} {120-V Q29b}  
      5. **-20/20q-** {MDS Q31} {120-V Q29c}  
      6. **+8** {MDS Q32} {120-V Q29d}  
      7. **+21** {MDS Q33} {120-V Q29e}  
      8. **Abnormal 3q** {MDS Q34} {120-V Q29f}  
      9. **Abnormal 11q** {MDS Q35} {120-V Q29g}  
     10. **Abnormal 16q** {MDS Q36} {120-V Q29h}  
     11. **t(1;7)** {MDS Q37} {120-V Q29i}  
     12. **t(5;7)** {MDS Q38} {120-V Q29j}  
     13. **t(6;9)** {MDS Q39} {120-V Q29k}  
     14. **t(8;16)** {MDS Q40} {120-V Q29l}  
     15. **t(8;21)** {MDS Q41} {120-V Q29m}  
     16. **t(9;22)** {MDS Q42} {120-V Q29n}  
     17. **t(15;17)** {MDS Q43} {120-V Q29o}  
     18. **Other** {MDS Q44} {120-V Q29p}  

19. Specify: {MDS Q44} {120-V Q29p}

### Results of FISH testing at diagnosis:

21. Results of FISH testing at diagnosis:

   1. **Yes abnormalities identified**
   2. **Not evaluable**
   3. **No abnormalities**

   Specify abnormalities:

   22. **-5/5q-**  
   23. **-7/7q-**  
   24. **-20/20q-**  
   25. **+8**  
   26. **+21**  
   27. **Abnormal 3q**  
   28. **Abnormal 11q**  
   29. **Abnormal 16q**  
   30. **t(1;7)**  
   31. **t(5;7)**

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CIBMTR Team: [ ] [ ] [ ]
CIBMTR IUBMID: [ ] [ ] [ ] [ ] [ ] [ ]
Recipient NMDP ID: [ ] [ ] [ ] [ ] [ ]
Institutional unique blood or marrow transplant ID number

32. t(6;9) 1 □ yes 2 □ no 3 □ unknown
33. t(8;16) 1 □ yes 2 □ no 3 □ unknown
34. t(8;21) 1 □ yes 2 □ no 3 □ unknown
35. t(9;22) 1 □ yes 2 □ no 3 □ unknown
36. t(15;17) 1 □ yes 2 □ no 3 □ unknown
37. Other abnormality 1 □ yes 2 □ no 3 □ unknown
38. Specify other abnormality: _______________________
39. Were tests (e.g., PCR) for molecular markers done at any time prior to conditioning?

Note: In order to compare cytogenetic, FISH and/or molecular test results at relapse, confirm data reported on the legacy Report Form "at diagnosis" as well. If corrections to the legacy "at any time prior to conditioning" data is needed make 095 Report Form corrections on this Form, send an Error Correction Form for any NMDP Form corrections.

1 □ yes 2 □ no

Specify marker tested: Specify molecular marker result:

40. FLT3 - ITD
   1 □ yes 2 □ no
   41. 1 □ positive 2 □ negative 3 □ unknown

42. FLT3 - TKD / other (non-ITD)
   1 □ yes 2 □ no
   43. 1 □ positive 2 □ negative 3 □ unknown

44. t(1;19) E2A / PBX1
   1 □ yes 2 □ no
   45. 1 □ positive 2 □ negative 3 □ unknown

46. t(12;21) TEL / AML1
   1 □ yes 2 □ no
   47. 1 □ positive 2 □ negative 3 □ unknown

48. t(4;11) MLL / AF4
   1 □ yes 2 □ no
   49. 1 □ positive 2 □ negative 3 □ unknown

52. t(15;17) PML / RARa
   1 □ yes 2 □ no
   51. 1 □ positive 2 □ negative 3 □ unknown

52. t(8;21) AML1 / ETO
   1 □ yes 2 □ no
   53. 1 □ positive 2 □ negative 3 □ unknown

54. inv(16) CBFB / MYH11
   1 □ yes 2 □ no
   55. 1 □ positive 2 □ negative 3 □ unknown
Post-HSCT Details

56. Did the disease (MDS) relapse post-HSCT #1?
   1  yes
   2  no

57. Most recent post-transplant disease status (MDS Q106) {130 Q98} {refers to relapse post-HSCT #1}:
   1  relapse
   2  complete remission after post-transplant relapse

58. Date of relapse {MDS Q107} {130 Q99}:

59. Date of relapse {MDS Q108} {130 Q99}:

60. Treatment given {MDS Q109}:
   Complete questions 78–97

61. Date of remission {MDS Q110}:

62. Bone marrow {130 Q100a}
   1  yes
   2  no

63. Blasts in marrow {MDS Q115}:

64. CNS {130 Q100b}
   1  yes
   2  no

65. Other site {130 Q100d}
   1  yes
   2  no

66. Skin
   1  yes
   2  no

67. Other, specify {130 Q100d}:

68. Was flow cytometry tested for blasts?
   1  yes
   2  no

69. Results?
   1  positive
   2  negative

70. Blasts in bone marrow by flow:

71. Blasts in peripheral blood by flow:

72. Were cytogenetics tested at the time of relapse post-HSCT #1?
   1  yes
   2  no

73. Results of cytogenetic testing at relapse post-HSCT #1:
   1  yes abnormalities identified, same as at diagnosis
   2  yes abnormalities identified, different from those at diagnosis
   3  no evaluable metaphases
   4  no abnormalities
74. Was genetic testing using FISH performed at the time of relapse post-HSCT#1?

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<th>yes</th>
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75. Results of FISH testing at relapse post-HSCT#1:

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<tr>
<th></th>
<th>yes abnormalities identified, same as at diagnosis</th>
<th>yes abnormalities identified, different from those at diagnosis</th>
<th>not evaluable</th>
<th>no abnormalities</th>
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76. Were tests for molecular markers done at the time of relapse post-HSCT#1?

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77. Results of molecular testing at relapse post-HSCT#1:

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<th>yes abnormalities identified, different from those at diagnosis</th>
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78. Was therapy given after this post-transplant relapse (but before DCI/DLI) {MDS Q109} {130 Q101}?

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Specify treatment(s) given:

79. Chemotherapy {MDS Q109} {130 Q102b}

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80. Chemotherapy (e.g., 3+7 anthracycline-cytarabine (araC); high dose araC; mitoxantrone / etoposide; mitoxantrone / etoposide / araC (MEC); fludarabine / araC / GCSF (FLAG); hyperCVAD)

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81. Hypomethylating agents (e.g., azacitidine, decitabine; includes clinical trials / study drugs)

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82. Tyrosine kinase inhibitors (e.g., imatinib, dasatinib, nilotinib; includes clinical trials / study drugs)

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83. Other regimen

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84. Specify:

85. Donor leukocytes {MDS Q109} {130 Q102e}

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86. Growth factors {MDS Q109} {130 Q102g}

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87. Specify: {MDS Q109} {130 Q102g}

88. Immunotoxins {MDS Q109} {130 Q102d}

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89. Gemtuzumab

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90. Interferon alpha {MDS Q109} {130 Q102a}
   1 ☐ yes
   2 ☐ no

91. Interferon gamma {MDS Q109}
   1 ☐ yes
   2 ☐ no

92. Second HSCT {MDS Q109} {130 Q102f}
   1 ☐ yes
   2 ☐ no

93. Specify second HSCT type:
   1 ☐ allogeneic
   2 ☐ autologous

94. Withdrawal of immune supression {MDS Q109} {130 Q102c}
   1 ☐ yes
   2 ☐ no

95. Other {MDS Q109} {130 Q102h}
   1 ☐ yes
   2 ☐ no

96. Specify: {MDS Q109} {130 Q102h}

97. Was complete remission achieved before the DCI / DLI?
   1 ☐ yes
   2 ☐ no
   3 ☐ unknown

Note: Legacy Report Forms included DLI {MDS Q109} {130 Q102e} and second HSCT {MDS Q109} {130 Q102f} as post-HSCT therapy; however, for this study cut off the response to treatment prior to either of those therapies. Only answer 'complete remission achieved – yes' if it was attained without DLI or second HSCT prior to the DLI.

---

Pre-DCI Information

Hematologic Findings Just Prior to DCI Infusion:

{MDS Qs. 96-104} are from the disease insert associated with the DLI infusion.

98. WBC {MDS Q96}: ☐ ☐ ☐ x 10^9/L (or 10^9/mm^3)

99. Blasts in blood {MDS Q99}: (by morphology NOT flow) ☐ ☐ ☐ %

100. Cellularity {MDS Q101}:
   1 ☐ decreased
   2 ☐ normal
   3 ☐ increased
   4 ☐ unknown

101. Fibrosis {MDS Q102}:
   1 ☐ decreased
   2 ☐ normal
   3 ☐ increased
   4 ☐ unknown
102. Blasts in bone marrow {MDS Q103}: (by morphology NOT flow) [ ] %

103. Was extramedullary leukemia present just prior to DCI infusion?

- [ ] yes
- [ ] no
- [ ] unknown

Specify site:

104. Central nervous system

- [ ] yes
- [ ] no

105. Skin

- [ ] yes
- [ ] no

106. Other site

- [ ] yes
- [ ] no

107. Specify: 

108. Did the recipient have systemic symptoms (fever, sweats, weight loss > 10%) just prior to (conditioning) DCI {MDS Q91}?

- [ ] yes
- [ ] no
- [ ] unknown

109. Indication for (bone marrow transplant) DCI {MDS Q104}:

- [ ] bone marrow failure (anemia, thrombocytopenia, neutropenia)
- [ ] early evidence of progression to leukemia (increasing percentage of blasts of RAEB-T)
- [ ] to induce complete remission (prior to bone marrow failure or evolution)
- [ ] other

110. Specify:

- [ ] CR
- [ ] RCU / RA (refractory cytopenias with unilineage dysplasia / refractory anemia)
- [ ] RARS (refractory anemia with ringed sideroblasts)
- [ ] RCMD (refractory cytopenias with multilineage dysplasia)
- [ ] RAEB (refractory anemia with excess blasts)
- [ ] AML
- [ ] other

111. Specify: 

112. Disease status of MDS immediately prior to DLI:

- [ ] primary induction failure
- [ ] complete remission
- [ ] 1st relapse
- [ ] > 2nd relapse
- [ ] unknown

If recipient not in CR at the time of DLI:

113. [ ] yes  [ ] no  [ ] unknown Disease present by blood and/or bone marrow (morphology)

114. [ ] yes  [ ] no  [ ] unknown Disease present by flow cytometry

115. [ ] yes  [ ] no  [ ] unknown Disease present by cytogenetics / FISH

116. [ ] yes  [ ] no  [ ] unknown Disease present by molecular / PCR

117. Date this disease state was first achieved: ___ / ___ / ___

This represents the last disease status after the first relapse and just before the DCI / DLI.
DCI Information

These data are from the Graft Insert for the DCI-RF (DCIG). If a DCIG was completed, make corrections if needed, and answer the supplemental Qs 138 (if applicable) and 235–244. If no DCIG, answer all questions. NMDP answer all questions.

Source of DCI:

118. Collected at time of PBSC mobilization and collection (002-DCIG Q15)
   1 □ yes
   2 □ no

119. Negative fraction of CD34 selected PBSC (002-DCIG Q16)
   1 □ yes
   2 □ no

120. Negative fraction of CD34 selected BM (002-DCIG Q17)
   1 □ yes
   2 □ no

121. Apheresis at a different time than collection of PBSC used for allogeneic transplant (002-DCIG Q18)
   1 □ yes
   2 □ no

122. Isolated from a unit(s) of whole blood (002-DCIG Q19)
   1 □ yes
   2 □ no

123. Specify number of units (002-DCIG Q20):

124. Did donor receive treatment prior to donation to enhance cell collection (002-DCIG Q35)?
   1 □ yes
   2 □ no
   3 □ unknown

125. Growth factors (002-DCIG Q36)
   1 □ yes
   2 □ no
   3 □ unknown

126. G-CSF (002-DCIG Q37)
   1 □ yes
   2 □ no
   3 □ unknown

127. GM-CSF (002-DCIG Q38)
   1 □ yes
   2 □ no
   3 □ unknown

128. Other growth factors (002-DCIG Q39)
   1 □ yes
   2 □ no
   3 □ unknown

129. Specify (002-DCIG Q40):

130. Other treatment (002-DCIG Q41)
   1 □ yes
   2 □ no
   3 □ unknown

131. Specify (002-DCIG Q41):

132. Were the cells cryopreserved (002-DCIG Q43)?
   1 □ yes
   2 □ no

133. Specify portion cryopreserved:
   1 □ all (002-DCIG Q44)
   2 □ some (002-DCIG Q44)
134. Were any DCls reported on this Graft Insert manipulated (002-DCIG Q48)?

**Note:** only report on the product infused, not on product saved.

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<tr>
<th>Question</th>
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<th>No</th>
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<tr>
<td>135. Specify portion manipulated:</td>
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<tr>
<td>1. all (002-DCIG Q49)</td>
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<tr>
<td>2. some (002-DCIG Q49)</td>
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<td>3. unknown</td>
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Specify all methods used to manipulate DCls reported on this Graft Insert:

136. Dextran-albumin wash (002-DCIG Q50)

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<th>Questions</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>138. Method:</td>
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137. Genetic manipulation (gene transfer / transduction) (002-DCIG Q51)

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<td>139. CD34+ selection (002-DCIG Q52)</td>
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139. CD34+ selection (002-DCIG Q52)

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<td>140. Method (002-DCIG Q53):</td>
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<td>141. Manufacturer (002-DCIG Q54):</td>
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142. T-cell depletion (002-DCIG Q55)

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Specify method(s) of T-depletion:

143. Antibody + complement (002-DCIG Q56)

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144. Antibody + toxin (002-DCIG Q57)

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145. Antibody affinity column (002-DCIG Q58)

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146. Soybean lectin only (002-DCIG Q59)

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147. Sheep red blood cell rosetting only (002-DCIG Q60)

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148. Soybean lectin and sheep red blood cell rosetting (002-DCIG Q61)

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Also complete questions 157–175
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<th>Question</th>
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<tbody>
<tr>
<td>154. Specify other method(s) of T-depletion {002-DCIG Q67}</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>155. Other manipulation {002-DCIG Q68}</td>
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<tr>
<td>156. Specify {002-DCIG Q69}:</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>157. Were antibodies used during graft manipulation {002-DCIG Q70}?</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Method(s) of T-depletion:

149. Elutriation {002-DCIG Q62}
1. Yes
2. No
3. Unknown

150. Immunomagnetic beads {002-DCIG Q63}
1. Yes
2. No
3. Unknown

151. Antibody coated plates {002-DCIG Q64}
1. Yes
2. No
3. Unknown

152. Soybean lectin and antibody coated plates {002-DCIG Q65}
1. Yes
2. No
3. Unknown

153. Other {002-DCIG Q66}
1. Yes
2. No
3. Unknown

Also complete questions 157–175

158. Anti CD2 {002-DCIG Q71}
1. Yes
2. No
3. Unknown

159. Anti CD4 depleted {002-DCIG Q73}
1. Yes
2. No
3. Unknown

160. Anti CD5 {002-DCIG Q74}
1. Yes
2. No
3. Unknown

161. Anti CD6 {002-DCIG Q75}
1. Yes
2. No
3. Unknown

162. Anti CD7 {002-DCIG Q76}
1. Yes
2. No
3. Unknown
163. Anti CD8 depleted {002-DCIG Q77}
   1 yes
   2 no
   3 unknown

164. Anti CD34 {002-DCIG Q78}
   1 yes
   2 no
   3 unknown

165. Anti TCR alpha/beta (T10-B9) {002-DCIG Q78.2}
   1 yes
   2 no
   3 unknown

166. OKT-3 {002-DCIG Q78.3}
   1 yes
   2 no
   3 unknown

167. Other CD3 {002-DCIG Q78.4}
   1 yes
   2 no
   3 unknown

168. Specify {002-DCIG Q78.5}:

169. Anti CD52 {002-DCIG Q78.6}
   1 yes
   2 no
   3 unknown

170. Campath-NOS {002-DCIG Q78.7}
   1 yes
   2 no
   3 unknown

171. Campath-1M {002-DCIG Q78.8}
   1 yes
   2 no
   3 unknown

172. Campath-1G {002-DCIG Q78.9}
   1 yes
   2 no
   3 unknown

173. Campath-1H {002-DCIG Q78.10}
   1 yes
   2 no
   3 unknown

174. Other {002-DCIG Q79}
   1 yes
   2 no
   3 unknown

175. Specify {002-DCIG Q80}:
176. Recipient actual weight (002-DCI Q31): 

177. Consecutive number of infusions within 28 days of first (002-DCIG Q151):

178. Date of first infusion (002-DCIG Q152):

Provide total numbers of cells after processing. Do not report numbers of cells per kg. If cells were cryopreserved, give totals after processing, but before cyropreservation.

<table>
<thead>
<tr>
<th>Cell Type</th>
<th>Number</th>
<th>Exponent</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nucleated cells (002-DCIG Q153)</td>
<td>179</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CD34+ cells (002-DCIG Q155)</td>
<td>181</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Megakaryocytic cells (002-DCIG Q157)</td>
<td>183</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CD3+ cells (002-DCIG Q159)</td>
<td>185</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CD4+ cells (002-DCIG Q161)</td>
<td>187</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CD8+ cells (002-DCIG Q163)</td>
<td>189</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NK cells (002-DCIG Q165)</td>
<td>191</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Promyelocytes (002-DCIG Q167)</td>
<td>193</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Metamyelocytes (002-DCIG Q169)</td>
<td>195</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Myelocytes (002-DCIG Q171)</td>
<td>197</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Granulocytes (002-DCIG Q173)</td>
<td>199</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monocytes (002-DCIG Q175)</td>
<td>201</td>
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<tr>
<td>Other cells (002-DCIG Q177)</td>
<td>203</td>
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</tr>
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</table>

205. Specify other cells (002-DCIG Q179):

206. Date of second infusion (002-DCIG Q181):

<table>
<thead>
<tr>
<th>Cell Type</th>
<th>Number</th>
<th>Exponent</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nucleated cells (002-DCIG Q182)</td>
<td>207</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CD34+ cells (002-DCIG Q184)</td>
<td>209</td>
<td></td>
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<tr>
<td>Megakaryocytic cells (002-DCIG Q186)</td>
<td>211</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cell Type</td>
<td>Number</td>
<td>Exponent</td>
<td>Percentage</td>
</tr>
<tr>
<td>---------------------------</td>
<td>--------</td>
<td>----------</td>
<td>------------</td>
</tr>
<tr>
<td>CD3+ cells (002-DCIG Q188)</td>
<td>213</td>
<td>10</td>
<td>214%</td>
</tr>
<tr>
<td>CD4+ cells (002-DCIG Q190)</td>
<td>215</td>
<td>10</td>
<td>216%</td>
</tr>
<tr>
<td>CD8+ cells (002-DCIG Q192)</td>
<td>217</td>
<td>10</td>
<td>218%</td>
</tr>
<tr>
<td>NK cells (002-DCIG Q194)</td>
<td>219</td>
<td>10</td>
<td>220%</td>
</tr>
<tr>
<td>Promyelocytes (002-DCIG Q196)</td>
<td>221</td>
<td>10</td>
<td>222%</td>
</tr>
<tr>
<td>Metamyelocytes (002-DCIG Q198)</td>
<td>223</td>
<td>10</td>
<td>224%</td>
</tr>
<tr>
<td>Myelocytes (002-DCIG Q200)</td>
<td>225</td>
<td>10</td>
<td>226%</td>
</tr>
<tr>
<td>Granulocytes (002-DCIG Q202)</td>
<td>227</td>
<td>10</td>
<td>228%</td>
</tr>
<tr>
<td>Monocytes (002-DCIG Q204)</td>
<td>229</td>
<td>10</td>
<td>230%</td>
</tr>
<tr>
<td>Other cells (002-DCIG Q206)</td>
<td>231</td>
<td>10</td>
<td>232%</td>
</tr>
</tbody>
</table>

233. Specify other cells (002-DCIG Q208): _______________________________________________________________________

234. Were more than 2 DCIs given within a 4-week period (002-DCI Q180)?
   1. Yes
   2. No
   If more than 2 DCIs were given, copy questions 178–205 and provide additional infusion data

235. Was > 1 DCI infusion given?
   1. Yes
   2. No

Specify reason(s) for additional DCI infusion:

236. Planned protocol for multiple doses
   1. Yes
   2. No

237. No response to 1st infusion and no GVHD
   1. Yes
   2. No

238. Other reason
   1. Yes
   2. No

239. Specify other reason: _______________________________________________________________________

240. Reason unknown
   1. Yes
   2. No

241. Was a subsequent DCI given > 28 days from the date of the first DCI (see question 178)?
   1. Yes
   2. No

242. Specify date of subsequent DCI:

   Month   Day   Year
243. Was a subsequent HSCT given after the date of the first DCI (see question 178)?
1  yes
2  no

244. Specify date of subsequent HSCT:
Month  Day  Year

"Post-DCI" Information

{MDS Qs. 106-115} are from the disease insert associated with the DLI infusion. After the DCI/DLI(s) if the recipient achieved remission but relapsed again, tick option #3 and report the date of subsequent relapse in Q246. If remission was never achieved from the DCI/DLI(s), tick option #2. This includes transformation from MDS to AML post-DCI/DLI.

245. Most recent post-transplant disease status (MDS Q.106) {130 Q98}:
1  in continuous complete remission (CR) post DCI / DLI
2  persistent disease
3  relapse
4  complete remission (CR) after (post-transplant) post DCI / DLI relapse

246. Date of relapse (MDS Q.107) {130 Q99}:
Month  Day  Year

Site of recurrent MDS:
247. Bone marrow {130 Q100a}
1  yes
2  no
248. CNS {130 Q100b}
1  yes
2  no
249. Skin
1  yes
2  no
250. Other site {130 Q100d}
1  yes
2  no

251. Specify other site of recurrent MDS {130 Q100d}:

252. Most recent (post-transplant) DCI / DLI bone marrow examination (MDS Q112):
Month  Day  Year

Include copy of bone marrow report

253. Cellularity {MDS Q113}
1  decreased
2  normal
3  increased
4  unknown

254. Blasts in marrow (MDS Q115): (by morphology NOT flow)  %

255. Date of latest assessment for the disease status (see question 245):
Month  Day  Year

256. Signed: ____________________________

Person completing form

Please print name: ____________________________

Phone: ( ) ____________________________ Fax: ( ) ____________________________

E-mail address: ____________________________