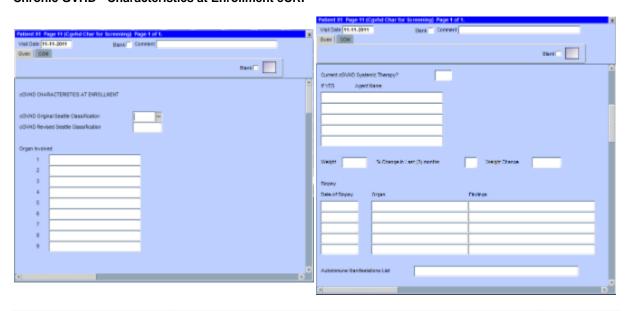
cGVHD - Characteristics at Enrollment

Purpose Chronic GVHD - Characteristics at Enrollment eCRF Validations Derivations

Purpose

Chronic GVHD - Characteristics at Enrollment eCRF



Field Name	Description / Instructions	Format
Visit Date	The Visit Date is required.	DD-MMM-YYYY
cGVHD Original Seattle Classification	EXTENSIVE - Extensive Involvement LIMITED - Limited Involvement	Use pick list
cGVHD Revised Seattle Classification	EXTENSIVE - Extensive Involvement LIMITED - Limited Involvement	Use pick list
Organs Involved	Select up to 9 organs involved from the pick list.	Use pick list
Current cGVHD Systemic Therapy?	• NO • YES	Use pick list
Agent Name	Select up to 5 generic agents from the pick list if currently under systemic cGVHD therapy.	Use pick list
Weight		Number (99.999)
% Change in Last (3) months		Number (99)
Weight Change	GAIN - Weight Gain LOSS - Weight loss STABLE - Stable Weight	Use pick list
Date of Biopsy		DD-MMM-YYYY

Organ	Select the organ from the picklist.	Use pick list
Findings	Enter the biopsy finding results.	200 characters
Autoimmune Manifestations List		200 characters



Validations

Code	Description	Resolutions
	There are no validations.	

Derivations

Code	Field Name	Description
	There are no derivations.	