

Form 2022 R2.0: Testicular/Germ Cell Cancer Pre-HSCT Data

Center:

CRID:

Key Fields	
Registry Use Only	
Sequence Number: _____	
Date Received: ____-____-____	
CIBMTR Center Number: _____	
CIBMTR Recipient ID: _____	
Today's Date: ____-____-____	
Date of HSCT for which this form is being completed: ____-____-____	
HSCT type (check all that apply):	
<input type="checkbox"/>	Autologous
<input type="checkbox"/>	Allogeneic, unrelated
<input type="checkbox"/>	Allogeneic, related
<input type="checkbox"/>	Syngeneic (identical twin)
Product type (check all that apply):	
<input type="checkbox"/>	Marrow
<input type="checkbox"/>	PBSC
<input type="checkbox"/>	Cord blood
<input type="checkbox"/>	Other product
Specify: _____	
<input type="checkbox"/>	If this is a report of a second or subsequent transplant, check here and continue with question 117.
Disease Assessment at Diagnosis	
Questions: 1 - 34	
1 What was the date of pathologic diagnosis of Testicular Cancer? ____-____-____	
Specify the origin of the primary tumor at diagnosis:	
2 Testicular primary	
<input type="checkbox"/>	yes
<input type="checkbox"/>	no
3 Extra-gonadal germ cell tumor	
<input type="checkbox"/>	yes
<input type="checkbox"/>	no
Specify site(s) of extra-gonadal germ cell tumor:	
4 Abdominal nodes	
<input type="checkbox"/>	yes
<input type="checkbox"/>	no
5 Bone	
<input type="checkbox"/>	yes
<input type="checkbox"/>	no
6 Central nervous system (CNS)	
<input type="checkbox"/>	yes
<input type="checkbox"/>	no
7 Liver	
<input type="checkbox"/>	yes
<input type="checkbox"/>	no
8 Lung, parenchymal	
<input type="checkbox"/>	yes
<input type="checkbox"/>	no
9 Mediastinum	
<input type="checkbox"/>	yes
<input type="checkbox"/>	no

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## 10 Testis

☐ yes ☐ no

## 11 Other site:

☐ yes ☐ no

## 12 Specify tumor site: \_\_\_\_\_

### Specify the testicular cancer histology at diagnosis:

## 13 Choriocarcinoma

☐ yes ☐ no

## 14 Embryonal carcinoma

☐ yes ☐ no

## 15 Mixed non-seminoma

☐ yes ☐ no

## 16 Seminoma

☐ yes ☐ no

## 17 Teratoma

☐ yes ☐ no

## 18 Yolk sac

☐ yes ☐ no

## 19 Other histology

☐ yes ☐ no

## 20 Specify histology: \_\_\_\_\_

### Specify the tumor mass classification at diagnosis:

## 21 Seminoma (must have normal levels of alpha-fetoprotein (AFP))

☐ yes ☐ no

## 22 Specify prognosis:

☐ good prognosis - no nonpulmonary visceral metastasis

☐ intermediate prognosis

## 23 Non-seminoma

☐ yes ☐ no

## 24 Specify prognosis:

☐ good prognosis - requires all of the following: • AFP < 1,000 ng/ml, HCG < 5,000 IU/L, and LDH < 1.5x upper limit of normal • nonmediastinal primary mass • no nonpulmonary visceral metastasis

☐ intermediate prognosis - requires all of the following: • AFP= 1,000-10,000 ng/mL, HCG = 5,000-50,000 IU/L, or LDH = 1.5-10x upper limit of normal • nonmediastinal primary site • no nonpulmonary visceral metastasis

☐ poor prognosis - any of the following: • AFP > 10,000 ng/mL, HGC > 50,000 IU/L, or LDH >10x upper limit of normal • mediastinal primary site • nonpulmonary visceral metastasis present

## 25 Were extra-gonadal metastases present at diagnosis?

☐ yes ☐ no ☐ Unknown

### Specify site(s) of extra-gonadal metastases present at diagnosis:

## 26 Central nervous system

☐ yes ☐ no

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27 Liver

☐ yes ☐ no

28 Lung, parenchymal

☐ yes ☐ no

29 Lymph nodes, distant

☐ yes ☐ no

30 Lymph nodes, retroperitoneal

☐ yes ☐ no

31 Pleura

☐ yes ☐ no

32 Skin

☐ yes ☐ no

33 Other site:

☐ yes ☐ no

34 Specify site: \_\_\_\_\_

## Laboratory Studies at Diagnosis

Questions: 35 - 43

Specify the following tumor markers present prior to any first treatment for testicular cancer.

35 Serum alpha-fetoprotein (AFP):

☐ Known ☐ Not known

36 \_\_\_\_\_ ng/mL

37 Serum beta-human chorionic gonadotropin (βhCG):

☐ Known ☐ Not known

38 \_\_\_\_\_ IU/L

39 LDH:

☐ Known ☐ Not known

40 \_\_\_\_\_  
☐ U/L ☐ μkat/L

41 Other tumor marker?

☐ yes ☐ no

42 Specify other tumor marker: \_\_\_\_\_

43 Specify value: \_\_\_\_\_

## Pre-HSCT Treatment for Testicular Cancer

Questions: 44 - 116

44 Did the recipient undergo surgery as part of the initial disease management plan?

☐ yes ☐ no ☐ Unknown

Specify surgery type(s) performed:

45 Biopsy only (not debulking)

☐ yes ☐ no

46 Debulking

☐ yes ☐ no

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Center:

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47 Orchiectomy only

☐ yes ☐ no

48 Removal of extra-abdominal metastatic lesion

☐ yes ☐ no

49 Unilateral retroperitoneal lymph node dissection and orchiectomy

☐ yes ☐ no

50 Other surgery

☐ yes ☐ no

51 Specify surgery: \_\_\_\_\_

**Specify the following tumor markers determined after surgery was performed:**

52 Serum alpha-fetoprotein (AFP):

☐ Known ☐ Not known

53 \_\_\_\_\_ ng/mL

54 Serum beta-human chorionic gonadotropin (βhCG):

☐ Known ☐ Not known

55 \_\_\_\_\_ IU/L

56 LDH:

☐ Known ☐ Not known

57 \_\_\_\_\_

☐ U/L ☐ μkat/L

58 Other tumor marker?

☐ yes ☐ no

59 Specify tumor marker: \_\_\_\_\_

60 Specify value: \_\_\_\_\_

61 Was tumor staging performed?

☐ yes ☐ no

62 Specify the testicular cancer stage:

☐ stage I - cancer remains localized to the testis

☐ stage II - cancer involved the testis and metastasis to retroperitoneal / paraaortic lymph nodes

☐ stage III - the cancer involves the testis and metastasus beyond the retroperitoneal and paraaortic lymph nodes

63 Is a copy of the pathology report attached?

☐ yes ☐ no

64 Was therapy given between diagnosis and the start of the preparative regimen? (Include surgery other than the initial surgery and/or neo-adjuvant and adjuvant therapy.)

☐ yes ☐ no

**Line of Therapy (1)**

**Questions: 65 - 116**

65 **Systemic Therapy:**

☐ yes ☐ no

66 Date therapy started: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

67 Date therapy stopped: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

68 Number of cycles \_\_\_\_\_ ☐ Unknown/not applicable

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**69** Was therapy given prior to any surgery (neoadjuvant)?

☐ yes ☐ no

**70** aldesleukin (interleukin-2)

☐ yes ☐ no

**71** altretamine (Hexalen)

☐ yes ☐ no

**72** bleomycin (BLM, Blenoxane)

☐ yes ☐ no

**73** carboplatin (Paraplatin)

☐ yes ☐ no

**74** cisplatin (CDDP, Platinol)

☐ yes ☐ no

**75** cyclophosphamide (CTX)

☐ yes ☐ no

**76** dactinomycin (Cosmegen)

☐ yes ☐ no

**77** Doxorubicin (Adriamycin)

☐ yes ☐ no

**78** Doxorubicin liposomal (Doxil)

☐ yes ☐ no

**79** Etoposide (VP-16, VePesid)

☐ yes ☐ no

**80** Gemcitabine (Gemzar)

☐ yes ☐ no

**81** Ifosfamide (Ifex)

☐ yes ☐ no

**82** Mitoxantrone (Novantrone)

☐ yes ☐ no

**83** methotrexate (MTX, Folex)

☐ yes ☐ no

**84** paclitaxel (Taxol)

☐ yes ☐ no

**85** thiotepa (Thioplex)

☐ yes ☐ no

**86** vinblastine (Velban, VLB)

☐ yes ☐ no

**87** other therapy

☐ yes ☐ no

**88** Specify other therapy: \_\_\_\_\_

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Center:

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## 89 Radiation Therapy:

☐ yes ☐ no

90 Date therapy started: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

91 Date therapy stopped: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

92 Local / regional

☐ yes ☐ no

93 Specify total dose: \_\_\_\_\_ cGy (rads)

94 Other radiotherapy site

☐ yes ☐ no

95 Specify other radiation site: \_\_\_\_\_

96 Specify total dose: \_\_\_\_\_ cGy (rads)

97 Fractionation schedule:

☐ single ☐ single daily ☐ multiple daily ☐ other schedule

## 98 Surgery (other than initial):

☐ yes ☐ no

99 Date of surgery: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

100 Tye of surgery: \_\_\_\_\_

101 Specify other surgery type: \_\_\_\_\_

102 Was this line of therapy given for stem cell priming?

☐ yes ☐ no

## 103 Best Response to Line of Therapy:

☐ CCR Continued complete response - continued absence of all disease after a complete response

☐ CR Complete response - absence of clinically detectable disease including normal HCG and AFP and normalization of previously abnormal radiographic studies for at lease one month

☐ PR Partial response - >=50% reduction in the sum of the perpendicular diameters of measureable lessions for >= 1 month and/or >= 50% reduction in tumor markers

☐ SD Stable disease - tumor regression not fulfilling the requirement for partial response or tumor progression < 25% increase in the bidimensionally measurable tumor parameters

☐ NR No response - < 50% reduction in disease or tumor markers

☐ PD Progressive disease - new lesions that prove to be viable cancer and/or rise in the pretreatment tumor markers and/or > 25% increase in measurable lesions that are related to progressive viable cancer

☐ ME Markers elevated - no measurable disease, but tumor markers elevated

☐ NETD Not evaluable, toxic death

☐ NA Not assessed

104 Specify reason: \_\_\_\_\_

105 Date response evaluated: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

106 Did patient relapse/progress following this line of therapy?

☐ yes ☐ no

107 Date of relapse/progression: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Site(s) of relapse:

108 central nervous system

☐ yes ☐ no

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109 Liver

☐ yes ☐ no

110 lung, parenchymal

☐ yes ☐ no

111 lymph nodes, distant

☐ yes ☐ no

112 lymph nodes, retroperitoneal

☐ yes ☐ no

113 pleura

☐ yes ☐ no

114 Skin

☐ yes ☐ no

115 other site of relapse

☐ yes ☐ no

116 specify other site of relapse \_\_\_\_\_

## Most Recent Disease Assessment Prior to the Start of the Preparative Regimen

Questions: 117 - 140

117 Indicate the sensitivity of the testicular carcinoma to any chemotherapeutic agent administered prior to the preparative regimen: *(Response to last chemotherapy given prior to HSCT; chemotherapy must include  $\geq 2$  cycles of treatment given  $\leq 6$  months prior to HSCT.)*

☐ sensitive-  $\geq 50\%$  reduction in bidimensional diameter of all disease sites with no new sites of disease; and  $\geq 50\%$  decrease in tumor markers, if evaluated

☐ resistant-  $<50\%$  reduction in disease or tumor marker evaluation with chemotherapy within 6 months of HSCT

☐ untreated- includes chemotherapy given more than 6 months prior to HSCT, or fewer than 2 treatment cycles

☐ Unknown

118 Indicate the sensitivity of the testicular carcinoma to any platinum-containing chemotherapeutic agent administered prior to the preparative regimen: *(Response to last platinum therapy given prior to HSCT; therapy must include  $\geq 2$  cycles of treatment given  $\leq 6$  months prior to HSCT.)*

☐ sensitive - response to platinum with  $\geq 50\%$  reduction in bidimensional diameter of all disease sites with no new sites of disease; and  $> 50\%$  decrease in tumor markers, if elevated *(Note: a non-response to subsequent non-platinum chemotherapy does not affect designation)*

☐ resistant -  $<50\%$  response to platinum therapy in disease and tumor markers, or relapse  $\leq 6$  months after last platinum chemotherapy

☐ untreated

☐ refractory - progression of disease within 4 weeks of last Cisplatin dose

☐ Unknown

Specify the results of any imaging performed for the following disease sites:

Present at any time between diagnosis and HSCT?

119 Abdomen -- CT

☐ yes ☐ no ☐ Unknown

120 Bone -- bone scan

☐ yes ☐ no ☐ Unknown

121 Bone -- CT

☐ yes ☐ no ☐ Unknown

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Center:

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122 Bone -- MRI

☐ yes ☐ no ☐ Unknown

123 Bone -- x-ray

☐ yes ☐ no ☐ Unknown

124 Chest -- CT

☐ yes ☐ no ☐ Unknown

125 Chest -- x-ray

☐ yes ☐ no ☐ Unknown

126 Head -- CT

☐ yes ☐ no ☐ Unknown

127 Head -- MRI

☐ yes ☐ no ☐ Unknown

128 Pelvis -- CT

☐ yes ☐ no ☐ Unknown

129 PET scan

☐ yes ☐ no ☐ Unknown

Specify the results of any imaging performed for the following disease sites:

Present immediately prior to the start of the preparative regimen?

130 Abdomen -- CT

☐ yes ☐ no ☐ Unknown

131 Bone -- bone scan

☐ yes ☐ no ☐ Unknown

132 Bone -- CT

☐ yes ☐ no ☐ Unknown

133 Bone -- MRI

☐ yes ☐ no ☐ Unknown

134 Bone -- x-ray

☐ yes ☐ no ☐ Unknown

135 Chest -- CT

☐ yes ☐ no ☐ Unknown

136 Chest -- x-ray

☐ yes ☐ no ☐ Unknown

137 Head -- CT

☐ yes ☐ no ☐ Unknown

138 Head -- MRI

☐ yes ☐ no ☐ Unknown

139 Pelvis -- CT

☐ yes ☐ no ☐ Unknown



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140 PET scan

☐ yes ☐ no ☐ Unknown

Laboratory Studies Prior to the Start of the Preparative Regimen

Questions: 141 - 149

Specify the following tumor markers determined prior to the preparative regimen:

141 Serum alpha-fetoprotein (AFP):

☐ Known ☐ Not known

142 \_\_\_\_\_ ng/mL

143 Serum beta-human chorionic gonadotropin (βhCG):

☐ Known ☐ Not known

144 \_\_\_\_\_ IU/L

145 LDH:

☐ Known ☐ Not known

146 \_\_\_\_\_

☐ U/L ☐ µkat/L

147 Other tumor marker?

☐ yes ☐ no

148 Specify other tumor marker: \_\_\_\_\_

149 Specify value: \_\_\_\_\_

Disease Status at the Last Assessment Prior to the Preparative Regimen

Questions: 150 - 164

150 Central nervous system

☐ yes ☐ no

151 Liver,parenchymal

☐ yes ☐ no

152 Lung

☐ yes ☐ no

153 Lymph nodes, distant

☐ yes ☐ no

154 Lymph nodes, retroperitoneal

☐ yes ☐ no

155 Pelvis

☐ yes ☐ no

156 Pleura

☐ yes ☐ no

157 Tumor markers (AFP, HCG, LDH)

☐ yes ☐ no

158 Other site:

☐ yes ☐ no

159 Specify other new site: \_\_\_\_\_

160 Was a prior HSCT performed for testicular cancer?

☐ yes ☐ no ☐ Unknown

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**161** Is this HSCT a planned tandem HSCT?

☐ yes ☐ no ☐ Unknown

**162** Is this HSCT in response to residual disease?

☐ yes ☐ no ☐ Unknown

**163** What was the disease status at the last evaluation prior to the preparative regimen?

☐ no evidence of disease as defined surgically, tumor markers within normal limits

☐ no evidence of disease as defined clinically, tumor markers within normal limits

☐ tumor marker elevation only

☐ residual tumor mass, tumor markers within normal limits

☐ residual tumor mass, elevated tumor markers

☐ Not evaluable

☐ Unknown

**164** Date of the most recent assessment for disease status prior to the preparative regimen: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail address: \_\_\_\_\_