Basic Information for Genomics Thailand

Participant ID	_____ ([_][_][_][_][_][_])
Text designations that identify gender. Gender is described as the assemblage of properties that distinguish people on the basis of their societal roles. [Explanatory Comment 1: Identification of gender is based upon self-report and may come from a form, questionnaire, interview, etc.]	◯ Female ◯ Male ◯ Unknown ◯ Unspecified/Not reported
Birthday (DD-MM-YYYY)	_____
Date the consent was obtained and participant recruited	_____
Projects involved in Genomics Thailand	☐ Cancer ☐ Rare disease ☐ Pharmacogenomics ☐ NCD ☐ Infectious Diseases
Is this the patient or the relatives?	◯ Yes ◯ No
Relationship to the index case	◯ Uncle/Aunt ◯ Grandparents ◯ Parents ◯ Siblings
For cancer and rare disesae, do the patient have a family history?	◯ No ◯ Yes ◯ None cancer ◯ Not rare disease ◯ Unkonwn
Hospital that recruited the patient	◯ Referred from other hospital ◯ Hospital in the project ◯ Unknown
Health policy used by the patient	◯ Universal Coverage ◯ Social Security ◯ Government Healthcare ◯ Private/Insurance ◯ No coverage
Biospecimens obtained from the patient	☐ Blood ☐ Surgical tissues ☐ Buccal swab ☐ Skin biopsy

Has the patient received any genetic test before	◯ No ◯ Yes but positive result not related to the current disesae ◯ Yes but got negative result ◯ Yes with positive result for the current condition
For rare disease, do you know the diagnosis of your condition?	◯ No ◯ Yes ◯ Not related to the current condition
How many years have you been given the diagnosis (rounding months up to the nearest year)	_____
Treatment status of the patient	◯ Never receive treatment ◯ Complete treatment ◯ Targeted treatment specific to the disease ◯ Paliative care ◯ Treatment is not applicable
Choose the organ with disease manifestation	☐ Brain ☐ Eyes ☐ Head and neck ☐ Lungs or respiratory track ☐ Esophagus ☐ Stomach ☐ Small intestine ☐ Large bowel and anus ☐ Liver and bile ducts ☐ Pancreas ☐ Uterus or Prostate ☐ Ovary or Testis ☐ Other internal reproductive organ ☐ Other exteral reproductive organ ☐ Kidney ☐ Urinary track ☐ Breast ☐ Heart muscle ☐ Heart valve ☐ Cardiac conduction system ☐ Arterial disease ☐ Venous system ☐ Lymphatic vessels ☐ Lymph node ☐ Connective tissue ☐ Red Blood Cells ☐ White Blood Cells ☐ Platelets ☐ Bone marrow ☐ Skeletal muscles ☐ Bone and joint ☐ Immune system ☐ Peripheral nervous system ☐ Spinal cord ☐ Vertebrae ☐ Ears/Hearing ☐ Skin

Germline Testing Indication

Cancer Type	◯ Breast cancer ◯ CA Ovary OR Pancreatic Cancer ◯ Metastatic Prostate Cancer ◯ Adenomatous Polyps > 10 or Harmatoma > 2 ◯ Colon cancer or endometrial cancer ◯ Multiple cancers or hereditary cancer syndromes ◯ Pediatric cancer (< 18 y-o) ◯ Rare cancer
Detail of multiple cancers or hereditary cancer syndrome	_____
Detail of pediatric cancer or rare cancer	_____

Breast Cancer

Age with the first breast cancer	_____
Male breast cancer	◯ Yes ◯ No
The patient has a triple-negative breast cancer	◯ Yes ◯ No
Indication for testing in a female patient with breast cancer before the age of 50	☐ Second primary breast cancer ☐ History of breast cancer in first-degree relatives ☐ History of pancreatic cancer in first- or second-degree relatives.
Additional criteria for breast cancer germline testing	☐ At least 2 first-degree relatives with breast cancer, pancreatic cancer, or prostate cancer ☐ At least 1 first-degree relatives with breast cancer before 50-year-old. ☐ History of "SARCOMA" ☐ History of OTHER cancers before 45-year-old ☐ History of adrenocortical cancer, glioma, or choroid plexus cancer ☐ At least 1 first/second-degree relatives with cancer before 45-year-old

Colon Cancer or Endometrial Cancer

Additional criteria for germline testing for colon cancer or endometrial cancer	☐ Colon cancer or endometrial cancer before 50-year-old ☐ History of synchronous/metachronous colon/endometrial cancer ☐ At least 1 first-degree relative with colon/endometrial cancer before 50-year-old ☐ Abnormal MMR protein or MSI-H in cancer tissue

Minimal Cancer Registry Information

ICD-10

International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD-10)-WHO Version for ;2016
https://icd.who.int/browse10/2016/en#/II

_____

Vital Status

The survival state of the person registered on the protocol.

- ◯ Alive
- ◯ Dead
- ◯ Unknown
- ◯ Not Reported

Death Date (DD-MM-YYYY AD)

_____

Cause of Death

Text term to identify the cause of death for a patient.

- ◯ Cancer Related
- ◯ Cardiovascular Disorder, NOS
- ◯ End-stage Renal Disease
- ◯ Infection
- ◯ Not Cancer Related
- ◯ Renal Disorder, NOS
- ◯ Spinal Muscular Atrophy
- ◯ Surgical Complications
- ◯ Toxicity
- ◯ Not Reported
- ◯ Unknown

Extent of the primary cancer based on evidence obtained from clinical assessment parameters determined prior to treatment.

- ◯ T0
- ◯ T1
- ◯ T1a
- ◯ T1a1
- ◯ T1a2
- ◯ T1b
- ◯ T1b1
- ◯ T1b2
- ◯ T1c
- ◯ T1mi
- ◯ T2
- ◯ T2a
- ◯ T2a1
- ◯ T2a2
- ◯ T2b
- ◯ T2c
- ◯ T2d
- ◯ T3
- ◯ T3a
- ◯ T3b
- ◯ T3c
- ◯ T3d
- ◯ T4
- ◯ T4a
- ◯ T4b
- ◯ T4c
- ◯ T4d
- ◯ T4e
- ◯ TX
- ◯ Ta
- ◯ Tis
- ◯ Tis (DCIS)
- ◯ Tis (LCIS)
- ◯ Tis (Paget's)
- ◯ Unknown
- ◯ Not Reported/Less Values

Extent of the regional lymph node involvement for the cancer based on evidence obtained from clinical assessment parameters determined prior to treatment.	◯ N0 ◯ N0 (i+) ◯ N0 (i-) ◯ N0 (mol+) ◯ N0 (mol-) ◯ N1 ◯ N1a ◯ N1b ◯ N1bI ◯ N1bII ◯ N1bIII ◯ N1bIV ◯ N1c ◯ N1mi ◯ N2 ◯ N2a ◯ N2b ◯ N2c ◯ N3 ◯ N3a ◯ N3b ◯ N3c ◯ N4 ◯ NX ◯ Unknown ◯ Not Reported
Extent of the distant metastasis for the cancer based on evidence obtained from clinical assessment parameters determined prior to treatment	◯ M0 ◯ M1 ◯ M1a ◯ M1b ◯ M1c ◯ MX ◯ cM0 (i+) ◯ Unknown ◯ Not Reported/Less Values
The last known state or condition of an individual's neoplasm	◯ With tumor ◯ Distant met recurrence/progression ◯ Loco-regional recurrence/progression ◯ Biochemical evidence of disease without structural correlate ◯ Tumor free ◯ Unknown tumor status ◯ not reported/Not Allowed To Collect
Date of the last known status: [last_known_disease_status]	_____
Evidence supporting progression	◯ X-ray ◯ Boon scan ◯ CT/MRI ◯ PET/PET-CT ◯ Others

Treatment

Treatment received by the patients

- ☐ No Treatment
- ☐ Unkown
- ☐ Resection
- ☐ Paliative Surgery
- ☐ Single agent chemotherapy
- ☐ Multiple chemotherapy
- ☐ Bone marrow transplant
- ☐ Targeted therapy
- ☐ Immune checkpoint blockade
- ☐ cellular therapy
- ☐ external radiation
- ☐ internal or radionuclide ablation

The best improvement achieved throughout the entire course of protocol treatment.

- ◯ J-Adjuvant Therapy
- ◯ CPD-Clinical Progression
- ◯ CR-Complete Response
- ◯ CRU-Complete Response Unconfirmed
- ◯ DU-Disease Unchanged
- ◯ IMR-Immunoresponse
- ◯ IPD-Immunoprogression
- ◯ MR-Minimal/Marginal Response
- ◯ MX-Mixed Response
- ◯ Non-CR/Non-PD-Non-CR/Non-PD
- ◯ NPB-No Palliative Benefit
- ◯ NR-No Response
- ◯ PA-Palliative Therapy
- ◯ PB-Palliative Benefit
- ◯ PD-Progressive Disease
- ◯ PPD-Pseudoprogression
- ◯ PR-Partial Response
- ◯ PSR-Pseudoresponse
- ◯ RD-Responsive Disease
- ◯ RP-Response
- ◯ RPD-Radiographic Progressive Disease
- ◯ sCR-Stringent Complete Response
- ◯ SD-Stable Disease
- ◯ SPD-Surgical Progression
- ◯ TE-Too Early
- ◯ VGPR-Very Good Partial Response

Regimen used including dose and cycles

_____

Detail of radiation therapy received by the patients

_____

Additional Cancer Registry Information

The type of obtained consent from the subject for participation in the study	◯ Consent by Death ◯ Consent Exemption ◯ Consent Waiver ◯ Informed Consent
Number of days between the date used for index and the date the subject consent was obtained for participation in the study.	_____
The number of days between the date used for index and to the date the patient was lost to follow-up.	_____
Date of known first cancer usual the pathological diagnosis date	_____
The patient was unable to be contacted or seen for follow-up information.	◯ Yes ◯ No ◯ Unknown
Date Last Follow Up	_____

The type of malignant disease (cellular morphology), as categorized by the World Health Organization's (WHO) International Classification of Diseases for Oncology (ICD-O).

- ◯ Acinar Cell Neoplasms
- ◯ Adenomas and Adenocarcinomas
- ◯ Adnexal and Skin Appendage Neoplasms
- ◯ Basal Cell Neoplasms
- ◯ Blood Vessel Tumors
- ◯ Chronic Myeloproliferative Disorders
- ◯ Complex Epithelial Neoplasms
- ◯ Complex Mixed and Stromal Neoplasms
- ◯ Cystic, Mucinous and Serous Neoplasms
- ◯ Ductal and Lobular Neoplasms
- ◯ Epithelial Neoplasms, NOS
- ◯ Fibroepithelial Neoplasms
- ◯ Fibromatous Neoplasms
- ◯ Germ Cell Neoplasms
- ◯ Giant Cell Tumors
- ◯ Gliomas
- ◯ Granular Cell Tumors and Alveolar Soft Part Sarcomas
- ◯ Hodgkin Lymphoma
- ◯ Immunoproliferative Diseases
- ◯ Leukemias, NOS
- ◯ Lipomatous Neoplasms
- ◯ Lymphatic Vessel Tumors
- ◯ Lymphoid Leukemias
- ◯ Malignant Lymphomas, NOS or Diffuse
- ◯ Mast Cell Tumors
- ◯ Mature B-Cell Lymphomas
- ◯ Mature T- and NK-Cell Lymphomas
- ◯ Meningiomas
- ◯ Mesonephromas
- ◯ Mesothelial Neoplasms
- ◯ Miscellaneous Bone Tumors
- ◯ Miscellaneous Tumors
- ◯ Mucoepidermoid Neoplasms
- ◯ Myelodysplastic Syndromes
- ◯ Myeloid Leukemias
- ◯ Myomatous Neoplasms
- ◯ Myxomatous Neoplasms
- ◯ Neoplasms, NOS
- ◯ Neoplasms of Histiocytes and Accessory Lymphoid Cells
- ◯ Nerve Sheath Tumors
- ◯ Neuroepitheliomatous Neoplasms
- ◯ Nevi and Melanomas
- ◯ Odontogenic Tumors
- ◯ Osseous and Chondromatous Neoplasms
- ◯ Other Hematologic Disorders
- ◯ Other Leukemias
- ◯ Paragangliomas and Glomus Tumors
- ◯ Plasma Cell Tumors
- ◯ Precursor Cell Lymphoblastic Lymphoma
- ◯ Soft Tissue Tumors and Sarcomas, NOS
- ◯ Specialized Gonadal Neoplasms
- ◯ Squamous Cell Neoplasms
- ◯ Synovial-like Neoplasms
- ◯ Thymic Epithelial Neoplasms
- ◯ Transitional Cell Papillomas and Carcinomas
- ◯ Trophoblastic neoplasms
- ◯ Unknown Not Reported or Not Applicable

The primary site of disease, as categorized by the World Health Organization's (WHO) International Classification of Diseases for Oncology (ICD-O). This categorization groups cases into general categories. Reference tissue_or_organ_of_origin on the diagnosis node for more specific primary sites of disease.

- ◯ Accessory sinuses
- ◯ Adrenal gland
- ◯ Anus and anal canal
- ◯ Base of tongue
- ◯ Bladder
- ◯ Bones, joints and articular cartilage of limbs
- ◯ Bones, joints and articular cartilage of other and unspecified sites
- ◯ Brain
- ◯ Breast
- ◯ Bronchus and lung
- ◯ Cervix uteri
- ◯ Colon
- ◯ Connective, subcutaneous and other soft tissues
- ◯ Corpus uteri
- ◯ Esophagus
- ◯ Eye and adnexa
- ◯ Floor of mouth
- ◯ Gallbladder
- ◯ Gum
- ◯ Heart, mediastinum, and pleura
- ◯ Hematopoietic and reticuloendothelial systems
- ◯ Hypopharynx
- ◯ Kidney
- ◯ Larynx
- ◯ Lip
- ◯ Liver and intrahepatic bile ducts
- ◯ Lymph nodes
- ◯ Meninges
- ◯ Nasal cavity and middle ear
- ◯ Nasopharynx
- ◯ Oropharynx
- ◯ Other and ill-defined digestive organs
- ◯ Other and ill-defined sites
- ◯ Other and ill-defined sites in lip, oral cavity and pharynx
- ◯ Other and ill-defined sites within respiratory system and intrathoracic organs
- ◯ Other and unspecified female genital organs
- ◯ Other and unspecified major salivary glands
- ◯ Other and unspecified male genital organs
- ◯ Other and unspecified parts of biliary tract
- ◯ Other and unspecified parts of mouth
- ◯ Other and unspecified parts of tongue
- ◯ Other and unspecified urinary organs
- ◯ Other endocrine glands and related structures
- ◯ Ovary
- ◯ Palate
- ◯ Pancreas
- ◯ Parotid gland
- ◯ Penis
- ◯ Peripheral nerves and autonomic nervous system
- ◯ Placenta
- ◯ Prostate gland
- ◯ Pyriform sinus
- ◯ Rectosigmoid junction
- ◯ Rectum
- ◯ Renal pelvis
- ◯ Retroperitoneum and peritoneum
- ◯ Skin
- ◯ Small intestine
- ◯ Spinal cord, cranial nerves, and other parts of central nervous system
- ◯ Stomach
- ◯ Testis
- ◯ Thymus
- ◯ Thyroid gland
- ◯ Tonsil
- ◯ Trachea

	◯ Ureter ◯ Uterus, NOS ◯ Vagina ◯ Vulva ◯ Unknown or Not Reported
Demographics	
An individual's self-described social and cultural grouping, specifically whether an individual describes themselves as Hispanic or Latino. The provided values are based on the categories defined by the U.S. Office of Management and Business and used by the U.S. Census Bureau.	◯ Hispanic or Latino ◯ Not Hispanic or Latino ◯ Unknown ◯ Not reported/Not allowed to collect
An arbitrary classification of a taxonomic group that is a division of a species. It usually arises as a consequence of geographical isolation within a species and is characterized by shared heredity, physical attributes and behavior, and in the case of humans, by common history, nationality, or geographic distribution. The provided values are based on the categories defined by the U.S. Office of Management and Business and used by the U.S. Census Bureau.	◯ Asian ◯ White ◯ American Indian or Alaska native ◯ Black or African American ◯ Native Hawaiian or Other Pacific Islanders ◯ Other ◯ Unknown/not reported ◯ Not allowed to collect
Number of days between the date used for index and the date from a person's date of birth represented as a calculated negative number of days.	_____
A numeric value representing the calendar year in which an individual was born. (Christian Era: 1900 - 2100)	_____ (Christian Era = Buddhist Era - 543)
The yes/no/unknown indicator used to describe whether the patient was premature (less than 37 weeks gestation) at birth.	◯ Yes ◯ No ◯ Unknown ◯ Not Reported
Numeric value used to describe the number of weeks starting from the approximate date of the biological mother's last menstrual period and ending with the birth of the patient.	_____ (Integer only (0-45))

Additional Follow-up Information

The source used to determine the patient's cause of death.	◯ Autopsy ◯ Death Certificate ◯ Medical Record ◯ Social Security Death Index ◯ Unknown ◯ Not Reported
Number of days between the date used for index and the date from a person's date of death represented as a calculated number of days.	_____
Numeric value to represent the year of the death of an individual.	_____

Last Follow Up

Time interval from the date of last follow up to the date of initial pathologic diagnosis, represented as a calculated number of days.	_____
Time interval from the date of last follow up to the date of initial pathologic diagnosis, represented as a calculated number of days.	_____

Response

Did the patient has had a new tumor event after initial treatment?	◯ Yes ◯ No ◯ unknown ◯ not reported/Not Allowed To Collect
Date of the first recurrence or progression	_____
Number of days between the date used for index and the date the patient's disease recurred	_____
The date that the best response was recorded (DD-MM-YYYY)	_____
Number of days between the date used for index and the date of the patient was thought to have the best overall response to their disease.	_____

Additional Diagnosis Information

Detail of The Tumor

Date of Initial Pathological Diagnosis	_____
Text term used to describe the patient's histologic diagnosis, as described by the World Health Organization's (WHO) International Classification of Diseases for Oncology (ICD-O).	_____
The anatomic site of origin, of the patient's malignant disease, as described by the World Health Organization's (WHO) International Classification of Diseases for Oncology (ICD-O)	_____
Number of days between the date used for index and the date the patient was diagnosed with the malignant disease.	_____
Age at the time of diagnosis expressed in number of days since birth. integer, null	_____
The patient's age (in years) on the reference or anchor date date used during date obfuscation.	_____
The age of the patient has been modified for compliance reasons. The actual age differs from what is reported. Other date intervals for this patient may also be modified.	◯ True ◯ False
The kind of disease present in the tumor specimen as related to a specific timepoint.	◯ primary ◯ metastasis ◯ recurrence ◯ other ◯ Unknown ◯ not reported/Not Allowed To Collect

ICD-O 3

The third edition of the International Classification of Diseases for Oncology, published in 2000 used principally in tumor and cancer registries for coding the site histology (morphology) of neoplasms. The study of the structure of the cells and their arrangement to constitute tissues and, finally, the association among these to form organs. In pathology, the microscopic process of identifying normal and abnormal morphologic characteristics in tissues, by employing various cytochemical and immunocytochemical stains. A system of numbered categories for the representation of data	_____

The third edition of the International Classification of Diseases for Oncology, published in 2000 used principally in tumor and cancer registries for coding the site (topography). The study of the association among these to form organs. A system of numbered categories for the representation of data	_____
The anatomic site of origin, of the patient's malignant disease, as described by the World Health Organization's (WHO) International Classification of Diseases for Oncology (ICD-O)	_____

AJCC Tumor Grading

Numeric value to express the degree of abnormality of cancer cells, a measure of differentiation and aggressiveness	◯ G1 ◯ G2 ◯ G3 ◯ G4 ◯ GX ◯ GB ◯ High Grade ◯ Low Grade ◯ Unknown ◯ Not Reported
Stage group determined from clinical information on the tumor (T), regional node (N) and metastases (M) and by grouping cases with similar prognosis for cancer.	◯ Stage 0 ◯ Stage 0a ◯ Stage 0is ◯ Stage I ◯ Stage IA ◯ Stage IA1 ◯ Stage IA2 ◯ Stage IB ◯ Stage IB1 ◯ Stage IB2 ◯ Stage IC ◯ Stage II ◯ Stage IIA ◯ Stage IIA1 ◯ Stage IIA2 ◯ Stage IIB ◯ Stage IIC ◯ Stage IIC1 ◯ Stage III ◯ Stage IIIA ◯ Stage IIIB ◯ Stage IIIC ◯ Stage IIIC1 ◯ Stage IIIC2 ◯ Stage IS ◯ Stage IV ◯ Stage IVA ◯ Stage IVB ◯ Stage IVC ◯ Stage Tis ◯ Stage X ◯ Unknown ◯ Not Reported

Code to represent the defined absence or presence of distant spread or metastases (M) to locations via vascular channels or lymphatics beyond the regional lymph nodes, using criteria established by the American Joint Committee on Cancer (AJCC).	◯ M0 ◯ M1 ◯ M1a ◯ M1b ◯ M1c ◯ M2 ◯ MX ◯ cM0 (i+) ◯ Unknown ◯ Not Reported
The codes that represent the stage of cancer based on the nodes present (N stage) according to criteria based on multiple editions of the AJCC's Cancer Staging Manual.	◯ N0 ◯ N0 (i+) ◯ N0 (i-) ◯ N0 (mol+) ◯ N0 (mol-) ◯ N1 ◯ N1a ◯ N1b ◯ N1bI ◯ N1bII ◯ N1bIII ◯ N1bIV ◯ N1c ◯ N1mi ◯ N2 ◯ N2a ◯ N2b ◯ N2c ◯ N3 ◯ N3a ◯ N3b ◯ N3c ◯ N4 ◯ NX ◯ Unknown ◯ Not Reported

The extent of a cancer, especially whether the disease has spread from the original site to other parts of the body based on AJCC staging criteria.	◯ Stage 0 ◯ Stage 0a ◯ Stage 0is ◯ Stage I ◯ Stage IA ◯ Stage IA1 ◯ Stage IA2 ◯ Stage IB ◯ Stage IB1 ◯ Stage IB2 ◯ Stage IC ◯ Stage II ◯ Stage IS ◯ Stage IIA ◯ Stage IIA1 ◯ Stage IIA2 ◯ Stage IIB ◯ Stage IIC ◯ Stage III ◯ Stage IIIA ◯ Stage IIIB ◯ Stage IIIC ◯ Stage IIIC1 ◯ Stage IIIC2 ◯ Stage IIID ◯ Stage IV ◯ Stage IVA ◯ Stage IVB ◯ Stage IVC ◯ Stage Tis ◯ Stage X ◯ Unknown ◯ Not Reported

Code of pathological T (primary tumor) to define the size or contiguous extension of the primary tumor (T), using staging criteria from the American Joint Committee on Cancer (AJCC).	◯ T0 ◯ T1 ◯ T1a ◯ T1a1 ◯ T1a2 ◯ T1b ◯ T1b1 ◯ T1b2 ◯ T1c ◯ T1mi ◯ T2 ◯ T2a ◯ T2a1 ◯ T2a2 ◯ T2b ◯ T2c ◯ T2d ◯ T3 ◯ T3a ◯ T3b ◯ T3c ◯ T3d ◯ T4 ◯ T4a ◯ T4b ◯ T4c ◯ T4d ◯ T4e ◯ TX ◯ Ta ◯ Tis ◯ Tis (DCIS) ◯ Tis (LCIS) ◯ Tis (Paget's) ◯ Unknown ◯ Not Reported
The version or edition of the American Joint Committee on Cancer Staging Handbooks, a publication by the group formed for the purpose of developing a system of staging for cancer that is acceptable to the American medical profession and is compatible with other accepted classifications.	◯ 1st ◯ 2nd ◯ 3rd ◯ 4th ◯ 5th ◯ 6th ◯ 7th ◯ 8th ◯ Unknown ◯ Not Reported

Anaplasia

Was anaplasia present at the time of diagnosis?	◯ Yes ◯ No ◯ Unknown ◯ Not Reported

The morphologic findings indicating the presence of a malignant cellular infiltrate characterized by the presence of large pleomorphic cells, necrosis, and high mitotic activity in a tissue sample.	◯ Absent ◯ Diffuse ◯ Equivocal ◯ Focal ◯ Present ◯ Sclerosis ◯ Unknown ◯ Not Reported

Ann Arbor Lymphoma Staging System for Lymphoma

Text term to signify whether lymphoma B-symptoms are present as noted in the patient's medical record.	◯ Yes ◯ No ◯ Unknown ◯ Not Reported
The clinical classification of lymphoma, as defined by the Ann Arbor Lymphoma Staging System.	◯ Stage I ◯ Stage II ◯ Stage III ◯ Stage IV ◯ Unknown ◯ Not Reported
Indicator that identifies whether a patient with malignant lymphoma has lymphomatous involvement of an extranodal site.	◯ Yes ◯ No ◯ Unknown ◯ Not Reported
The pathologic classification of lymphoma, as defined by the Ann Arbor Lymphoma Staging System.	◯ Stage I ◯ Stage II ◯ Stage III ◯ Stage IV ◯ Unknown ◯ Not Reported
Burkitt's lymphoma categorization based on clinical features that differ from other forms of the same disease.	◯ Endemic ◯ Immunodeficiency-associated, adult ◯ Immunodeficiency-associated, pediatric ◯ Sporadic, adult ◯ Sporadic, pediatric ◯ Unknown ◯ Not Reported
The number that describes the distance, in millimeters, between the upper layer of the epidermis and the deepest point of tumor penetration.	_____

Child Pugh Classification

The classification used in the prognosis of chronic liver disease, mainly cirrhosis.	◯ A ◯ A5 ◯ A6 ◯ B ◯ B7 ◯ B8 ◯ B9 ◯ C ◯ C10 ◯ C11 ◯ C12 ◯ Unknown ◯ Not Reported

Rectum Cancer

The number that represents the area of non-peritonealised bare area of rectum, comprising anterior and posterior segments, when submitted as a surgical specimen resulting from excision of cancer of the rectum.	_____
The staging classification of liver tumors, as defined by the Children's Oncology Group (COG). This staging system specifically describes the extent of the primary tumor prior to treatment.	◯ Stage I ◯ Stage II ◯ Stage III ◯ Stage IV ◯ Unknown ◯ Not Reported
The categorization of patients on the basis of prognostic factors per a system developed by Children's Oncology Group (COG). Risk level is used to assign treatment intensity.	◯ High Risk ◯ Intermediate Risk ◯ Low Risk ◯ Unknown ◯ Not Reported
The staging classification of renal tumors, as defined by the Children's Oncology Group (COG).	◯ Stage I ◯ Stage II ◯ Stage III ◯ Stage IV ◯ Unknown ◯ Not Reported
The classification of rhabdomyosarcoma, as defined by the Children's Oncology Group (COG).	◯ High Risk ◯ Intermediate Risk ◯ Low Risk ◯ Unknown ◯ Not Reported
The surgical grade of the musculoskeletal sarcoma, using the Enneking staging system approved by the Musculoskeletal Tumor Society (MSTS).	◯ High Grade (G2) ◯ Low Grade (G1) ◯ Unknown ◯ Not Reported
The metastatic stage of the musculoskeletal sarcoma, using the Enneking staging system approved by the Musculoskeletal Tumor Society (MSTS).	_____