ASCORegistry

BRANCHING LOGIC EXISTS IN THE FIELDS BELOW WHICH IS NOT REFLECTED IN THE FORMS

This REDCap data capture form is for collecting data on cancer patients with active cancer and those being treated in the adjuvant setting. It should be used for submitting data on cancer patients who has had a confirmed case of COVID-19, and for follow-up information on patient outcomes.

Tips on data entry:

Complete the information as accurately as possible.

Follow-up data will be linked to baseline data using zip codes and patient's date of birth so accuracy in these fields is especially important.

ICD-10 codes for cancer diagnosis are preferred to accurately categorize cancer types.

Some information may not be known (e.g., certain dates of clinical events). Do your best to approximate when an exact date is unknown.

Avoid using the "back" button on your browser: data will be entered twice.

If you need to submit an amended form, contact CENTRA@asco.org with subject "ASCO Registry: amended form."

Please contact CENTRA@asco.org if you have any problems with the data capture instruments.

We can only accept data from practices that have a Data Use Agreement with ASCO. Data entered without a Data Use Agreement will be immediately deleted from the registry. If your practice does not have a signed data use agreement with ASCO to contribute to the ASCO Registry, please contact centra@asco.org.

Please enter the PIN code that was provided to your practice for patient data entry:

Name of Practice:

O Practice 1
O Practice 2
O Practice 3
O Practice 4

Five digit zip code of oncology practice where patient is being treated

Patient's date of birth (MM-DD-YYYY):

(Patient records will be linked using date of birth so please check for accuracy!)
Five digit zip code of patient's primary residence.

(Patient records will be linked using zip code so please check for accuracy!)

Are you entering baseline information on a patient, or follow-up information?

- This is the initial data entry for this patient, which includes demographic information plus COVID-19 and cancer status.
- I am entering follow-up information on a patient whose baseline information is already captured in the ASCO Registry.

Has the patient for whom you are entering data had a confirmed case of COVID-19 (i.e., positive test for SARS-CoV-2)?

- Yes
- No

What is the patient's cancer status?

- The patient has active cancer
- The patient is disease-free but is receiving adjuvant therapy within 1 year following surgical resection (including hormonal treatments)
- Neither of the above

Which of the following type of follow-up data are you entering?

<table>
<thead>
<tr>
<th>Check all that apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>Follow-up information on a patient's COVID-19 condition or treatment (including vital status)</td>
</tr>
<tr>
<td>Follow-up information on a patient's cancer condition or treatment (including vital status)</td>
</tr>
</tbody>
</table>

PARTICIPATION IN OTHER REGISTRIES

<table>
<thead>
<tr>
<th>Has information on this patient been entered into another COVID-19 &amp; Cancer Registry?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>Unsure</td>
</tr>
</tbody>
</table>

To which registries have data been submitted for this patient? (check all that apply)

- ASH Registry for Hematologic Malignancies
- CCC-19
- Other
- Unsure which registry

Which other registries?
If more than one, separate with semi-colon (;).
CONFIRM PRACTICE

Please confirm that you are entering data for a patient treated at [name_of_practice]. Is this correct?
(If not, please scroll to the top of the page and select the correct practice name.)

☐ Yes
☐ No