Update Patient's Cancer and Cancer Treatment status

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

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

To accurately link this patient update to previous and future records on this patient, please confirm the patient's primary cancer diagnosis.

Do you have access to the ICD-10 code for the patient's primary cancer diagnosis?
- Yes
- No

It is strongly preferred that ICD-10 codes are entered. If you need to look up an ICD-10 code, please refer to this site: https://www.icd10data.com/ICD10CM/Codes/C00-49

Primary cancer currently being managed:
Please enter ICD-10 code, or begin typing cancer type to use auto-fill feature.

Primary cancer currently being managed:
- Bladder Cancer
- Breast Cancer
- Colon and Rectal Cancer
- Endometrial Cancer
- Kidney Cancer
- Leukemia
- Liver Cancer
- Lung Cancer
- Melanoma
- Non-Hodgkin Lymphoma
- Pancreatic Cancer
- Prostate Cancer
- Thyroid Cancer
- Other

Other cancer type:

PATIENT HEALTH STATUS

Date of clinical encounter associated with this report of the patient's cancer status:

The date you selected is in the future. Please revisit the date field above and revise your entry.
**PATIENT'S ECOG PERFORMANCE STATUS AT CLINICAL ENCOUNTER**

- **0** - Fully active, able to continue with all pre-disease activities without restriction.
- **1** - Restricted in physically strenuous activity but ambulatory and able to carry out work of a light or sedentary nature, e.g., light housework, office work.
- **2** - Ambulatory and capable of all self-care but unable to carry out any work activities. Up and about more than 50% of waking hours.
- **3** - Capable of only limited self-care. Confined to bed or chair more than 50% of waking hours.
- **4** - Completely disabled. Cannot carry on any self-care. Totally confined to bed or chair.
- **5** - Dead

**DATE OF DEATH:**

The date you selected is in the future. Please revisit the date field above and revise your entry.

**CAUSE OF DEATH:**

- Cancer progression
- Complication of cancer treatment
- COVID-19 or complications due to COVID-19
- Another cause unrelated to Cancer or COVID-19
- Unknown cause of death

Although the patient has died, please complete the following information regarding the patient's cancer status and treatment between the last clinical encounter and death.

### PATIENT'S CANCER INFORMATION

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is the current extent of the patient's cancer (i.e., at the last clinical encounter)?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Localized</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Regional</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Metastatic</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disease-free</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Since the patient's COVID-19 diagnosis, the patient's cancer has:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Remained stable</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Progressed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responded to therapy (i.e., partial or complete response)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unknown due to lack of disease/tumor assessment since COVID-19 diagnosis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the patient receiving any care or treatment (for COVID-19 or cancer) via telemedicine?</td>
<td>Yes</td>
<td>No</td>
<td>Unsure</td>
</tr>
<tr>
<td>Is the patient currently receiving any anti-cancer treatments?</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Is the patient enrolled on a therapeutic cancer clinical trial?</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Is the patient enrolled in hospice?</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>
### Which anti-cancer treatments is the patient currently receiving?

<table>
<thead>
<tr>
<th>Treatment</th>
<th>Currently receiving</th>
<th>Not receiving</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgery, planned within the next 6 weeks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Radiation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drug-based therapy</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Which types of anti-cancer drugs is the patient currently taking? (check all that apply)**
- Antibody-Drug Conjugate
- Cellular Therapy
- Cytotoxic Chemotherapy
- Hormone Therapy
- Immune Checkpoint Inhibitor
- Other Immunotherapy
- Targeted Monoclonal Antibody
- Targeted Small Molecule Therapy

### CANCER TREATMENT DELAYS AND DISCONTINUATIONS

The next section refers to changes in planned cancer treatments and surgeries.

**Which anti-cancer treatments have been DELAYED since the last report on this patient to the registry?**

**Check all that apply.**

<table>
<thead>
<tr>
<th>Treatment</th>
<th>Delayed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgery</td>
<td></td>
</tr>
<tr>
<td>Radiation</td>
<td></td>
</tr>
<tr>
<td>Drug-based therapy</td>
<td></td>
</tr>
<tr>
<td>None have been delayed</td>
<td></td>
</tr>
</tbody>
</table>

**Which types of drugs have been delayed? (check all that apply)**
- Antibody-Drug Conjugate
- Cellular Therapy
- Cytotoxic Chemotherapy
- Hormone Therapy
- Immune Checkpoint Inhibitor
- Other Immunotherapy
- Targeted Monoclonal Antibody
- Targeted Small Molecule Therapy

**What is the primary reason for treatment delay?**
- Progressive Disease
- Treatment-related toxicity
- Patient's COVID-19 disease
- Lack of clinical resources due to COVID-19 crisis
- Patient's choice (i.e., non-clinical reason)
- Other

**Other primary reason for delay:**

**Who made the decision to delay cancer treatment?**
- Treating oncologist
- Patient
- Other (e.g., other physician)
**Which anti-cancer treatments have been DISCONTINUED or CANCELLED (in the case of surgery) since the last report on this patient to the registry?**

Check all that apply.

<table>
<thead>
<tr>
<th>Discontinued (Radiation or Drug) or Cancelled (Surgery)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgery</td>
</tr>
<tr>
<td>Radiation</td>
</tr>
<tr>
<td>Drug-based therapy</td>
</tr>
<tr>
<td>None</td>
</tr>
</tbody>
</table>

**Which types of drugs have been discontinued? (check all that apply)**

- Antibody-Drug Conjugate
- Cellular Therapy
- Cytotoxic Chemotherapy
- Hormone Therapy
- Immune Checkpoint Inhibitor
- Other Immunotherapy
- Targeted Monoclonal Antibody
- Targeted Small Molecule Therapy

**What is the primary reason for treatment discontinuation or cancellation?**

- Progressive Disease
- Treatment-related toxicity
- Patient's COVID-19 disease
- Lack of clinical resources due to COVID-19 crisis
- Patient's choice (i.e., non-clinical reason)
- Other

**Other primary reason for discontinuation:**

______________________________

**Who made the decision to discontinue one of more cancer treatment modalities?**

- Treating oncologist
- Patient
- Other (e.g., other physician)