

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

PARTICIPATION IN OTHER REGISTRIES

Has information on this patient been entered into another COVID-19 & Cancer Registry?

- Yes
 No
 Unsure

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