**CASE SUBMISSION FORM FOR THE ALL-IC REL TUMOUR BOARD Date: 2023** **January** **1.**

|  |  |  |
| --- | --- | --- |
| **BASELINE DATA**  **First name:** ……..…. **Surname initial:** …  **DOB:** **2000 January**  **Sex: female**  **Country:** ………. **City:** ………  **Hospital:** ……..  **Submitting doctor:** …  **TIME LINE**  **First presentation 2000 January**  **Localisation:** ………  **1st relapse** **2000 January**  **Time from finishing 1st line treatment:**  ... **years and** .... **months, late**  **Localisation:** **isolated medullar**  **Extra details:** ...….  **2nd relapse 2000 January**  **Time from finishing 2nd line treatment**:  ... **years and** .... **months**  **Localisation:** **isolated medullar**  **Extra details:** ……  **Further relapses: 2000 January**  **Localisation:** **isolated medullar**  ……... | **BIOLOGICAL FEATURES**  **Immunophenotype: BCP**. **Details (latest findings, emphasis: CD19, 20, 22, 38):** …………  **Cytogenetics (latest findings):**  …………  **Molecular genetics (latest findings):**  …………  **TREATMENT SO FAR**  **Front line therapy and response to therapy:**  …………    **1st relapse therapy and response to therapy:**  …………..    **2nd and subsequent rel. therapy and response to therapy:**  …………..  **Cumulative anthracycline** (mg/m2 doxorubicin equivalent): …  **Latest leukaemia-status**  **Date: 2000 January**  **Residual disease:** marrow … % by **morphology**  **Extramedull:** …….. **Extra details:** ... | **ADDITIONAL INFORMATION**  **Relevant comorbidities:**  ……………  **Toxicities, complications so far:**  ………..  **FOCUS FOR DISCUSSION**  **Situation to discuss:**  **subsequent rel., resistance to treatment**  **other important points**: …..………  **Treatment plan from own physicians:**  …………      **Questions to the board:**  · …  · …  · … |

|  |  |
| --- | --- |
| **FREE TEXT OR TABLES, FIGURES TO DEMONSTRATE FURTHER DATA IF NEEDED** | |
|  |  |