



Data Collection Worksheet

Please Note: The Data Collection Worksheet (DCW) is a tool to aid integration of a PhenX protocol into a study. The PhenX DCW is not designed to be a data collection instrument. Investigators will need to decide the best way to collect data for the PhenX protocol in their study. Variables captured in the DCW, along with variable names and unique PhenX variable identifiers, are included in the PhenX Data Dictionary (DD) files.

S32r0 Transfusion Reaction Form

Ad Hoc Event ID _____

Visit Date (yyyy/mm/dd): _____

Correction:

Yes

No

Use this form to report transfusion reactions either during treatment or within 15 minutes after completion of treatment.

1. Date of transfusion (yyyy/mm/dd): _____

2. Type of transfusion:

Simple

Modified exchange

Erythrocytapheresis

3. Type of reaction:

Febrile non-hemolytic

Allergic or anaphylactoid

Hemolytic transfusion reaction (HTR)

4. Associated complications:

Hypertension and circulatory overload

Vaso-occlusive

Transient ischemic attack

A descriptive, narrative report of all transfusion reactions is recommended by the {study name}. Please use the field below to upload your narrative for this transfusion reaction. The narrative must include the Patient ID number and date of the transfusion reaction, followed by a complete description of the occurrence, procedures followed, and outcome.

Staff I.D. #: _____

Protocol source: <https://www.phenxtoolkit.org/protocols/view/890501>