[Study Name/ID pre-filled] Site Name:

 Subject ID:

**The Core elements are identified with asterisks (\*). All other elements are Supplemental.**

**Transfusion History**

1. \*Ever transfused [ ]  Yes [ ]  No
	1. Episodic or chronic
		1. If episodic, how many? \_\_\_ \_\_\_
		2. If chronic, Simple or Exchange: \_\_\_\_\_\_\_\_\_\_\_
2. Simple transfusion
	1. Frequency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. # units transfused per transfusion and to date (if known)\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	3. Dates of transfusion: \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ \_\_\_ (DD-MMM-YYYY)
	4. Adverse events: \_\_\_\_\_\_\_\_\_\_\_\_
	5. Premedications:\_\_\_\_\_\_\_\_\_\_\_\_
3. Red blood cell exchange
	1. Automated? Manual? \_\_\_\_\_\_\_\_\_\_\_
	2. Frequency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	3. Hemoglobin S target: \_\_\_\_\_\_\_\_\_\_\_
	4. # RBC units exchanged per procedure: \_\_\_\_\_\_\_\_\_\_
	5. Dates\_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ \_\_\_ (DD-MMM-YYYY)
	6. Adverse events during procedures? \_\_\_\_\_\_\_\_\_
	7. Premedication’s:\_\_\_\_\_\_\_\_\_\_\_\_
	8. Indication for RBC exchange\_\_\_\_\_\_\_\_\_\_
4. \*RBC alloantibodies (which ones?)\_\_\_\_\_\_\_\_\_\_\_
5. Blood bank
	1. Extent of matching: limited (Rh and K) or extended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. Age of blood: any policy regarding giving young blood vs old? \_\_\_\_\_\_\_\_\_
	3. Other characteristics of blood: leukoreduced, irradiated, Hgb S negative, washed: \_\_\_\_\_\_\_\_\_\_\_

**\*Estimated number of lifetime transfusions**\_\_\_\_\_\_\_\_\_\_\_

* **Core CDEs**