



SEARCH CANCELLATION

PATIENT

Patient Name : _____

Hema-Quebec (HQ) ID No. : _____ Transplant Center : _____

REASON FOR CANCELLATION

No suitably matched donors were available

Other Reason : _____

The Patient responded to Alternative Therapy

The Patient received a :

Autologous Transplant

Marrow from a Related Donor

Cord Blood Transplant

Marrow from an Unrelated donor

Cord Blood from Related Donor

PBSC from a Related Donor

Leukapheresis from Unrelated Donor

PBSC from an Unrelated Donor

Date of transplant : _____
dd / mm / yyyy

The Patient's condition deteriorated so as to preclude Stem Cell Transplant

The Patient deceased Date of death : _____
dd-mm-yyyy

The Patient or the Patient's family decided the Patient should not proceed with an Unrelated Stem Cell Transplant

The Patient's physician decided the Patient should not proceed with an Unrelated Stem Cell Transplant

Good Clinical Condition

Signature : _____

Date : _____
dd / mm / yyyy