

Association for Haemophilia and Allied Disorder - Asia Pacific (AHAD-AP)¹

SECTION 1.4: ANNUAL FOLLOW UP DATA

Centre ID: _____ Patient ID: _____

Period of reporting

Information Given By _____

Date start _____

Date finish _____

Weight (3 digits, 1 decimal) _____ kg

Height (3 digits, 1 decimal) _____ cm

Inhibitor Status

Screen _____

Bethesda assay _____ BU/ml _____

Nijmegen modification _____

Bleeding & Other Interventions Requiring Factor Replacement

Bleeding Events

Please indicate the number of bleeds in each category, for the entire reporting period

Total number of bleeds _____

	Joint	Muscle
Total number of bleeds	_____	_____
Spontaneous bleeds	_____	_____
Traumatic bleeds	_____	_____
Treated bleeds	_____	_____
Untreated bleeds	_____	_____
Life threatening bleeds	_____	
If other, specify	_____	

Comments

Episodic Factor Replacement Therapy

Please record each Episode in which Replacement Therapy was used during the reporting period. Do not include data that was entered in the First 50 Exposures table.

None Unknown

Reason for replacement therapy	Start date of therapy	End date of therapy	# Exposures*	Product type	Brand name	Total dose received, IU/kg or ml	# days hospitalized for this episode
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

* An exposure is defined as a 24-hour period in which FVIII / IX containing product is given to a patient. (Blanchette, VS et al. 2014)

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Prophylaxis Factor Replacement Therapy

Please record data on Prophylaxis Replacement Therapy used during the reporting period. Do not include data that was entered in the First 50 Exposures table.

None Unknown

Type of Prophylaxis	Start date of therapy	End date of therapy	# Exposures*	Product type	Brand name	Dose of prophylaxis, IU/kg or ml	Frequency
	<input type="checkbox"/> Ongoing from previous visit	<input type="checkbox"/> ongoing					
	<input type="checkbox"/> Ongoing from previous visit	<input type="checkbox"/> ongoing					

* An exposure is defined as a 24-hour period in which FVIII / IX containing product is given to a patient. (Blanchette, VS et al. 2014)

Surgery / Other Interventions Requiring Factor Replacement Therapy

Please record any other intervention that the patient underwent requiring Factor Replacement Therapy during the reporting period. Do not include data that was entered in the First 50 Exposures, Episodic or Prophylaxis tables.

None Unknown

Procedure	Start date of therapy	End date of therapy	# Exposures*	Product type	Brand name	Total dose received, IU/kg	# Days hospitalized for this episode	Reason

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