

Hemophagocytic lymphohistiocytosis – Basic Information Sheet

Referring physician: Referring institution: Phone number: E-mail: Date and time blood samples were taken:

Patient information		HLH criteria (at diagnosis)			
Family name: Given name: Date of birth (YYYY-MM-DD): Sex: Country of origin: Ethnicity: Date of onset (YYYY-MM-DD): Date of diagnosis (YYYY-MM-DD): Number of siblings: Recurrent episodes of HLH: Parent consanguinity: Affected siblings/relatives: Hypopigmentation/albinism:	- - Specify:	-	Fever: °C Splenomegaly: Cytopenia (≥2 cell lineages): Hemoglobin (<90 g/L)		galy: g/L × 10 ⁹ /L × 10 ⁹ /L × 10 ⁹ /L LU
Known familial HLH mutation:	Specify:				
CNS involvement		Serology			
CSF cells: CSF protein: Neurological symptoms (specify): Abnormal CT or MRI:	10 [°] /L g/L	-	EBV serology: CMV serology:		
Therapy (current)			Suspected disease trigger(s)		
Steroids: Etoposide (VP16): Cyclosporin A: Other immunosuppressants: Biologicals (<i>e.g.</i> Rituximab, Anakinra): Additional therapy:		Infection (pls specify): Rheumatic disease (pls specify): Malignancy (pls specify): Immunodeficiency: Other:			
	Ade	ditional	comments		

See next page for information on sampling, shipment, and interpretation

Sampling information

Pediatric patients (at physician's discretion; greater sample volumes may allow additional

<u>diagnostic experiments</u>)		
Patient	5-10 ml Na-heparin	+ 3-5 ml EDTA blood samples
Parents	20 ml Na-heparin	+ 10 ml EDTA blood samples
Siblings (if possible)		
Unrelated healthy control	10 ml Na-heparin	+ 10 ml EDTA blood samples
Adolescent and adult patients Patient Siblings (if possible) Unrelated healthy control	30 ml Na-heparin 30 ml Na-heparin 30 ml Na-heparin	+ 10 ml EDTA blood samples + 10 ml EDTA blood samples + 10 ml EDTA blood samples

Samples are to be shipped at room temperature. Delivery must be ascertained within 24 hours of venipuncture. For assistance with expedient courier services, please contact Yenan Bryceson. Notify the laboratory before sending samples and if possible, provide a tracking number for the shipment.

Shipment address

Dr Yenan Bryceson HERM, Novum, Floor 4, Hälsovägen 7 Karolinska University Hospital Huddinge SE-14157 Huddinge Stockholm, SWEDEN

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Further information regarding data interpretation

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Prof. Jan-Inge Henter		