**Elements that are identified with asterisks (\*) are Core.**

**Splenic Assessments**

1. Was splenic function assessed?

Yes

No

Not applicable

Unknown

\*If Yes, date of most assessment: \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ \_\_\_ (DD-MMM-YYYY)

\*If Yes, select which splenic test was completed

Complete red blood cell count

Complete RBC: \_\_ \_\_ \_\_ \_\_ \* \_\_ \_\_ x10 \_\_ \_\_ cells/uL

Pitted RBC score

Pitted RBC score: \_\_ \_\_ \* \_\_ %

Splenic scan

Splenic scan results:

Normal (radionuclide uptake)

Abnormal (no radionuclide uptake)