



**BSRBR-RA Event of Special Interest (ESI) Report  
LYMPHOPROLIFERATIVE MALIGNANCY**

**Study ID:**  
**HRN:**  
**Patient Initials:**

**Gender:**  
**Date of Birth:**  
**NHS Number:**

**Event Date:**

**Biologic/biosimilar at time of event:**  
**Product Batch Number:**

**Event Details** (please annotate with any additional information)

**What was the diagnosis?** (Please include site)

**Histopathological classification & Staging/ Radiology:** (If known, please enclose a copy of the results)

**Treatment Regime:**

Withdrawal of MTX, no other treatment given

Withdrawal of biologic/biosimilar, no other treatment given

Surgery       Chemo regime       Rituximab       Radiotherapy

**Tissue EBV Status:**       Positive       Negative       Unknown

**Past history of Sjögren's disease?**       YES       NO       DON'T KNOW

Please provide name & hospital of doctor treating the malignancy if available:

**Positive family history of cancer?**       YES       NO       DON'T KNOW

Do you believe there is a possibility that this adverse event was related to the biologic/biosimilar drug used to treat RA?    Yes     No     Unknown

If **Yes** please confirm which drug: \_\_\_\_\_

What was the outcome of the event?

Resolved       Not Resolved       Resolved with sequelae       Fatal

Form completed  
By: \_\_\_\_\_  
On: \_\_\_\_/\_\_\_\_/\_\_\_\_

Return ESI/s to: BSRBR-RA. The University of Manchester,  
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Manchester, M15 6SZ. biologics.register@manchester.ac.uk