

	Acute Lymphoblastic Leukemia (ALL) CAR-T Eligibility Criteria
Treatment History & Prognosis	 Patient has CD19+ B-cell acute lymphoblastic leukemia (ALL) and is one of the following: a. refractory b. has relapsed after allogeneic stem cell transplant (CAR-T infusion must be at least 4 months from time of SCT) c. has experienced second or later relapse d. Ineligible for allogeneic SCT because of:
Organ Function	Patients must have adequate organ function and sufficient T cells to allow a successful apheresis. The ranges below are a guide for your patient to qualify for CAR-T. Patients not fulfilling specific criteria can still be considered on a case-by-case basis. Please discuss with transplant team.
	 Renal function: A serum creatinine ≤ 150.31 μmol/L ALT ≤ 5 times the ULN for age Liver function: Bilirubin < 2.0 mg/dl Pulmonary function: Pulse oxygenation > 91% on room air Cardiac function: LVSF ≥ 28% confirmed by echocardiogram Left ventricle ejection fraction (LVEF) ≥ 45% confirmed by echocardiogram or Multigated Radionuclide Angiography (MUGA) Lymphocyte count: Absolute lymphocyte count (ALC) > 0.1 x 10⁹/L(100/mm³) NOTE: If ALC is below 0.1 x 10⁹/L, application can be considered; but for apheresis to proceed, ALC must be at least 0.1 x 10⁹/L

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Exclusion Criteria	 There are no formal contraindications to the product. Possible exclusion criteria: Active CNS involvement, defined as CNS-3 per NCCN guidelines. Note: Patients with history of CNS disease that has been effectively treated will be eligible. Active uncontrolled Hepatitis B, Hepatitis C or HIV infection Active uncontrolled GVHD with need for ongoing immunosuppression Prior treatment with genetically engineered T cell product