



## Immune Effector Cell-Associated Neurotoxicity Syndrome (ICANS) assessment tool

Complete this baseline assessment prior to starting treatment. It is recommended that ICANS assessments are completed at least twice daily. Increase frequency as clinically indicated.

ICANS grade is determined by the most severe event (immune effector cell-associated encephalopathy (ICE) score, level of consciousness, seizure, motor findings, raised intracranial pressure/cerebral oedema) not attributable to any other cause; for example, a patient with an ICE score of 3 who has a generalised seizure is classified as Grade 3 ICANS.

Surname:  Given names:
D / (  '
Date of birth: Sex: AMO:

Immune effecto	or cell-associat	ed encept	nalopathy (ICE) assessment						
If the patient's	ICE score is 9 o	r below, n	otify physician immediately.						
Orientation	Orientation	4 points							
Naming	Ability to name 3 objects (e.g. point to clock, pen, button)								
Following commands	Ability to follow simple commands (e.g. "Show me 2 fingers" or "Close your eyes and stick out your tongue")								
Writing	Ability to write a simple sentence (e.g. "The emu is an Australian animal") 1 point								
Attention	Ability to count backwards from 100 by 10								
Immune Effector Cell-Associated Neurotoxicity Syndrome (ICANS) assessment									
Neurotoxicity Domain	Grade 1	Grade 2	Grade 3	Grade 4					
ICE assessment score	7-9	3-6	0-2	0 (patient is unarousable and unable to perform ICE)					
Depressed level of consciousness	Awakens spontaneously	Awakens to voice	Awakens only to tactile stimulus	Patient is unarousable or requires vigorous or repetitive tactile stimuli to arouse. Stupor or coma					
Seizure	N/A	N/A	Any clinical seizure focal or generalized that resolves rapidly or nonconvulsive seizures on EEG that resolve with intervention	Life-threatening prolonged seizure (>5 min); or repetitive clinical or electrical seizures without return to baseline in between					
Motor findings	N/A	N/A	N/A	Deep focal motor weakness s as hemiparesis or paraparesis					
Elevated cerebral oedema	N/A	N/A	Focal/local oedema on neuroimaging	Diffuse cerebral oedema on ne Decerebrate or decorticate por nerve VI palsy; or Papilledema triad (irregular/decreased resp bradycardia and systolic hyper	sturing; or Cranial; or Cushing's pirations,				

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Date									
Time									
Orientation	4								
Naming	3								
Following co	mmands 1								
Writing	1								
Attention	1								
Total score	/10								
Handwriting	assessment								
Date	Time	Patient handwriting sample							
ICANS gradi	ng								
Date									
Time									
ICANS Grade									
Assessors sig	gnature								

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Time							
Orientation	4						
Naming 3							
Following co	mmands 1						
Writing	1						
Attention 1							
Total score	/10						
Handwriting	assessment						
Date	Time	Patient ha	andwriting	sample			
ICANS gradii	ng						
Date							
Time							
ICANS Grade	1-4						
Assessors sig	gnature						

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