

| Name – patient identification | | Hospital, department | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|----------------------|---|---|---|---|---|----|
| <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> - <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> - <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> - <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> </div> <div style="display: flex; justify-content: space-around; margin-top: 5px;"> Day Month Year No. </div> | | | | | | | | |
| Start year | <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Year after RT (0 is before RT) | 0 | 1 | 2 | 3 | 4 | 5 | 10 |
| | Day, month. | | | | | | | |
| Oncoplastic surgery | 0 = no 1 = yes | | | | | | | |
| Weigth (kg) | | | | | | | | |
| Heigth (cm) | | | | | | | | |
| Tobacco Anamnese | 0 = Never Smoker 1 = Current Smoker 2 = Previous Smoker | | | | | | | |
| Started smoking year | 1) | | | | | | | |
| Stopped smoking year | | | | | | | | |
| Cigarettes per day (average over the years) | 2) | | | | | | | |
| Specialist reported morbidity | | | | | | | | |
| Dyspigmentation, breast | 3) | | | | | | | |
| Telangiectasia, breast | 0 = none, 1 = <1/cm2, 2 = 1-4/cm2 3 = >4/cm2 | | | | | | | |
| Fibrosis, Breast | 0 = None, 1 = Slightly palpable, 2 = Palpable 3 = Clearly palpable, retraction of skin and fixation | | | | | | | |
| Scar appearance | 4) | | | | | | | |
| Edema, breast | 0 = None, 1 = Asymptomatic 2 = Symptomatic, 3 = Secondary dysfunction | | | | | | | |
| Global cosmetic score (subjective) | 5) | | | | | | | |
| Wants exit from trial | 0 = no 1 = yes | | | | | | | |
| Other: | | | | | | | | |
| Patient reported morbidity | | | | | | | | |
| Pain, breast | 0 = None, 1 = Sometimes 2 = Often, 3 = Always | | | | | | | |
| Analgesics because of pain in breast | 0 = None, 1 = Sometimes 2 = Often, mild, 3 = Opioid need | | | | | | | |
| Sensibility changes, breast | 0 = None, 1 = Slight 2 = Moderate, 3= Severe | | | | | | | |
| Body image | 6) | | | | | | | |
| Dresses differently, e.g. prefers looser fitting clothing | 0=no 1=yes | | | | | | | |

| Fear of recurrence | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---|---|---|---|---|---|----|
| | | 0 | 1 | 2 | 3 | 4 | 5 | 10 |
| I am worried or anxious about the possibility of cancer recurrence | 7) | | | | | | | |
| I am afraid of cancer recurrence | 7) | | | | | | | |
| I believe it is normal to be worried or anxious about the possibility of cancer recurrence. | 7) | | | | | | | |
| When I think about the possibility of cancer recurrence, this triggers other unpleasant thoughts or images (such as death, suffering, the consequences for my family) | 7) | | | | | | | |
| I believe that I am cured and that the cancer will not come back | 7) | | | | | | | |
| In your opinion, are you at risk of having a cancer recurrence? | 0 = Not at all at risk 1 = A little at risk 2 = Somewhat at risk 3 = A lot at risk 4 = A great deal at risk | | | | | | | |
| How often do you think about the possibility of cancer recurrence? | 0 = Never 1 = A few times a month 2 = A few times a week 3 = A few times a day 4 = Several times a day | | | | | | | |
| How much time <u>per day</u> do you spend thinking about the possibility of cancer recurrence? | 0 = I don't think about it 1 = A few seconds 2 = A few minutes 3 = A few hours 4 = Several hours | | | | | | | |
| How long have you been thinking about the possibility of cancer recurrence? | 0 = I don't think about it 1 = A few weeks 2 = A few months 3 = A few years 4 = Several years | | | | | | | |
| 1) If the patient started smoking very young, but she does not remember how old, the start is estimated when she was 15 years old. | | | | | | | | |
| 2) If the patient smokes cheroots, cigars or pipe the amount of tobacco is calculated as cigarettes: 1 cheroot = 3 cigarettes 1 cigar = 6 cigarettes 1 gram pipe tobacco = 1 cigarette | | | | | | | | |
| 3) 0 = No difference in color both for skin and papilla. 1 = Papilla <u>or</u> skin lighter/darker than on non-irradiated breast. 2 = <u>Both</u> papilla <u>and</u> skin lighter/darker than on non-irradiated breast. 3 = Dramatic difference in color between irradiated and non-irradiated breast, either on the papilla and/or on skin. | | | | | | | | |
| 4) 0 = Largely not visible 1 = Visible but does not influence the cosmetic result 2 = Visible and affects the cosmetic result to some degree 3 = Visible and affects the cosmetic result considerably 4 = Not applicable | | | | | | | | |
| 5) 0 = Excellent. No asymmetry, normal contour without visible deformities or skin changes and only slight increase in consistency. 1 = Good. Slight asymmetry and/or slight deformity and/or slightly increased pigmentation / telangiectasia and/or slight edema of breast and/or some increase in breast consistency. 2 = Fair. Distinct asymmetry and/or distinct deformity and/or distinct increased pigmentation / telangiectasia and/or edema of the breast and/or scattered fibrosis. 3 = Poor. Considerable asymmetry and/or severe deformity and/or considerable dyspigmentation / telangiectasia and/or edema of the breast and/or severe fibrosis or necrosis. | | | | | | | | |
| 6) 0 = High confidence, 1 = Feels less confidence, less feminine, 2 = Lack of confidence, avoids mirrors, 3 = Ashamed of body | | | | | | | | |
| 7) 0 = Not at all 1 = A little 2 = Somewhat 3 = A lot 4 = A great deal | | | | | | | | |