

Name – Patient ID <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Day Month Year No. </div>	Hospital
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Pathology report on patients included in the Skagen Trial 1

Date of last surgery ddmmyyyy	Size of invasive carcinoma (mm)
Surgical type <input type="checkbox"/> Mastectomy <input type="checkbox"/> Lumpectomy	Resection margin from invasive carcinoma (mm)
Axillary lymph node dissection <input type="checkbox"/> No <input type="checkbox"/> Yes	If DCIS present: Resection margin from DCIS (mm)
Number of lymph nodes (LNs) removed in total	Type of invasive carcinoma <input type="checkbox"/> Ductal <input type="checkbox"/> Lobular <input type="checkbox"/> Other
Number of LNs with macrometastases	Malignancy grade <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> Not graded
Number of LNs with micrometastases	ER status (%)
Sentinel node biopsy used <input type="checkbox"/> No <input type="checkbox"/> Yes	Ki67 (%)
Number of sentinel nodes	HER2 status <input type="checkbox"/> Normal <input type="checkbox"/> Positive

Neoadjuvant or primary systemic therapy

Clinical stage before neoadjuvant or primary systemic therapy according to AJCC	
cT	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 4a <input type="checkbox"/> 4b <input type="checkbox"/> 4c <input type="checkbox"/> 4d <input type="checkbox"/> X (unknown)
cN	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> X (unknown)

Response of the primary tumour to neoadjuvant/primary systemic therapy	<input type="checkbox"/> Grade 1 = No invasive cancer cells (presence of DCIS is allowed) <input type="checkbox"/> Grade 2 = More than 90% loss of cancer cells <input type="checkbox"/> Grade 3 = Between 30 and 90% loss of cancer cells <input type="checkbox"/> Grade 4 = Less than 30% loss of cancer cells
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Response to neoadjuvant/primary systemic therapy in the axilla	
Number of LNs with metastases and sign of response to therapy	
Number of LNs without metastases and with sign of response to therapy	

Form filled in by: Name: _____ <div style="text-align: center; margin-top: 5px;">(CAPITAL LETTERS)</div> Sign.: _____	Date ddmmyy
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