

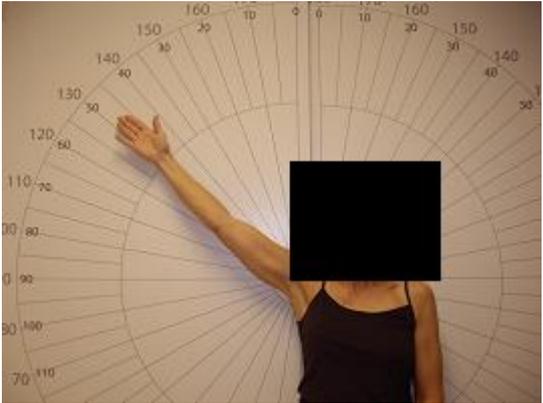
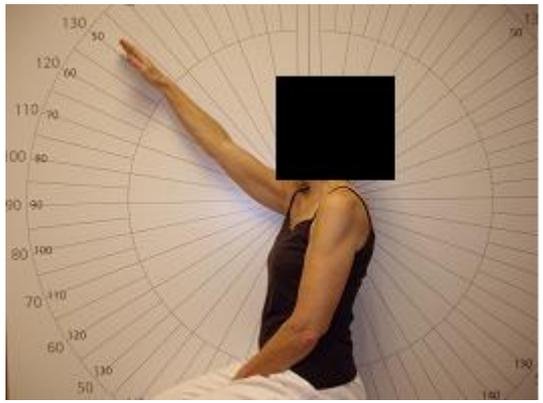
# DBCg – SKAGEN TRIAL 1

DANISH BREAST CANCER COOPERATIVE GROUP

# COSMETIC SCORING FORM

0-10 years

Name – Patient ID		Hospital					
<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> -              <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> -              <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> -              <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> </div> <div style="display: flex; justify-content: space-around; font-size: small; margin-top: 2px;"> <span>Day</span> <span>Month</span> <span>Year</span> <span>No.</span> </div>							
Start year	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	Years after RT (0 is before RT)					
		0	1	2	3	4	5
		Day, month					
Oncoplastic surgery before RT	0 = No 1 = Yes						
Weight (kg)							
Height (cm)							
Tobacco anamnesis	0 = Never smoker, 1 = Current smoker, 2 = Previous smoker						
Started smoking year	1)						
Stopped smoking year							
Cigarettes per day (average over the years)	2)						
<b>Specialist evaluated morbidity</b>							
Breast reconstruction after mastectomy	0 = No 1 = Yes 3)						
Dyspigmentation, Breast / Chest wall	4)						
Dyspigmentation, Boost	4) 4 = Boost not given						
Telangiectasiae, Breast / Chest wall	0 = None, 1 = <1/cm <sup>2</sup> , 2 = 1-4/cm <sup>2</sup> 3 = >4/cm <sup>2</sup>						
Telangiectasiae, Boost	0 = None, 1 = <1/cm <sup>2</sup> , 2 = 1-4/cm <sup>2</sup> , 3 = >4/cm <sup>2</sup> , 4 = Boost not given						
Fibrosis, Breast / Chest wall	0 = None, 1 = Slightly palpable, 2 = Palpable 3 = Clearly palpable, retraction of skin and fixation						
Fibrosis, Boost	0 = None, 1 = Slightly palpable, 2 = Palpable, 3 = Clearly palpable, retraction of skin and fixation, 4 = Boost not given						
Scar	5)						
Edema, Breast / Chest wall	0 = None, 1 = Asymptomatic, 2 = Symptomatic, 3 = Secondary dysfunction						
Total cosmetic assessment (subjective) (After breast conserving surgery only.)	6)						
Patient wishes to leave the RT protocol	0 = No 1 = Yes						
Other e.g. postoperative seromen / haematoma or morbidity of heart / lung / thorax wall:							
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) If yes, do not fill out: Dyspigmentation, Telangiectasiae, Fibrosis, Edema, Scar, Total cosmetic assessment (subjective)							
4) 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. (Not applicable after mastectomy.) 3 = Dramatic difference in color between irradiated and non-irradiated breast, either on the papilla and/or on skin.							
5) 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.							
6) 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.							

Patient ID	<table style="margin:auto; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> <tr> <td style="text-align:center; font-size: 8px;">Day</td> <td></td> <td style="text-align:center; font-size: 8px;">Month</td> <td></td> <td style="text-align:center; font-size: 8px;">Year</td> <td></td> <td colspan="6"></td> </tr> </table>													Day		Month		Year														
Day		Month		Year																												
Years after RT (0 is before RT)		0	1	2	3	4	5	10																								
<b>Measurement of arm lymphedema</b>																																
Does the patient have an arm sleeve?	0 = No 1 = Yes																															
If yes, how often is the arm sleeve used?	5)																															
Has the sleeve been in use within the last 24 hours?	0 = No 1 = Yes																															
Does the patient have a compression glove?	0 = No 1 = Yes																															
If yes, how often is the compression glove used?	5)																															
Measurement of arm (mm), 15 cm proximal of the olecranon 6)	Treated side																															
	Opposite side																															
Measurement of arm (mm), 10 cm distal of the olecranon 6)	Treated side																															
	Opposite side																															
Range of shoulder motion (degrees), Abduction 7)	Treated side																															
	Opposite side																															
Range of shoulder motion (degrees), Flexion 7)	Treated side																															
	Opposite side																															
Has the patient had a skin infection in the breast / arm on the treated side (before RT / since last follow up)?	0 = No 1 = Yes																															
5) 4 = Every day or almost every day. 3 = Every week. 2 = 1-3 times per month. 1 = More seldom.																																
6) <b>Definition of edema:</b> The absolute measurements on the arms are reported (thus no subtraction is done in the reporting of data).																																
7) <b>Definition of ROM:</b> Range of shoulder motion is measured at abduction and flexion bilaterally. An imaginary line in the middle of the upper arm is projected on the circular scale, and the number of degrees is reported. Absolute values are reported separately for each arm.																																
																																
Abduction						Flexion																										