

DBCG – PROTON TRIAL

DANISH BREAST CANCER COOPERATIVE GROUP

COMORBIDITY FORM

Name – patient ID <div style="display: flex; justify-content: space-between; margin-top: 10px;"> - - - </div> <div style="display: flex; justify-content: space-between; margin-top: 5px; font-size: small;"> Day Month year No. </div>	Hospital, department
---	----------------------

Comorbidity	ICD10	Yes	No	Weight
Myocardial infarction	I21;I22;I23			1
Congestive heart failure	I50;I11.0;I13.0;I13.2			1
Peripheral vascular disease	I70; I71; I72; I73; I74; I77			1
Cerebrovascular disease	I60-I69; G45; G46			1
Dementia	F00-F03; F05.1; G30			1
Chronic pulmonary disease	J40-J47; J60-J67; J68.4; J70.1;			1
Connective tissue disease	M05; M06; M08; M09;M30;M31;			1
Ulcer disease	K22.1; K25-K28			1
Mild liver disease	B18; K70.0-K70.3; K70.9; K71; K73; K74;			1
Diabetes type1 or type2	E10.0, E10.1; E10.9			1
Hemiplegia	G81; G82			2
Moderate to severe renal disease	I12; I13; N00-N05; N07; N11; N14; N17-N19;			2
Diabetes with end organ damage type1 or type2	E10.2-E10.8			2
Any tumor	C00-C43; C45-C75			2
Leukemia	C91-C95			2
Lymphoma	C81-C85; C88; C90; C96			2
Moderate to severe liver disease	B15.0; B16.0; B16.2; B19.0; K70.4; K72;			3
Metastatic solid tumor	C76-C80			6
AIDS	B21-B24			6
Total (sum of the weights)				<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px;"></div> </div>

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