

## SUPPLEMENTARY FILE 2. Required data fields for patients with breast cancer

<b>Disease characteristics</b>	
Diagnosis (what tests were performed pre-operatively, please tick all that apply)	<ul style="list-style-type: none"> <li>&gt; USS (No-not available, No-not indicated, No-indicated and facilities available, but patient not able to pay, Yes, Unknown)</li> <li>&gt; CT (No-not available, No-not indicated, No-indicated and facilities available, but patient not able to pay, Yes, Unknown)</li> <li>&gt; MRI (No-not available, No-not indicated, No-indicated and facilities available, but patient not able to pay, Yes, Unknown)</li> <li>&gt; Mammogram (No-not available, No-not indicated, No-indicated and facilities available, but patient not able to pay, Yes, Unknown)</li> <li>&gt; Fine needle aspiration (No-not available, No-not indicated, No-indicated and facilities available, but patient not able to pay, Yes, Unknown)</li> <li>&gt; Core biopsy (No-not available, No-not indicated, No-indicated and facilities available, but patient not able to pay, Yes, Unknown)</li> <li>&gt; Open/excision biopsy (No-not available, No-not indicated, No-indicated and facilities available, but patient not able to pay, Yes, Unknown)</li> <li>&gt; ER, PR, Ki-67, HER2 status assessed (No-not available in this hospital, No-but available in this hospital, Yes-NEGATIVE, Yes-POSITIVE, Unknown)</li> </ul>
Stage (dropdown box)	TNM classification / Essential TNM classification Unknown
Neoadjuvant chemotherapy	<ul style="list-style-type: none"> <li>No, patient does not need it</li> <li>No, patient needs it, but not available</li> <li>No, patient needs it, facilities available, but patient not able to pay</li> <li>No, planned but not given</li> <li>Yes, NO anthracycline, NO taxane</li> <li>Yes, anthracycline, NO taxane</li> <li>Yes, anthracycline AND taxane</li> <li>Yes, regimen unknown</li> <li>Unknown</li> </ul>
Neoadjuvant radiotherapy	<ul style="list-style-type: none"> <li>No, patient does not need it</li> <li>No, patient needs it, but not available</li> <li>No, patient needs it, facilities available, but patient not able to pay</li> <li>No, planned but not given</li> <li>Yes (Cobalt)</li> <li>Yes (Linear accelerator)</li> <li>Yes (type unknown)</li> <li>Unknown</li> </ul>
Other neoadjuvant treatment (tick all that apply)	<ul style="list-style-type: none"> <li>Hormone therapy</li> <li>Biological therapy (HER2 inhibitor)</li> <li>Oophrectomy</li> <li>Other (free text)</li> </ul>
<b>Operation</b>	
Primary operation	<ul style="list-style-type: none"> <li>Mastectomy</li> <li>Partial mastectomy / wide local excision / lumpectomy</li> <li>Open biopsy of breast</li> <li>Other operations on breast</li> </ul>
Sentinel lymph node biopsy	<ul style="list-style-type: none"> <li>No, not available in this hospital</li> <li>No, but available in this hospital</li> <li>Yes, single technique</li> <li>Yes, dual technique</li> <li>Unknown</li> </ul>
Axillary lymph node biopsy	No, Yes, Unknown
Resection margins checked at time of surgery	<ul style="list-style-type: none"> <li>No, not available in this hospital</li> <li>No, but available in this hospital</li> <li>Yes, by x-ray</li> <li>Yes, by frozen section</li> </ul>

	Unknown
Reconstruction	No, not available in this hospital No, but available in this hospital Yes, immediate – prosthesis Yes, immediate – flap Yes, planned at later stage
<b>Pathology</b>	
Histology	Invasive ductal carcinoma Invasive lobular carcinoma Ductal carcinoma in-situ (DCIS) Other CANCER (specify) Other BENIGN (specify) Unknown, not available in this hospital Unknown, but available in this hospital
Receptor status	ER, PR, Ki67, HER2 No-not available in this hospital, No-but available in this hospital, Yes-NEGATIVE, Yes-POSITIVE, Unknown
Resection margins	< 1 mm / tumour on inked margin 1-5 mm (NO tumour on inked margin) >5 mm Margins confirmed clear, but no distance given Unknown, not available in this hospital Unknown, but available in this hospital
<b>Outcomes and Adjuvant treatment</b>	
Post-operative seroma	No Yes, no intervention/aspiration only (CD I) Yes, antibiotic treatment only (CD II) Yes, intervention required (CD III) Yes, critical care admission &/- intervention (CD IV) Yes, resulting in death (CD V) Unknown
Planned adjuvant treatment (tick all that apply)	No, patient does not need it No, patient needs it, but not available No, patient needs it, facilities available, patient unable to pay Yes, in this hospital Yes, in another hospital in this country Yes, in another hospital in a different country  Chemotherapy Radiotherapy Biological therapy (HER2 inhibitor) Hormone therapy Other (free text)