



**Figure S3** Questions about health system related factors (gathered while questioning patients)

17. Which doctor you saw first due to haematologic malignancy symptoms? (if patient chose 2, 3, 4 or answer 5 go to question 19)

1. General practitioner
2. Emergency department doctor
3. Specialist, but not haematologist \_\_\_\_\_
4. Haematologist
5. Other \_\_\_\_\_

18. Which specialist general practitioner referred you in the first place?

1. Haematologist
2. A few specialists – haematologist and another specialty doctor \_\_\_\_\_
3. Non haematologist \_\_\_\_\_

19. Diagnosis suspected after first medical consultation?

1. Oncologic diagnosis
2. Other, non-malignant disease (for example infection)
3. Symptoms administered to other disease diagnosed previously
4. Other \_\_\_\_\_

20. Did the first doctor you consulted prescribe medicine for your condition?

YES:  NO:

1. Symptomatic treatment
2. Treatment for another, non-malignant, disease
3. Other \_\_\_\_\_

21. How many specialists you visited before correct diagnosis?

**Figure S4** Data gathered from medical records

1. When was haematologic malignancy diagnosis confirmed? \_\_\_\_\_

2. When was haematologic malignancy treatment started? \_\_\_\_\_

3. Disease type:  LYMPHOMA:  MULTIPLE MYELOMA:

1. Hodgkin:
  - Ann-Arbor stage \_\_\_\_\_
2. Non-Hodgkin: aggressive or indolent (underline):
  - Ann-Arbor stage \_\_\_\_\_
  - Exact type \_\_\_\_\_
1. ISS stage \_\_\_\_\_
2. Durie-Salmon stage \_\_\_\_\_

4. Multiple myeloma complications at the time of diagnosis:

YES:  NO

1. Hypercalcemia – serum calcium >0,25mmol/l (>1mg/dl) over upper normal value limit or >2,75mmol/l (>11mg/dl)
2. Kidney insufficiency – creatinine clearance <40ml per min, serum creatinine >177mikromol/l (>2mg/dl)
3. Bone lesions – one or more osteolytic bone lesion in rentgenography, CT, PET-CT
4. Anemia – haemoglobin >20 g/l lower than normal value or < 100g/l
5. Infectious diseases – 2 or more bacterial infections in 12 months

5. Gender:  Male  Female

6. Age at the time of diagnosis: \_\_\_\_\_

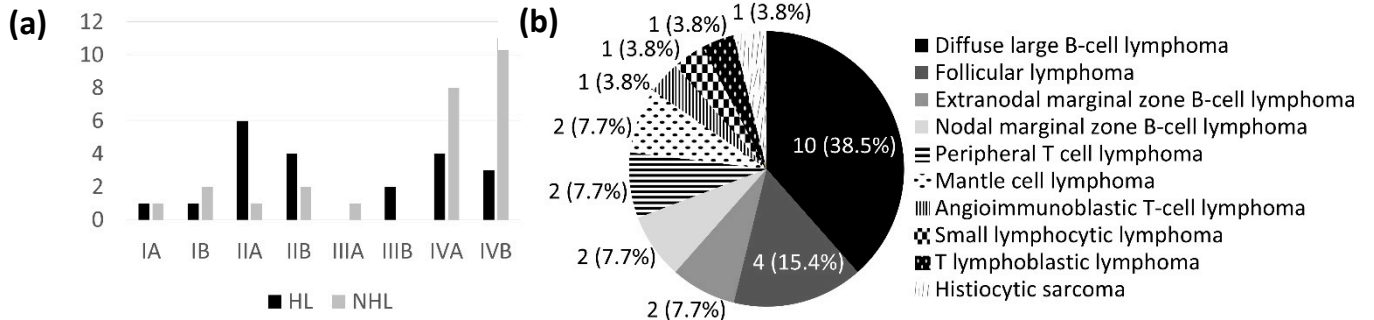
7. Place of residence:  City  Smaller village

1. The biggest cities in Lithuania – Vilnius, Kaunas
2. Other cities \_\_\_\_\_

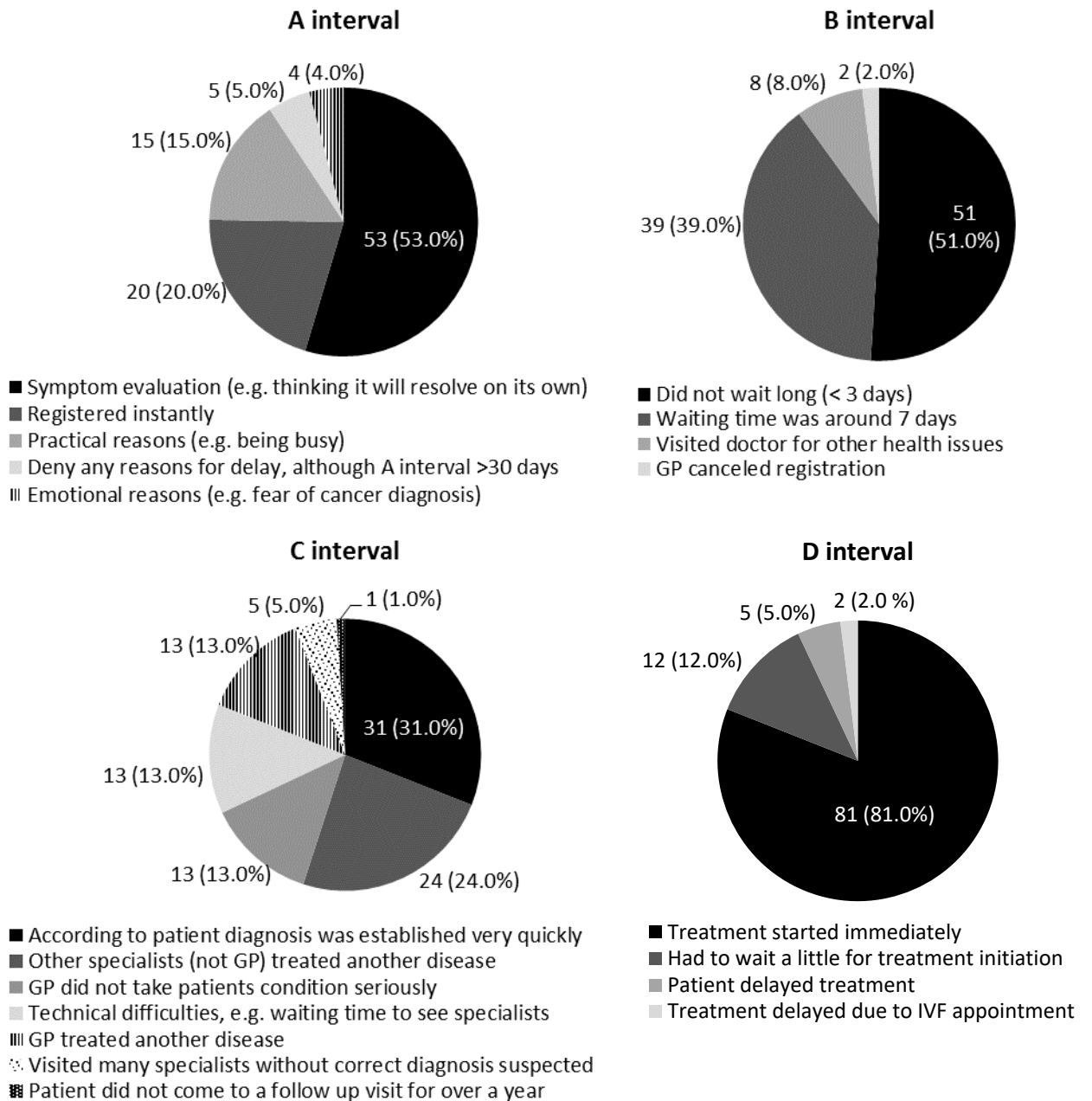
8. CIRS value: \_\_\_\_\_

**Figure S5** Lymphomas distribution according to disease stage (a) and NHL type (b).

HL – Hodgkin lymphoma; NHL – non Hodgkin lymphoma



**Figure S6** The most important reasons for delay in A, B, C, D intervals according to participants



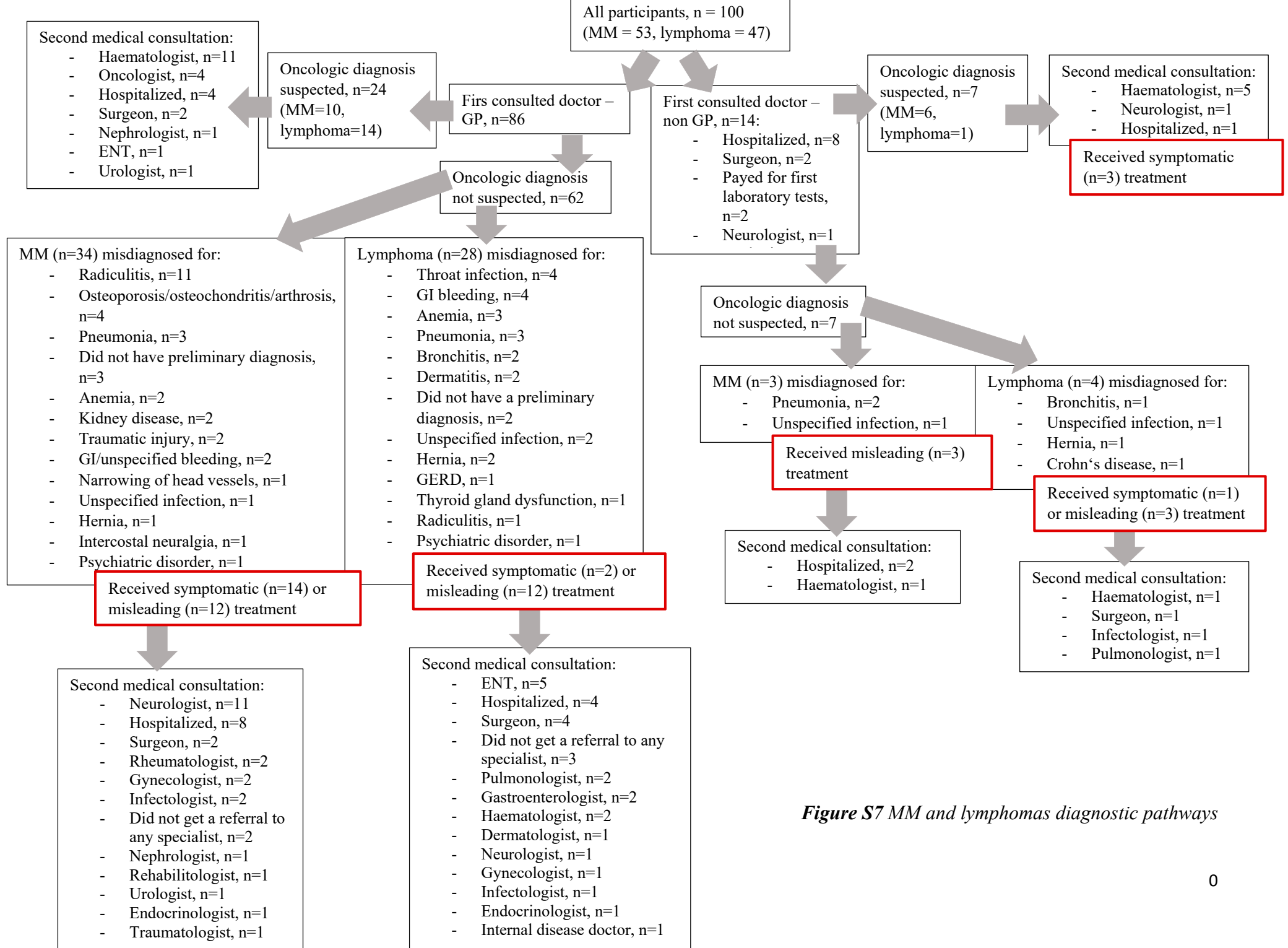


Figure S7 MM and lymphomas diagnostic pathways

**Figure S8** Number of patients for 1 PCP (primary care physician – including GPs and general pediatricians), in Lithuanian counties and biggest cities

