

## Appendix

**Table 1: Ongoing Research Collaborative Registries to collect data of COVID-19 impact on hemato-oncological patients**

Project	Speciality	Goal	Country	Registry or website url
CC19	Oncology	To collect information on patients who have COVID-19, with the intent of using and disseminating information to clinicians and improve outcomes	International	<a href="https://ccc19.org/">https://ccc19.org/</a>
UK Coronavirus cancer-monitoring project	Oncology	To collect information about prevalence of COVID-19 with associated anonymized data about site of disease and mortality	UK	<a href="https://ukcoronaviruscancermonitoring.com/">https://ukcoronaviruscancermonitoring.com/</a>
TERAVOLT	Oncology	A global consortium designed to gather information on patients with thoracic cancer who have COVID-19, regardless of therapies administered	International	N/A; participants join by e-mail
ASH RC COVID-19 Registry for Hematologic Malignancy	Hematology - Oncology	To capture data on people who test positive for COVID-19 and have been or are currently being treated for hematological malignancies and report near real-time observational data; summaries will be reported for	International	<a href="https://www.ashresearchcollaborative.org/covid-19-registry">https://www.ashresearchcollaborative.org/covid-19-registry</a>

		clinicians		
<b>ASCO Registry</b>	Oncology	To capture COVID-19 treatments and outcomes as well as cancer treatment and outcomes, including long-term effects for those who recover from COVID-19	USA	<a href="https://www.asco.org/ascocoronavirus-information/coronavirus-registry">https://www.asco.org/ascocoronavirus-information/coronavirus-registry</a>
<b>ESMO CoCare Registry</b>	Oncology	To quickly gather data and information from healthcare professionals about treatment approaches specifically focusing on the impact of SARS-CoV-2 on cancer patients	International	<a href="https://www.esmo.org/covid-19-and-cancer/collaborating-on-registries-studies-and-surveys/esmo-cocare-registry">https://www.esmo.org/covid-19-and-cancer/collaborating-on-registries-studies-and-surveys/esmo-cocare-registry</a>

ASH RC, American Society of Hematology Research Collaborative; ASCO, ASCO Survey on COVID-19 in Oncology

## Survey

Management of cancer patients treated with immune-checkpoints inhibitors (CP-ICI) during COVID-19 pandemic (Section 1: from question number 1 to question number 8; Section 2: from question number 9 to question number 20; Section 3: from question number 21 to question number 25)

Thank you so much for taking the time to fill up this short questionnaire. Your effort will be helpful to reach more information about ICIs treatment during COVID-19 pandemic and also to guide physicians working in other countries who will soon deal with this health emergency.

Date (dd-mm-yyyy):

1. How do you triage your (CP-ICI) patients for COV-SARS2?

- By telephone the day before the appointment
- Outside the hospital the same day of the clinic appointment
- By telephone the day before the appointment and outside the clinic the day of the appointment

2. For whom CP-ICI patients do you preferentially use tele medicine?
- Patients in follow-up after finishing ICI adjuvant treatment
  - Patients in follow-up who achieve complete response
  - Both
  - None of the above, I am not using telemedicine
3. How do you manage the new patients with cancer who need to start ICIs for metastatic disease?
- Delay ICI start for COVID-19 in all patients
  - Triage screening for COVID-19 risk factors
  - Both
  - None of the above
4. How do you manage the new patients with cancer who need to start ICIs for adjuvant purpose?
- Delay ICI start for COVID-19 in all patients
  - Triage screening for COVID-19 risk factors
  - Both
  - None of the above
5. Do you have any CP-ICI who tested positive to SARS-COV2?
- Yes
  - No
6. If yes, how many?
- < 10
  - 10-20
  - 20-50
  - 50-100
7. If yes, the most frequent CP-ICI SARS-COV2 positive are affected by?
- Uro-genital cancers
  - Thoracic cancers
  - Melanoma
  - Head and neck cancers
  - Other, please specify.....
8. How do you manage CP-ICI showing suspicious symptoms for COVID-19? (more than 1 option allowed)
- Order the SARS-COV2 test and continue with the ICIs avoiding delays
  - Suspend the ICIs while waiting for the test results
  - Ask for Rx thorax even in the absence of severe respiratory symptoms

- Ask for thorax CT scan even in the absence of severe respiratory symptoms
- Ask for blood test including: CBC, lactate dehydrogenase, high-sensitivity C-reactive protein, interleukin-6, D-dimer
9. Do you have any preference in the schedule of ICIs choice for the treatment of CP:
- yes, I prefer the schedule with the shorter interval
- yes, I prefer the schedule with the longer interval
- no, the schedule interval is not a criteria for ICIs choice in my clinical practice
10. Do you have currently (during COVID-19 pandemic) any preference in the schedule of ICIs for the treatment of CP:
- yes, I prefer the schedule with the shorter interval
- yes, I prefer the schedule with the longer interval
- no, the schedule interval is not a criteria for ICIs choice in my currently clinical practice
11. Have you modified the dose of steroids you give in case of ICIs adverse events?
- Yes, I have reduced the dose
- No, I continue to follow the recommendation for the AE management
12. Has the COVID-19 pandemic changed your treatment choice for CP-ICI in case of alternative treatment like chemotherapy?
- Yes
- No
13. Has the COVID-19 pandemic changed your treatment choice for CP-ICI in case of alternative treatment like target therapy?
- Yes
- No
14. Are the CP-ICI preferentially seen in COVID-19 clear institutions?
- Yes
- No
15. Do you use GCSF in case of CP-ICIs with not febrile neutropenia?
- Yes
- No
16. Has this decision been changed by the COVID-19 pandemic?
- Yes
- No
17. Have the CP-ICI being managed in expert centers for immunotherapy?

Yes

No

18. Has this decision been changed by the COVID-19 pandemic?

Yes

No

19. Do you prefer to delay ICIs start in lung cancer patients because of potential lung toxicity considering the high lung tropism of SARS-COV2 virus and its risk of ARDS?

Yes

No

20. In your Institution has surgery for CP been delayed because of the COVID-19 pandemic?

Yes

No

21. In which Institution and City do you practice?

.....

22. What is your primary place of work

Cancer Center (cancer patients only)

General hospital (cancer patients and other specialties)

Private outpatient clinic

University Hospital

Other, please specify.....

23. What is your age range?

25-35

35-45

Other, please specify.....

24. What is your professional position?

Trainee

Specialist

Other, please specify.....

25. In your daily practice do you see most CP-ICIs affected by?

Uro-genital cancers

Thoracic cancers

Melanoma

Head and neck cancers

Other, please specify.....

