

**SDC 2: Patient-reported questionnaire for stacked PAP and DIEP patients**

**In the past 2 weeks with your donor site in mind,**

	<i>Choose one:</i>
Which has caused more difficulty in doing everyday activities?	Thigh OR Abdomen
Which has caused more discomfort overall?	Thigh OR Abdomen
Which has caused more tightness?	Thigh OR Abdomen
Which has had a greater negative impact on your sexual life?	Thigh OR Abdomen
Which has had a greater negative impact on your ability to work?	Thigh OR Abdomen

**In the past 2 weeks, how satisfied or dissatisfied have you been with:**

	<i>Choose one:</i>
Which has caused more dissatisfaction in how you look in clothing?	Thigh OR Abdomen
Which has caused more dissatisfaction in how you look without clothing?	Thigh OR Abdomen
Which donor site are you more dissatisfied with in terms of the appearance of the scar?	Thigh OR Abdomen
Which donor site are you more dissatisfied with in terms of how the site feels now compared to before your surgery?	Thigh OR Abdomen
Which donor site are you more dissatisfied with in terms of how the site looks now compared to before your surgery?	Thigh OR Abdomen