

STEP 3 ACCOMPANIMENT FEEDBACK - PERSON AFFECTED BY CANCER

Following your meeting with the accompanying patient (AP), we would like to know what topics were discussed.

IMPORTANT. If you are the relative, caregiver or legal guardian, and you are helping the patient to complete the questionnaire, please ensure that you answer from the patient's point of view.

How many times did you have contact with the AP? _____

Were all these contacts made with the same AP?

- Yes
 No
 Don't know

If no, how many APs did you have contact with? _____

What topics did you discuss with the accompanying patient? (Check all that apply)

ORGANIZATIONAL ASPECTS

- Your role as an accompanying patient
 The role of different healthcare professionals
 The role of external and internal organizations
 The care trajectory
 Rights as a patient (e.g. refusing treatment, asking questions)
 Where and how to get to medical appointments
 Financial support for patients and help with transport
 The PAROLE-Onco research project
 Other

If you checked "other", please specify which: _____

CLINICAL ASPECTS

- Announcement of cancer diagnosis / genetic predisposition by the doctor
 Cancer
 Oncogenetics
 Genetic test
 Therapeutic options in cancer
 Risk reduction in mutation carriers
 Surgical and reconstructive options
 Breast prostheses
 Hormonal issues
 Reproductive issues
 Impact on physical appearance and self-esteem
 Decision-making processes

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- Urinary and erectile dysfunction issues
- Fatigue following treatment
- Pain and discomfort after surgery
- Pain and discomfort after treatment
- Possible emotions
- Stress and worry management
- Other

If you checked "other", please specify which: _____

CONSEQUENCES ON DAILY AND FAMILY LIFE

- On children
- On married life
- On sex life
- On finances
- On spiritual life
- On professional life
- On insurance
- On how to tell a diagnosis to loved ones
- On social perception (the reactions of others)
- On returning to work
- On returning to daily life
- Strategies for living through treatment in the best possible conditions
- How to regain control over the disease
- Other

If you checked "other", please specify which: _____

Do you have any comments you would like to add/share? _____
