

Supplementary Table 1. Baseline characteristics and KAP scores

Variables	N (%)	Knowledge score		Attitudes score	
		Mean ± SD	P	Mean ± SD	P
<b>Total</b>	246	12.46 ± 6.21		30.00 ± 2.58	
<b>Age</b>			0.004		0.020
<50 years	107 (43.50)	13.77 ± 6.14		29.56 ± 2.55	
≥50 years	139 (56.50)	11.45 ± 6.10		30.33 ± 2.57	
<b>Residence</b>			0.008		0.021
Rural	136 (55.28)	11.52 ± 6.46		30.34 ± 2.75	
Urban	110 (44.72)	13.62 ± 5.72		29.57 ± 2.31	
<b>Education</b>			<0.001		0.024
Middle school and below	142 (57.72)	11.53 ± 6.40		30.30 ± 2.69	
High school/Technical secondary school	53 (21.54)	11.45 ± 5.13		29.98 ± 2.45	
Junior college and above	51 (20.73)	16.10 ± 5.42		29.16 ± 2.27	

Marital status			0.282	0.145
Married	213	12.29 ±	29.90 ±	
	(86.59)	6.21	2.63	
Unmarried/Divorced/Widowed		13.55 ±	30.61 ±	
	33 (13.41)	6.20	2.24	
Smoking			0.600	0.656
Yes		14.33 ±	29.33 ±	
	3 (1.22)	4.04	2.08	
No	243	12.44 ±	30.00 ±	
	(98.78)	6.24	2.59	
Drinking			0.632	0.389
Yes		11.93 ±	30.39 ±	
	28 (11.38)	4.86	1.83	
No	218	12.53 ±	29.94 ±	
	(88.62)	6.37	2.67	
Childbirth			0.918	0.797
Yes	222	12.45 ±	29.98 ±	
	(90.24)	6.20	2.61	
No		12.58 ±	30.13 ±	
	24 (9.76)	6.45	2.36	
Menopause			0.779	0.537
Yes	130	12.35 ±	30.09 ±	

	(52.85)	6.59	2.68
No	116	12.58 ±	29.89 ±
	(47.15)	5.79	2.48
Duration of breast cancer		0.145	0.317
<3 years	207	12.71 ±	30.07 ±
	(84.15)	6.06	2.48
≥3 years		11.13 ±	29.62 ±
	39 (15.85)	6.91	3.08
Duration of chemotherapy for breast cancer		0.851	0.825
<6 months	190	12.50 ±	30.02 ±
	(77.24)	6.13	2.55
≥6 months		12.32 ±	29.93 ±
	56 (22.76)	6.57	2.72
Chemotherapy-related neutropenia or febrile neutropenia		<0.001	0.099
Yes		13.55 ±	30.29 ±
	92 (37.40)	5.18	2.33
No		13.65 ±	29.56 ±
	98 (39.84)	6.54	2.56
Unclear	56 (22.76)	8.57 ± 5.69	30.27 ±

			2.93	
Chemotherapy drugs have been			0.015	0.388
adjusted				
Yes		17.38 ±	31.38 ±	
	8 (8.70)	4.69	3.38	
No		13.75 ±	30.22 ±	
	65 (70.65)	4.73	2.12	
Unclear		11.26 ±	30.11 ±	
	19 (20.65)	5.93	2.56	
Chemotherapy has been delayed			0.210	0.174
Yes		13.38 ±	30.42 ±	
	48 (52.17)	4.10	2.05	
No		14.39 ±	29.86 ±	
	36 (39.13)	6.44	2.64	
Unclear		10.88 ±	31.50 ±	
	8 (8.70)	4.02	2.20	

	N (%)
1. Do you know about neutropenia, a common side effect after chemotherapy that increases the risk of infection?	56 (22.76)
2. Do you know that NE is a type of white blood cell?	122 (49.59)
3. Do you know that neutropenia can be detected by routine blood tests?	163 (66.26)
4. Do you know that an absolute NE count of less than 2.0x10 <sup>9</sup> /L on a routine blood report means neutropenia?	50 (20.33)
5. Do you know that high chemotherapy doses and the combination of different chemotherapy drugs can cause neutropenia?	44 (17.89)
6. Do you know that advanced age and underlying diseases (e.g., hypertension, coronary heart disease) increase the risk of neutropenia?	34 (13.82)
7. Do you know that neutropenia often causes fever?	59 (23.98)
8. Do you know that your temperature needs to be measured routinely for 7-14 days after chemotherapy?	121 (49.19)
9. Do you understand that the risk of FN needs to be reassessed before the beginning of each chemotherapy cycle?	55 (22.36)
10. Do you know that severe neutropenia may require adjustment of chemotherapy drugs or discontinuation of medication?	50 (20.33)
11. Do you know what drugs are needed to treat neutropenia?	99 (40.24)
12. Do you know about the primary prevention measures for FN?	25 (10.16)
13. Do you know about the need for prophylactic administration of leukocyte-raising agents in chemotherapy patients at high risk of FN?	99 (40.24)

Supplementary Table 3. Attitude toward chemotherapy-related neutropenia and febrile neutropenia

	Strongly agree	Agree	No matter	Disagree	Strongly disagree
1. I would be very anxious if neutropenia was screened.	33 (13.41)	143 (58.13)	45 (18.29)	22 (8.94)	3 (1.22)
2. I think regular check-ups should be performed during chemotherapy.	125 (50.81)	118 (47.97)	2 (0.81)	0 (0)	1 (0.41)
3. I think that I should seek medical attention as soon as I develop a fever.	108 (43.9)	130 (52.85)	5 (2.03)	2 (0.81)	1 (0.41)
4. I think that the high cost of treatment and prevention of neutropenia places a financial burden on me.	44 (17.89)	102 (41.46)	71 (28.86)	26 (10.57)	3 (1.22)
5. I think it is necessary to follow medical advice to adjust medication and treat actively when neutropenia or fever occurs.	139 (56.5)	105 (42.68)	2 (0.81)	0 (0)	0 (0)
6. I think I need to be proactive in learning about chemotherapy-related neutropenia and febrile neutropenia.	142 (57.72)	95 (38.62)	8 (3.25)	1 (0.41)	0 (0)
7. I think it is important to eat properly, sleep regularly, and keep a good mood in daily life.	160 (65.04)	85 (34.55)	1 (0.41)	0 (0)	0 (0)

Supplementary Table 4. Practice toward chemotherapy-related neutropenia and febrile neutropenia			
	Informed	Not informed	Unknown
1. Has your attending physician informed you about if the chemotherapy protocol you were prescribed was a high-risk protocol for febrile neutropenia?	113 (45.93)	86 (34.96)	47 (19.11)
2. Has your attending physician informed you that the high-risk chemotherapy protocol requires the prophylactic administration of leukocyte-raising agents?	196 (79.67)	25 (10.16)	25 (10.16)
3.Has your attending physician informed you of the need for prophylactic administration of leukocyte-raising agents for subsequent chemotherapy if you have had febrile neutropenia in the past?	195 (79.27)	18 (7.32)	33 (13.41)
4.Has your attending physician informed you that the risk of febrile neutropenia should be assessed at each chemotherapy cycle?	90 (36.59)	78 (31.71)	78 (31.71)