

Dear friends:

We sincerely invite you to participate in our research project. This study aims to understand the knowledge, attitude, and practice toward chemotherapy-related neutropenia and febrile neutropenia among breast cancer patients, to serve as the basis for developing scientific intervention strategies, which may help many others in the future to improve their health conditions. Your participation in this study is voluntary, and the research has been approved by the Ethics Review Committee. If you agree to participate, please read the following instructions:

1. Please complete the questionnaire. There are no right or wrong answers; you only need to provide responses based on your actual experiences. If you have any questions during the process, feel free to reach out to us, and please submit the completed questionnaire in a timely manner.
2. This study is a simple questionnaire survey and will not cause any harm to your physical or psychological well-being. However, it may involve some personal information such as your gender and age. Please rest assured that we will strictly maintain confidentiality and will not disclose your information.
3. As a participant, you can always stay informed about the information and progress related to this study. If you decide to withdraw from the study, please let us know, and your data will not be included in the research results.

Finally, we sincerely thank you for taking the time to support our scientific research amid your busy schedule!

☐ I have been informed and agreed to the use of the collected data for scientific research.

Informed Consent Signature:

Date of participation: \_\_\_\_Year\_\_\_\_Month\_\_\_\_Day

Neutrophils are part of your blood, and one of the most important types of white blood cells. White blood cells in the peripheral blood of the human body are divided into neutrophils, lymphocytes, monocytes, eosinophils, and basophils. Neutrophils make up the largest proportion, ranging from 50% to 70%. The normal range for the absolute neutrophil count is  $2-7 \times 10^9/L$ .

Neutropenia is a major adverse event caused by myelosuppressive chemotherapy drugs and represents the most severe hematologic toxicity of myelosuppressive chemotherapy. Febrile neutropenia is the most common clinical complication and may lead to a reduction in chemotherapy drug dosage or treatment delays, thereby reducing clinical efficacy. It can also lead to severe infections and other complications, or even death.

Part I Basic Information

1.Your age: _____ years	
2.Your residence:	a.Rural b.Urban
3.Your education:	a.Primary school and below b.Middle school c.High school/Technical secondary school d.Junior college e.Bachelor degree and above
4.Your marital status:	a.Married b.Unmarried c.Divorced d.Widowed
5.Do you smoke?	a.Yes b.No
6.Do you drink alcohol?	a.Yes b.No
7.Do you have a childbirth history (children)?	a.Yes

	b.No
8.Are you menopausal?	a.Yes b.No
9.How long has it been since you were diagnosed with breast cancer?	a. 3 years b.3-5 years c.6-10 years D.>10 years
10.How long have you been on chemotherapy since your breast cancer diagnosis?	a.<6 months b.6-12 months c.1-2 years D.> 2 years
11.Have you ever suffered from chemotherapy-associated neutropenia or febrile neutropenia?	a.Yes b.No c.Unclear
12.If yes, were your chemotherapy drugs adjusted?	a.Yes b.No c.Unclear
13.If yes, has your chemotherapy been delayed??	a.Yes b.No c.Unclear
Part II Knowledge of chemotherapy-related neutropenia	
1. Do you know about neutropenia, a common side effect after chemotherapy that increases the	a.Unders tood    b.Partially understood    c.Not understood

risk of infection?			
2. Do you know that neutrophils is a type of white blood cell?	a.Unders tood	b.Partially understood	c.Not understood
3. Do you know that neutropenia can be detected by routine blood tests?	a.Unders tood	b.Partially understood	c.Not understood
4. Do you know that an absolute neutrophils count of less than 2.0x10 <sup>9</sup> /L on a routine blood report means neutropenia?	a.Unders tood	b.Partially understood	c.Not understood
5. Do you know that high chemotherapy doses and the combination of different chemotherapy drugs can cause neutropenia?	a.Unders tood	b.Partially understood	c.Not understood
6. Do you know that advanced age and underlying diseases (e.g., hypertension, coronary heart disease) increase the risk of neutropenia?	a.Unders tood	b.Partially understood	c.Not understood
7. Do you know that neutropenia often causes fever?	a.Unders tood	b.Partially understood	c.Not understood
8. Do you know that your temperature needs to be measured routinely for 7-14 days after chemotherapy?	a.Unders tood	b.Partially understood	c.Not understood
9. Do you understand that the risk of febrile neutropenia needs to be reassessed before the beginning of each chemotherapy cycle?	a.Unders tood	b.Partially understood	c.Not understood
10. Do you know that severe neutropenia may require adjustment of chemotherapy drugs or discontinuation of medication?	a.Unders tood	b.Partially understood	c.Not understood

11. Do you know what drugs are needed to treat neutropenia?	a.Unders tood	b.Partially understood	c.Not understood
12. Do you know about the primary prevention measures for febrile neutropenia?	a.Unders tood	b.Partially understood	c.Not understood
13. Do you know about the need for prophylactic administration of leukocyte-raising agents in chemotherapy patients at high risk of febrile neutropenia?	a.Unders tood	b.Partially understood	c.Not understood

Part III Attitude to chemotherapy-related neutropenia

1. I would be very anxious if neutropenia was screened.	a.Strongly agree	b.Agre e	c.No matter	d.Disagree	e.Strongly disagree
2. I think regular check-ups should be performed during chemotherapy.	a.Strongly agree	b.Agre e	c.No matter	d.Disagree	e.Strongly disagree
3. I think that I should seek medical attention as soon as I develop a fever.	a.Strongly agree	b.Agre e	c.No matter	d.Disagree	e.Strongly disagree
4. I think that the high cost of treatment and prevention of neutropenia places a financial burden on me.	a.Strongly agree	b.Agre e	c.No matter	d.Disagree	e.Strongly disagree
5. I think it is necessary to follow medical advice for medication adjustment and active treatment if neutropenia or fever occurs.	a.Strongly agree	b.Agre e	c.No matter	d.Disagree	e.Strongly disagree
6. I think I need to be proactive in learning about chemotherapy-related neutropenia and febrile neutropenia.	a.Strongly agree	b.Agre e	c.No matter	d.Disagree	e.Strongly disagree
7. I think it is important to eat properly, sleep regularly, and keep a good mood in daily life.	a.Strongly agree	b.Agre e	c.No matter	d.Disagree	e.Strongly disagree

Part IV Practice on chemotherapy-related neutropenia

1. Has your attending physician informed you if the chemotherapy protocol you were prescribed was a high-risk protocol for febrile neutropenia?	a.Informed	b.Not informed	c.Unknown
2. Has your attending physician informed you that the high-risk chemotherapy protocol requires the prophylactic administration of leukocyte-raising agents?	a.Informed	b.Not informed	c.Unknown
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?	a.Informed	b.Not informed	c.Unknown
4.Has your attending physician informed you that the risk of febrile neutropenia should be assessed at each chemotherapy cycle?	a.Informed	b.Not informed	c.Unknown