

Protocol: IG-20191109_167

1. Is the duration of your illness more than five years?

YES (what is the duration?) / NO

2. Has any treatment been used in the last 90 days?

YES (medications, dosages, duration) / NO

3. Are you in remission for more than 90 days?

YES / NO

4. Do your blood relatives have a similar diagnosis?

YES (who? and how many?) / NO

5. Do you have any comorbid chronic conditions?

YES (which ones? duration) / NO

6. Do you have bad habits (smoking, frequent consumption of sweets and alcohol)?

YES (which ones?) / NO

7. Do you have triple negative breast cancer?

YES / NO

8. Have you had your breast, regional lymph nodes removed?

YES / NO

9. Has your biopsy sample been screened for PI3KCA, AKT1 and CDH1 mutations?

YES / NO

10. Has genetic testing been done for the presence of BCRA1 and BCRA2 mutations?

YES / NO

11. Has serum CA-125 been measured in the last 90 days?

YES (result ?) / NO

12. Has your therapy previously used conjugated drugs (monoclonal antibody + chemo drug)?

YES / NO

13. If you have a free testosterone and estrogen result?

YES (result ?) / NO

14. Have you received anti-hormone therapy? Anti-hormone resistance ?

YES (result ?) / NO

15. Have you received immunotherapy?

YES (result ?) / NO

16. Have you received radiotherapy and (or) chemotherapy?

YES (result ?) / NO

After you answer all the questions, you need to send us an email (dongpharr19@gmail.com) with the answers, stating the protocol number, then the question number and the answer.

Also in the subject of the letter, also be sure to specify the number of the protocol.

Your application will be considered as soon as possible. If the information we receive from you fully meets the criteria for inclusion in the clinical trial, we will contact you within 7 days of receipt of your questionnaire email.

