

Annex 3: DATA COLLECTION SHEET

ID NUMBER _____ AK NO _____

AGE

MARITAL STATUS

MARRIED

DIVORCED

SINGLE

TYPE OF SURGERY

BREAST CONSERVATION SURGERY

MODIFIED RADICAL MASTECTOMY

DATE OF SURGERY MONTH /YEAR

CURRENT TREATMENT

RADIOTHERAPY

CHEMOTHERAPY

ENDOCRINE

CORMORBIDITIES

DIABETES MELLITUS

HYPERTENSION

CARDIAC

HIV

OTHER

LEVEL OF EDUCATION

PRIMARY

SECONDARY

HIGHER INSTITUTION