

Supplementary data for patients under 20 years of age	
about the patient	<ol style="list-style-type: none"> 1. Last name, first name 2. Social security number (AHVN13)* 3. Address 4. Date of birth 5. Sex
about the patient's state of health	<ol style="list-style-type: none"> 1. Predispositions 2. Previous conditions 3. Concomitant diseases 4. Long-term complications
about the treatment (further treatment after initial treatment)	<ol style="list-style-type: none"> 1. Outcome of initial treatment 2. Type and goal of further treatment 3. Facts on which further treatment decision was based 4. Date treatment started 5. Outcome of further treatment 6. Details of follow-up investigations
about the notifying person	<ol style="list-style-type: none"> 1. Last name, first name 2. Phone number 3. Address and email address
about the notifying institution	<ol style="list-style-type: none"> 1. Last name, first name 2. Last name, first name and job title of person responsible 3. Phone number 4. Address and email address

*The AHVN13 number and the date on which the patient was informed must be included with every notification

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