Predisposing therapy modality	Late effect	Surveillance recommendation	Reference
Ionizing radiation	Secondary neoplasm including sarkoma and skin cancer	Awareness, medical history, adherence to regular cancer prevention measurements	114, 119
TBI	Bone disease (osteoporosis, fracture)	Evaluation of bone mineral density and fracture risk at baseline	14, 20
	Hepatotoxicity	ALT, AST, qGT, ALP at baseline, lifestyle counseling	13, 47-49
	Colon cancer	colonoscopy every 5 years, beginning 5 years after RT or at 30 years	5
		Fasting blood glucose or HbA1c every 2 years, TSH, fT4, morning cortisol, IGF-1,	2, 5, 20, 44
		LH, morning testosterone (males), estradiol, LH and FSH (females)	_, _,,
		Serum: creatinine. eGFR, urine: protein	2, 75
		Surveillance regarding aditional risk factors (obesity, hypertension)	2,70
Cranial RT		Evaluation of bone mineral density and fracture risk at baseline	14, 20
		History, focused neurological examination, discuss MRI surveillance	105
		Audiometry every 5 years, avoid noise exposure	2, 68, 69
		Fasting blood glucose or HbA1c every 2 years, TSH, fT4, morning cortisol, IGF-1,	2, 5, 20, 44
		LH, morning testosterone (males), estradiol, LH and FSH (females)	2, 3, 20, 44
			2 5 20 20
Cervicai R1		TSH and fT4, serum calcium yearly	2, 5, 20, 39
T		Awareness, neck palpation at every LTFU, thyroid ultrasonography every 3-5 years	122
		Annual mammogram and breast MRI from 25 up to 60 years or 8 years after RT	13
		Surveillance, risk factor assessment and control, ECG at baseline, risk-adapted echocardiogram	
		history, risk factor assessment, low-dose-CT in smoking survivors at risk	9, 10, 39, 113
		Annual clinical examination, history (respiratory symptoms), risk factor counseling (nicotine	
Abdominal and pelvic RT		Fasting blood glucose or HbA1c every 2 years	5, 20
		FSH, estradiol, AMH at baseline, menstrual history and childbearing desire, early fertility co	
		FSH, Inhibin B, early morning testosterone, fertility counseling	33, 40, 41
	Colon cancer	colonoscopy every 5 years, beginning 5 years after RT or at 30 years	5
	Sexual problems	actively address sexuality in LTFU, referall to experts as indicated	87
RT involving the liver	Hepatotoxicity	ALT, AST, gGT, ALP at baseline, lifestyle counseling	13, 47-49
RT involving the kidneys	Renal dysfunction	Serum: creatinine, eGFR, urine: protein	2, 75
,		Surveillance regarding aditional risk factors (obesity, hypertension, diabetes)	
RT involving the spleen		Awareness, vaccination against encapsulated bacteria, emergency antibiotic	79, 80
Radio iodine therapy		Awareness, blood differentials at every LTFU	112
Cytostatic agents		Awareness, medical history, adherence to regular cancer prevention measurements	115
Anthracyclines		Awareess, participation in national screening programs	13
Antinacyclines		Risk factor assessment and control, ECG at baseline, risk-adapted echocardiography	5, 11, 23-25, 27-29
Antimetabolites		ALT, AST, qGT, ALP at baseline, lifestyle counseling	13, 47-49
		Evaluation of bone mineral density and fracture risk at baseline	2, 20
Methotrexate			
		Serum: creatinine, eGFR, sodium, potassium, magnesium, calcium, phosphate, albumin; urin	
Allestations and the		glucose, phosphate; Surveillance regarding aditional risk factors (obesity, hypertension, dial	
Alkylating agents		FSH, estradiol, AMH at baseline, menstrual history and childbearing desire, early fertility co	
		FSH, Inhibin B, early morning testosterone, fertility counseling	33, 40, 41
		actively address sexuality in LTFU, referall to experts as indicated	87
		Annual clinical examination, history (respiratory symptoms), risk factor counseling (nicotine	
		history, risk factor assessment, low-dose-CT in smoking survivors at risk	9, 10, 39, 113
Ifosfamide		Serum: creatinine, eGFR, sodium, potassium, magnesium, calcium, phosphate, albumin; urin	
		glucose, phosphate; Surveillance regarding aditional risk factors (obesity, hypertension, dial	betes)
Bleomycin	Pneumotoxicity	Annual clinical examination, history (respiratory symptoms), risk factor counseling (nicotine	50, 70, 72, 73
Platins	Early menopause	Assessment of menstrual history and childbearing wish at every LTFU, fertility counseling	33, 34
	Sexual problems	actively address sexuality in LTFU, referall to experts as indicated	87
	Dyslipidemia	Lipid status (Cholesterine, LDL, HDL, Triglycerides) at every LTFU	2
		Serum: creatinine, eGFR, sodium, potassium, magnesium, calcium, phosphate, albumin; urin	2. 30. 75
		glucose, phosphate; Surveillance regarding aditional risk factors (obesity, hypertension, dial	
Cisplatin, Carboplatin >1500 m		Audiometry every 5 years, avoid noise exposure	2, 68, 69
Platins, Taxans, Vinca-Alkaloids		Patient history, awareness	62, 63, 65-67
Other antineoplastic substances	. on prior at the distributory	. attorit motor j arran orioss	02, 00, 00-07
	Bone disease (osteoporosis, fractures)	Evaluation of bone mineral density and fracture risk at baseline	20
Antinormones, Aromatase infilon	Infertility	Evaluation of bothe militeral defisity and macture fish at basefille	20
Glucocorticoids		Evaluation of hono minoral density and fracture side at heading	2 20
	none disease (avascular nekrosis, osteoporosis, fracture)	Evaluation of bone mineral density and fracture risk at baseline	2, 20
Cellular and targeted Therapies	Early and the Court of the Cour	CCU at a Pal Aball at heavy and a later a late	22 24 41 55
Stem cell transplantation		FSH, estradiol, AMH at baseline, menstrual history and childbearing desire, early fertility co	
		FSH, Inhibin B, early morning testosterone, fertility counseling	33, 40, 41
	Hepatotoxicity	ALT, AST, gGT, ALP, ferritine at baseline, lifestyle counseling	13, 47-49
	Colon cancer	colonoscopy every 5 years, at 30 years	5
		Self examination, dermatological skin cancer screening	118
	Sexual problems	actively address sexuality in LTFU, referall to experts as indicated	87
Stem cell transplantation,		Immunological testing in clinical concern (Serum IgG, IgA, IgM, Iymphocyte typing; vaccine A	N 132
CAR-T-cell therapy		Awareness, medical history, adherence to regular cancer prevention measurements	132, 58
Surgery		, i	
Hepatic surgery	Hepatotoxicity	ALT, AST, aGT, ALP at baseline, lifestyle counseling	13, 47-49
Nephrectomy		Serum: creatinine, eGFR, urine: protein	2, 75
		Surveillance regarding aditional risk factors (obesity, hypertension)	_,
Uni-/ bilateral oophorectomy		FSH, estradiol, AMH at baseline, menstrual history and childbearing desire, early fertility co	133 34 41 55
Orchiectomy		FSH, Inhibin B, early morning testosterone, fertility counseling	33, 40, 41
Orchiectomy, oophorectomy		actively address sexuality in LTFU, referall to experts as indicated	87
Splenectomy	Secondary immune deficiency	Awareness, vaccination against encapsulated bacteria, emergency antibiotic	79, 80
Thoracic surgery	Pneumotoxicity	Annual clinical examination, history (respiratory symptoms), risk factor counseling (nicotine	