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Supplementary Figure 1: The content of the Intervention Group

Intervention Group (IG)

1. Referral to the specialised Orthopaedic Department at Vejle Hospital





2. The shoulder expert assessment is performed by specialists with 6+ years experience in diagnosing shoulder impairments in the Orthopaedic Department at Vejle Hospital



History







Ultrasonography

5 standard clinical shoulder tests (flexion, abduction, rotation)

3. Examples of individualised treatments, based on results from the shoulder assessment







Specialised rehabilitation or oncological physiotherapist at the hospital



Rehabilitation in the municipality



Private practice



Supplementary Figure 2: The content of the Control comparator Group

Control comparator Group (CG)

1. Written introduction



2. Three mobility exercises 1 set with 5-10 repetitions Twice a day





Rolling of the shoulder



3. Three stretching exercises 1 set in 30 seconds Twice a day







4. One tissue displacement 1 set in a few minutes Twice a day



5. Four strength exercises 3 sets of 12 repetitions Once a day









Supplementary Table 1: Description of treatments received in *IG* (N=16)

1. Ultrasound-guided corticosteroid injection in the shoulder

(performed at the Orthopaedic Department, Vejle Hospital)

Physiotherapy at Vejle Hospital

(strength training with weights/machines, elastic bands; self training after following instructions from a physiotherapist)

Follow-up (physical or telephone)

2. Ultrasound-guided corticosteroid injection in the shoulder

(performed at the Orthopaedic Department, Vejle Hospital)

Physiotherapy at Vejle Hospital

(strength training with weights/machines, elastic bands; self training after following instructions from a physiotherapist)

Follow-up (physical or telephone)

Physiotherapist in private practice (massage)

3. Ultrasound-guided corticosteroid injection in the shoulder & follow-up

(performed at the Orthopaedic Department, Vejle Hospital)

Masseuse in private practice (massage)

4. Physiotherapy at Vejle Hospital (mobility training and stretching)

Follow-up (physical or telephone)

5. Referral to another professional in the municipality

(performed at the Orthopaedic Department, Vejle Hospital)

Physiotherapy in the municipality

(strength training with weights/machines, elastic bands; self training after following instructions from a physiotherapist, mobility training and stretching, tape)

6. Referral to another professional in the private practice; self-payment

(performed at the Orthopaedic Department, Vejle Hospital)

Physiotherapist in private practice (group training)

7. Referral to another professional in the private practice; self-payment

(performed at the Orthopaedic Department, Vejle Hospital)

Supplementary Table 2: Sensitivity Analysis at 12 weeks in the ITT population using a single-step non-responder (BOCF) imputation

Outcome	12 weeks after initiating the treatment		Between-Group Difference in Mean Improvement	
	Intervention group (IG)	Control comparator group (CG)	Difference in LSMeans (95%CI)†	P-Value
	LS Means (SE)†	LS Means (SE)†		
Primary endpoint				
Change SPADI overall score* (0 to 100)	-9.6 (2.7)	-14.5 (2.8)	-4.8 (-12.5 to 2.9)	0.22
Key secondary outcome measures				
Change SPADI pain* (0-100)	-12.2 (3.7)	-17.0 (3.8)	-4.7 (-15.4 to 6.0)	0.38
Change SPADI function* (0-100)	-7.2 (2.3)	-11.9 (2.4)	-4.7 (-11.3 to 1.9)	0.16

^{*} SPADI ranges from 0 (best) to 100 (worst), with lower scores indicating better disease status

[†] Estimates are least squares means (LSMeans) and standard errors (SE) with the difference between groups reported with 95% confidence intervals (CI)