

Supplementary file 2. Final reviewed articles and extracted data

Code of article	Title	First author	Year of publication	Year of study	Study design	Study location	Sample and sample size	Appraise score	Determiner of the role	Reported roles
1	Follow-up after treatment for breast cancer	Jeffrey sisler	2017	2016-2000	Review	Canada		92%	Evidences and guidelines	<p>1-Monitoring and screening:</p> <ol style="list-style-type: none"> 1. Continuous patient monitoring 2. Screening for localized relapses of breast cancer / early detection of metastasis to other locations 3) routine screenings (such as normal population) for colorectal cancer and cervical cancer. <p>2-Evaluation and management of long-term</p>

										<p>including cardiovascular complications: 2-1: Complications of treatment 2-2: Routine screening of cardiovascular risks, such as the normal population 3) Accurate treatment (follow-up) in the cancer patient 3- Promoting Health: The family physician's approach to the illness that has just ended her treatment should be the same as the one we have just diagnosed with acute coronary syndrome.</p>
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										management professionals
2	The Role of Primary Care Physicians in Cancer Care	Carrie N. Klabunde	2009	2005-2006	National cross sectional survey	America	General practitioner: 1694 Oncologist: 1621	92%	Physicians who had cancer patients	Two more bold roles: - Management of combined problems and assessment and treatment of depression And in the next degree - Management of pain and evaluation of patient treatment preferences
3	Factors affecting breast cancer risk reduction practices among California physicians	Celia Patricia Kaplan	2004	2001	Cross sectional survey	America (California)	2002 Family physicians	92%	Family physicians	Main roles grouping: - Advising patients on lifestyle changes - Chemoprophylaxis - Genetic evaluation (The Role of Prevention to reduce the risk in patients at high risk of cancer The main role of risk reduction is the

										prescription of prescription drugs such as tamoxifen and raloxifene as well as a reference for genetic evaluations and screenings
4	Interactive training for the management of Breast Cancer in General Practice in Europe	Torgil Moller	2002		Interventional study	European countries	78 General physicians	92%	General physicians	Screening 2- Risk assessment for hereditary cases of breast cancer 3- Follow up 4. Early referral of cancer (referral to surgery or radiotherapy) 5. Detect metastasis and manage it
5	The primary care physician role in cancer genetics: a qualitative	Fiona A Miller	2010	2006	Qualitative	Canada (Ontario)	25	84%	Cancer patients	- The role of referral for genetic testing of cancer 2. Helping to continue treatment and care 1

	study of patient experience									
6	Physicians' and Patients' Views of Cancer Care by Family Physicians: A Report From the American Academy of Family Physicians National Research Network	John Hickner	2007	2002	Qualitative	Europe-England-Canada	15 family physicians and their patients with cancer	80%	Family physicians	<ol style="list-style-type: none"> 1- Help manage pain 2. Participation in terminal care 3. Matching references 4. Provision of general care 5. Participation from the beginning to the end of the disease 6- Assist in making patient decisions 7. Psychosocial support 8. Cooperation with specialized doctors and specialist 9. Tracking and controlling the effects

7	Family physicians' roles in cancer care	Jeffrey J. Sisler	2004	2004	Cross sectional survey via E-mail	Canada	400 patients people (6 to 12 months after the diagnosis of cancer) randomly selected out of 5709 people and eventually 202 patients participated finally.	84%	Cancer patients	<ol style="list-style-type: none"> 1- Addressing all patient problems that are not related to cancer 2- Referral and taking of surgeons when needed 3- Spending more time for the patient during each visit 4. At the appropriate time, take the patient to the clinic immediately 5. Answer the patient's questions about cancer and its treatment <p>Talk with a cancer patient about his feelings of being infected with cancer.</p> <ol style="list-style-type: none"> 7. Eliminates other common problems in cancer such as pain, nausea, depression and intestinal problems.
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										<p>8. When he was worried and had trouble talking to him on the telephone.</p> <p>9. Whenever he is at a hospital, he will visit him.</p> <p>10. Speak with them about the feelings of the family from their illness.</p> <p>11. Answer family questions accurately.</p> <p>12. If it was necessary to visit the patient at home.</p>
8	Breast Cancer Detection: Role of Family Physicians	Rudika Gmajnić	2014		Interventional study with control group	Croatia	The entire covered population was called to participate in the screening	82%	Department of Family Medicine, University of Osijek, Croatia.	<p>Prevention roles like:</p> <ol style="list-style-type: none"> 1. Health education activities 2- Consultation 3. Early diagnosis of symptoms and signs of disease 4. Perform screening tests for high-risk patients

							program			
9	Primary Care Physicians' Perspectives of Their Role in Cancer Care: A Systematic Review	Renae A. Lawrence	2016	1993-2015	Systematic review	Australia (Sydney)	10941 family physician	80%	Primary care physicians' attitude	<ul style="list-style-type: none"> - Increase its role in pursuing the treatment of cancer patients by increasing contact with oncologists and having appropriate guidelines. - Ability to treat non-cancerous problems such as pain management and psychosocial support
10	The role of the GP in follow-up cancer care: a systematic literature review	Judith A. Meiklejohn	2016	2015	Systematic review	America (New York)	58 articles (25 qualitative studies and 33 quantitative studies)	80%	physicians' and their patients attitude	<p>From Patients:</p> <ul style="list-style-type: none"> - Parallel care and joint care - Conflict from detection time - Non-cancerous help - Treatment of cancer-related complications and associated illness treatment - Tracking screening tests - Referral when needed

										<ul style="list-style-type: none"> - Psychosocial support From the perspective of the primary care physician: - Follow up - Collaboration with second and third level physicians - Psychosocial support - Care of the patient in the final stage of life - Cancer management (psychological support and relapse monitoring)
11	The role of the general practitioner in cancer care: a survey of the p	V.Lang	2017	2015 -2014	Cross sectional survey	Germany	Total 740 patients / breast cancer: 269	90%	Cancer patients	<ul style="list-style-type: none"> A: Before definitive diagnosis - Warnings about early symptoms - In case of doubt, signs of cancer, early referral for definitive examination and diagnosis

	patients' perspective									B: During treatment - Consult the patient and help decide for treatment
12	Physician Roles in the Cancer-Related Follow-Up Care of Cancer Survivors	Carrie N. Klabunde	2013	2009	Cross sectional survey	America	1025 oncologists out of 1130 and 1014 primary care physician Out of 1072 participated.	76%	Primary care physicians and oncologists' reports	Screening for other new cancers - Auxiliary role in screening for early detection of recurrence during follow-up - Collaboration with an oncology team in patient management
13	Primary Care of the Patient with Cancer	GEORGE F. SMITH	2007		Review	America (Minnesota)		76%	Evidences and guidelines	.- Must be able to manage the disease. - Available on a regular basis. Having information about social resources and services covered. - Manage pain properly.

										<ul style="list-style-type: none"> - Evaluation of pathologic depression and other psychiatric injuries. - Be informed about the treatment options. - Communicating with and supporting the patient
14	Primary and secondary care management of women with early breast cancer from affluent and deprived areas: retrospective review of hospital	Una Macleod	2000	1992-1993	Retrospective cohort	گلاسگو - اسکاٹلنڈ	421 patients with breast cancer	83%	Hospital records of patients with definite breast cancer diagnosis	An important role in advising and advising especially in deprived areas (reducing inequity in health)

	and general practice records									
15	Randomized Trial of Long-Term Follow-Up for Early-Stage Breast Cancer: A Comparison of Family Physician Versus Specialist Care	Eva Grunfeld	2006	2003	Randomized controlled trial	Canada (Ontario)	968 women in the early stages of breast cancer who have been treated and disease free for at least three months	81%	Researcher (according to test results)	An important role in tracking patients after completing the treatment (relapse rate, re-occurrence in the breast and ... compared with follow-up by oncologists was not the same)
16	"When patients have cancer, they stop seeing me" – the role	Tor Anvik	2006	اكتوبر 1999 - سپتامبر 2000	Qualitative	Norway	91 patients with cancer	84%	Family physicians' and their patients	Patient Expectations: - Family doctors or general practitioners are aware of the diagnosis of cancer

	of the general practitioner in early follow- up of patients with cancer – a qualitative study										<ul style="list-style-type: none">- It is not advisable to give advice when the patient is not- Examining other physical problems that are not related to cancer - Participation of family physicians or general practitioners in providing home care - Provide more comprehensive care by family physicians The roles expressed by family physicians and general practitioners: - The possibility of providing more comprehensive care is provided by them
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										<p>- When the patient asks for herself, engage in follow up and monitor her treatment</p> <p>(There is the possibility of co-operation between rural community doctors in the treatment of cancer in Norway)</p>
17	General practitioners' attitudes toward follow-up after cancer treatment: A cross-sectional questionnaire study	Heidi Lidal Fidjeland	2015	2013	Cross sectional survey	Norway	317 Family and general physicians	81%		<p>Participation in tracking patients with breast cancer after treatment with emphasis on:</p> <ul style="list-style-type: none"> - Recognition of cases of recurrence - Provide psychosocial support
18	Patients' perspectives	G.K.B. HALKE TT	2015	2013	Qualitative	Australia	27 patients with	92%	Patients referred for palliative	- An important role in the exchange of

	tives on the role of their general practitioner after receiving an advanced cancer diagnosis						progressed cancer		radiotherapy	information and sharing of knowledge about the type of treatment and treatment process and ... - Management of prescribing drugs (hormone therapy, patient pain control, information on safety of medications) Continue routine care according to the general population
19	Australian general practitioners' preferences for managing the care of people diagnosed with cancer	Claire E JOHNSON	2014	-	Cross sectional survey	Australia	648 Family and general physicians	90%	Family and general physicians	Accordingly, reported frequency: - Prevention: The emphasis was on this - Early diagnosis of the disease - Patient monitoring to detect recurrence - Provide psychological support

										<ul style="list-style-type: none">- Patient follow-up after treatment- Provide palliative care- Collaborate in providing supportive care- Patient management after surgery- Collaboration in the treatment of the patient <p>(Although details of roles were not disclosed by family physicians and general practitioners)</p>
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