Supplementary Table S8. HER2 status by dual-probe in situ hybridization based on the 2018 ASCO/CAP guidelines [3]

| HER2 ISH status | Definition |
| :---: | :---: |
| ISH positive | $H E R 2 /$ CEP17 ratio $\geq 2.0$ and average $H E R 2$ copy number $\geq 4.0$ (ISH group <br> 1) <br> $H E R 2 /$ CEP17 ratio $\geq 2.0$ and average $H E R 2$ copy number $<4.0$ (ISH group <br> 2) with concurrent IHC 3+ <br> $H E R 2 /$ CEP 17 ratio $<2.0$ and average $H E R 2$ copy number $\geq 6.0$ (ISH group <br> 3) with concurrent IHC $2+^{a}$ or $3+$ <br> $H E R 2 /$ CEP 17 ratio $<2.0$ with average $H E R 2$ copy number $\geq 4.0$ and $<6.0$ <br> (ISH group 4) with concurrent IHC 3+ |
| ISH negative | $H E R 2 /$ CEP 17 ratio $<2.0$ with average $H E R 2$ copy number $<4.0$ (ISH group 5) $H E R 2 / \mathrm{CEP} 17$ ratio $\geq 2.0$ and average $H E R 2$ copy number $<4.0$ (ISH group <br> 2) with concurrent IHC $2+{ }^{\text {b }}$ <br> $H E R 2 / \mathrm{CEP} 17$ ratio $<2.0$ with average $H E R 2$ copy number $\geq 4.0$ and $<6.0$ <br> (ISH group 4) with concurrent IHC $2+{ }^{\text {b }}$ <br> ISH group 2, 3 and 4 with concurrent IHC 0 or 1+ |

HER2, human epidermal growth factor receptor type 2; ASCO, American Society of Clinical Oncology; CAP, College of American Pathologists; ISH, in situ hybridization; CEP17, centromere on chromosome 17; IHC, immunohistochemistry.
${ }^{a}$ An additional observer blinded to previous result recounts ISH. If the repeated ISH result is categorized to the same group, it is finally regarded as HER2 positive; ${ }^{\text {b }} \mathrm{An}$ additional observer blinded to previous result recounts ISH. If the repeated ISH result is designated to same ISH group, it is finally regarded as HER2 negative.

## References

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3. Wolff AC, Hammond MEH, Allison KH, et al. Human epidermal growth factor receptor 2 testing in breast cancer: American Society of Clinical Oncology/College of American Pathologists clinical practice guideline focused update. J Clin Oncol 2018; 36: 2105-22.
