

Appendix 1. Observation Checklist

Use of Visual Decision Aids in Doctor-Patient Communication Observation Research Checklist

Part I: Appointment Information

1. Appointment Date: _____
2. Scheduled Appointment Time: _____
3. Actual start time of appointment: _____ End time: _____
4. Duration of appointment: _____
5. Who was in attendance?
(not including Research Assistant) Speaker Order on Audio

_____ Attending	_____
_____ Fellow	_____
_____ Resident	_____
_____ Nurse	_____
_____ Nursing Assistant	_____
_____ Physician Assistant	_____
_____ Patient	_____
_____ Patient's Partner (Husband/Wife/Spouse/Long-term partner)	_____
_____ Patient's Daughter/Son	_____
_____ Patient's Sibling	_____
_____ Patient's Parent	_____
_____ Patient's Friend	_____
_____ Interpreter (If present, please specify language: _____)	_____
Other: _____	_____
6. Total number of healthcare professionals present: _____
7. Total number of family members present: _____

Part II: Visual Information

1. When was the decision aid introduced to the patient? (hh:mm): _____
2. Was the patient given his/her own copy of the decision aid?
 - a. _____ Yes
 - b. _____ No
3. Did the patient request his/her own copy of the decision aid?
 - a. _____ Yes
 - b. _____ No

4. Who gave the decision aid to the patient?
 - a. ☐ Given to patient by primary care doctor
 - b. ☐ Given to patient by nurse
 - c. ☐ Was not provided
 - d. Other - Specify _____

5. How did the *primary care doctor* initially refer to the decision aid? Check all that apply
 - a. ☐ Referred to it on the computer screen
 - b. ☐ Referred to paper copy of the decision aid
 - c. ☐ Other – Specify _____

6. When was the decision aid referenced during the appointment? Circle **D**octor or **P**atient to indicate who initiated a reference to and/or discussion of the decision aid.

(hh:mm) _____	D or P	(hh:mm) _____	D or P
(hh:mm) _____	D or P	(hh:mm) _____	D or P
(hh:mm) _____	D or P	(hh:mm) _____	D or P
(hh:mm) _____	D or P	(hh:mm) _____	D or P

7. Did the **patient** refer to the decision aid during the appointment?
 - a. ☐ Yes
 - b. ☐ No

8. How did the **patient** refer to the decision aid? Check all that apply.
 - a. ☐ Referred to it on the computer screen
 - b. ☐ Referred to a paper copy
 - c. ☐ Spoke generally about the decision aid without clearly indicating either a paper document or the computer display
 - d. ☐ Other – Specify _____

9. How did the *primary care doctor* position himself/herself relative to the **patient** when reviewing the decision aid?
 - a. ☐ Beside the patient
 - b. ☐ Across from the patient
 - c. ☐ Other – Specify _____

10. Did the **patient** take notes prior to the introduction and discussion of the decision aid?
 - a. ☐ Yes
 - b. ☐ No

11. Where did the **patient** take notes prior to introduction of the decision aid? (Check all that apply)
 - a. ☐ Notebook
 - b. ☐ Scratch paper
 - c. ☐ Other – Specify _____

12. Did the **patient** take notes during and/or after the decision aid was introduced and discussed?
- a. ☐ Yes
- b. ☐ No
13. Where did the **patient** take notes during and/or after the introduction and discussion of the decision aid? (Check all that apply)
- a. ☐ Notebook
- b. ☐ Scratch paper
- c. ☐ On the decision aid
- d. ☐ Other – Specify _____
14. How did the *primary care doctor* review the parts of the decision aid with the **patient**?
- a. ☐ Verbal description only
- b. ☐ Verbal and gestured to parts of the decision aid
- c. ☐ Other – Specify _____
15. Did the *primary care doctor* ask the **patient** to read the decision aid?
- a. ☐ Yes
- b. ☐ No
16. Did the **patient** appear to read the decision aid?
- a. ☐ Yes
- b. ☐ No
17. Did the **patient** appear to take a copy of the decision aid when he or she left the appointment?
- a. ☐ Yes
- b. ☐ No
18. Describe the **patient's** behavioral and visual interest in the decision aid.
- _____
- _____
- _____
- _____
19. Please provide any additional information that you may think might be useful that occurred during the conference, such as affect, behavior, and non-verbal body language.
- _____
- _____
- _____
- _____

Appendix 2. Patient Interview Guide

Use of Visual Decision Aids in Doctor-Patient Communication: A Pilot Investigation

Interview Guide: Conceptual Domains and Questions

Introduction Script: Hello, Mr/Ms/Dr/Mrs _____. Do you have a preference for what I call you? I am _____. As we discussed prior to your appointment with Dr. _____, I would like to ask you a few questions about your doctor's appointment. Are you still feeling up to answering a few questions?

[If no, probe why. If patient is not able or willing to answer questions, then discontinue interview or reschedule. If yes, remind the patient that the interview is being recorded. Setup the recording device and then proceed with Q1.]

Opening Questions

1. Why did you see your doctor today?
2. Was today your first appointment with Dr. _____?
 - a. If no, how many times before?
 - b. If no, was your appointment today different from any other appointments that you have had with Dr. _____ in the past? How so?

Domain: USER EXPERIENCE

Perceptions of the decision aid

3. During your appointment today, did your doctor talk with you about your risk of heart attack and stroke?
 - a. If Yes, did the doctor use a picture or visual aid to describe your risk?

[If no, rephrase using slightly different language to see if the person remembers. If the person still does not remember then ask Q4, Q7-Q9, Q11, Q15, Q17-Q19 (). If yes, proceed to Q4.]*

4. *Can you briefly describe the conversation you and Dr. _____ had about your heart attack and stroke risk?
5. Think back to when Dr. _____ introduced the visual aid to you. How did Dr. _____ describe the visual aid?
6. Was the information described by the visual aid easy or hard to understand? Please explain.
7. *What did you learn about your heart attack and stroke risk?
 - a. Was this information useful to you? If yes, how was it useful?

- b. Can you explain in your own words what Dr. _____ talked about in terms of your 10 year risk of stroke and heart attack?
 - c. What this risk higher or lower than you expected? Why?
8. *Thinking about your health, how does this information affect how you perceive your 10 year risk of heart attack/stroke?

Communication with physician

9. *Has your doctor talked to you in the past about any health risks? *[If no, proceed to Q11]*
- a. If yes, how were those conversations different from the one you had today about heart attack and stroke risk?
10. Do you think that the visual aid affected the way that you usually communicate with Dr. _____? *[If no, proceed to Q12. If yes, then proceed to 10a]*
- a. If yes, would you say the visual aid improved, worsened, or had no affect on your communication with Dr. _____? Please explain.
11. *Are you satisfied about the discussion that you had with Dr. _____ today about your heart failure and stroke risk? (yes/no/unsure)

Recommendations

12. What would you change about visual information displayed by the visual aid to make it better?
13. What would you change about the way your doctor used the visual aid during your appointment?
14. Say that one of your close friends or family members has a doctor appointment scheduled in which their doctor plans to talk about heart attack or stroke risk. Would you recommend this visual aid to that friend or family member?
- a. If yes, why?
 - b. If no, why not?

Domain: PATIENT DECISION MAKING

Impact of risk calculator on patient decision making

15. *Did you make any decisions about your healthcare today based on your appointment with Dr. _____? *[If no, SKIP to Q17.]*
- a. If yes, please explain what those decisions were.

b. *If not mentioned, probe regarding: exercise, diet change, or taking medication.*

16. How did using the visual aid affect these decisions?

17. *Do you foresee using information you learned today from Dr. _____'s use of the visual aid to make decisions about your healthcare in the future? Please explain.

MEASURES

Control Preference Scale (CPS)

18. *Next, I'm going to read a list of five options describing different treatment decision making styles and I'm going to ask you to select the ONE option that best describes how you would like to make decisions about your treatment. Please wait until I have read all of the options to make your choice.

In terms of making decisions about your health care with your doctor, which ONE of the following best describes how you would like to make these decisions?

- Make the final selection about which treatment I will receive
- Make the final selection after seriously considering my doctor's opinion
- Have my doctor and I share responsibility for deciding what treatment is best
- Have my doctor make the final decision but consider my opinion
- Leave all decisions regarding treatment to my doctor

19. *Did your visit today with Dr. _____ match with your top preference above?

Decisional Conflict Scale (DCS):

Transition Question:

20. Did your doctor talk with you about options to manage or treat your heart attack and stroke risk today?

- a. If yes, can you tell me what options were discussed? *[Record options and use them in Question 1 of DCS]*
- b. *If they do not recall discussing options, use the following options in Question 1 of DCS:*

- Option 1: Medications
- Option 2: Lifestyle changes such as changing your diet, exercising, or quitting smoking
- Option 3: Lifestyle changes and medication

