Supplementary material 1. Frequency distribution of research achievements of participants during the last 5 years

Item	Responses, n (%)
Number of papers or presentations of case studies as a coauthor during the last 5 years	None, 150 (89.8%) 1, 9 (5.4%) 2, 3 (1.8%) 3, 0 (0%) 4, 0 (0%) 5, 2 (1.2%) 6, 0 (0%) 7, 1 (0.6%) 8, 0 (0.6%) 9, 0 (0%) 10, 1 (0.6%) 11, 1 (0.6%)
Number of papers or presentations of case studies as a first author during the last 5 years	None, 148 (88.6%) 1, 11 (6.6%) 2, 3 (1.8%) 3, 1 (0.6%) 4, 1 (0.6%) 5, 0 (0%) 6, 1 (0.6%) 7, 1 (1.3%) 8, 0 (0%) 9, 0 (0%) 10, 1 (0.6%)
Number of papers or presentations of literature reviews as a coauthor during the last 5 years	None, 163 (97.6%) 1, 0 (0%) 2, 1 (0.6%) 3, 1 (0.6%) 4, 0 (0%) 5, 0 (0%) 6, 0 (0.6%) 7, 1 (0.6%) 8, 1 (0.6%)
Number of papers or presentations of literature reviews as a first author during the last 5 years	None, 163 (97.6%) 1, 3 (1.8%) 2, 0 (0%) 3, 1 (0.6%)
Number of papers or presentations of cross-sectional studies as a coauthor during the last 5 years	None, 154 (92.2%) 1, 4 (2.4%) 2, 5 (3.0%) 3, 3 (1.8%)

	4, 0 (0%) 5, 1 (0.6%)
Number of papers or presentations of cross-sectional studies as a first author during the last 5 years	None, 158 (94.6%) 1, 4 (2.4%) 2, 2 (1.2%) 3, 1 (0.6%) 4, 1 (0.6%) 5, 0 (0%) 6, 1 (0.6%)
Number of papers or presentations of longitudinal studies as a coauthor during the last 5 years	None, 163 (97.6%) 1, 1 (3.0%) 2, 1 (3.6%) 3, 1 (1.2%) 4, 0 (0.6%) 5, 0 (0%) 6, 0 (0.6%) 7, 0 (0%) 8, 0 (0%) 9, 1 (0.6%)
Number of papers or presentations of longitudinal studies as a first author during the last 5 years	None, 161 (96.4%) 1, 1 (0.6%) 2, 4 (2.4%) 3, 1 (0.6%)

Supplementary material 2. Results of multiple regression modeling for the Health Sciences Evidence-based practice scores

Dimension 1

Model	Variables	Unstandardized Coefficients (*B*) (95% Confidence Intervals)	Standardized Coefficients (β)	*p*-value
1	(Constant)	6.856 (5.664–8.047)		<0.001
	Gender	0.138 (-0.310–0.585)	0.048	0.545
	Highest degree	0.267 (-0.091–0.624)	0.115	0.142
	Clinical experience in primary care	0.166 (-0.002–0.334)	0.154	0.053
	Number of therapists at work	0.023 (-0.251–0.297)	0.013	0.868

Model 1: $R^2 = 0.038$, analysis of variance $p = 0.173$, R^2 changes = 0.038, F changes = 1.615, significance of F changes = 0.173, Durbin-Watson = 1.795

Dimension 2

Model	Variables	Unstandardized Coefficients (*B*) (95% Confidence Intervals)	Standardized Coefficients (β)	*p*-value
1	(Constant)	4.846 (3.370–6.321)		<0.001
	Gender	-0.156 (-0.711–0.398)	-0.044	0.578
	Highest degree	0.338 (-0.104–0.781)	0.119	0.133
	Clinical experience in primary care	-0.058 (-0.266–0.151)	-0.044	0.584
	Number of therapists at work	-0.005 (-0.345–0.335)	-0.002	0.977
2	(Constant)	5.062 (3.655–6.469)		<0.001
	Gender	-0.147 (-0.675–0.380)	-0.042	0.582
	Highest degree	0.218 (-0.206–0.643)	0.077	0.311
	Clinical experience in primary care	-0.143 (-0.345–0.060)	-0.108	0.166
	Number of therapists at work	-0.046 (-0.370–0.278)	-0.021	0.780
	Number of case studies during the last 5 years	0.267 (0.143–0.392)	0.322	<0.001
3	(Constant)	5.257 (3.854–6.660)		<0.001
	Gender	-0.181 (-0.704–0.341)	-0.051	0.494
	Highest degree	0.157 (-0.266–0.581)	0.055	0.464
	Clinical experience in primary care	-0.169 (-0.371–0.032)	-0.128	0.099

	Number of therapists at work	-0.082 (-0.403–0.240)	-0.037	0.617
	Number of case studies during the last 5 years	0.216 (0.084–0.348)	0.260	0.001
	Number of cross-sectional studies during the last 5 years	0.269 (0.022–0.516)	0.175	0.033

Model 1: R^2 = 0.020, analysis of variance p = 0.523, R^2 changes = 0.020, F changes = 0.806, significance of F changes = 0.523

Model 2: R^2 = 0.118, analysis of variance p = 0.001, R^2 changes = 0.099, F changes = 17.995, significance of F changes < 0.001

Model 3: R^2 = 0.143, analysis of variance p < 0.001, R^2 changes = 0.025, F changes = 4.628, significance of F changes = 0.033, Durbin-Watson = 1.642

Dimension 3

Model	Variables	Unstandardized Coefficients (B) (95% Confidence Intervals)	Standardized Coefficients (β)	p-value
1	(Constant)	5.846 (4.620–7.073)		<0.001
	Gender	-0.250 (-0.711–0.211)	-0.085	0.285
	Highest degree	0.008 (-0.360–0.376)	0.003	0.967
	Clinical experience in primary care	0.148 (-0.025–0.322)	0.135	0.093
	Number of therapists at work	0.109 (-0.174–0.391)	0.060	0.448
2	(Constant)	6.005 (4.821–7.189)		<0.001
	Gender	-0.243 (-0.687–0.200)	-0.083	0.280
	Highest degree	-0.080 (-0.437–0.277)	-0.034	0.658
	Clinical experience in primary care	0.086 (-0.084–0.257)	0.078	0.318
	Number of therapists at work	0.079 (-0.194–0.351)	0.043	0.569
	Number of case studies during the last 5 years	0.196 (0.091–0.301)	0.283	<0.001

Model 1: R^2 = 0.024, analysis of variance p = 0.412, R^2 changes = 0.024, F changes = 0.996, significance of F changes = 0.412

Model 2: R^2 = 0.100, analysis of variance p = 0.004, R^2 changes = 0.076, F changes = 13.636, significance of F changes < 0.001, Durbin-Watson = 1.889

Dimension 4

Model	Variables	Unstandardized	Standardized	p-value

		Coefficients (*B*) (95% Confidence Intervals)	Coefficients (β)	
1	(Constant)	5.135 (3.866–6.404)		<0.001
	Gender	-0.273 (-0.479–0.204)	-0.089	0.261
	Highest degree	-0.120 (-0.500–0.261)	-0.049	0.535
	Clinical experience in primary care	0.002 (-0.177–0.181)	0.002	0.982
	Number of therapists at work	0.234 (-0.058–0.526)	0.123	0.116
2	(Constant)	5.374 (4.114–6.635)		<0.001
	Gender	-0.305 (-0.774–0.164)	-0.100	0.201
	Highest degree	-0.205 (-0.584–0.175)	-0.084	0.288
	Clinical experience in primary care	-0.042 (-0.221–0.138)	-0.036	0.647
	Number of therapists at work	0.190 (-0.100–0.479)	0.100	0.197
	Number of cross-sectional studies during the last 5 years	0.272 (0.065–0.479)	0.205	0.010

Model 1: $R^2 = 0.028$, analysis of variance $p = 0.325$, R^2 changes = 0.028, F changes = 1.172, significance of F changes = 0.325

Model 2: $R^2 = 0.067$, analysis of variance $p = 0.046$, R^2 changes = 0.039, F changes = 6.726, significance of F changes = 0.010, Durbin-Watson = 1.947

Dimension 5

Model	Variables	Unstandardized Coefficients (*B*) (95% Confidence Intervals)	Standardized Coefficients (β)	*p*-value
1	(Constant)	5.692 (4.272–7.113)		<0.001
	Gender	-0.617 (-1.515–-0.083)	-0.180	0.024
	Highest degree	-0.105 (-0.531–0.321)	-0.038	0.626
	Clinical experience in primary care	0.073 (-0.128–0.273)	0.057	0.476
	Number of therapists at work	-0.124 (-0.451–0.203)	-0.058	0.455
2	(Constant)	5.970 (4.573–7.368)		<0.001
	Gender	-0.659 (-1.180–-0.137)	-0.192	0.014

Highest degree	-0.229 (-0.652–0.194)	-0.083	0.286
Clinical experience in primary care	0.013 (-0.186–0.213)	0.010	0.894
Number of therapists at work	-0.159 (-0.478–0.161)	-0.075	0.329
Number of longitudinal studies during the last 5 years	0.390 (0.137–0.644)	0.238	0.003

Model 1: $R^2 = 0.036$, analysis of variance $p = 0.195$, R^2 changes = 0.036, F changes = 1.534, significance of F changes = 0.195

Model 2: $R^2 = 0.089$, analysis of variance $p = 0.010$, R^2 changes = 0.061, F changes = 9.281, significance of F changes = 0.003, Durbin-Watson = 1.630

Gender (0: women, 1: men); Highest degree (0: Career college, Junior college, or College, 1: Master degree or Doctoral degree); Clinical experience in primary care (0: <3 years, 1: 3-5 years, 2: 6-10 years, 3: 11-15 years, 4: ≥16 years); and Number of therapists at work (0: <3 people, 1: 3-5 people, 2: 6-10 people, 3: 11-15 people, 4: ≥16 people)

Supplementary material 3. Summary of responses to 31 questions regarding evidence-based practice (EBP) and clinical practice guidelines

Item	Responses, n (%)
Item 1: Application of EBP is necessary in the clinical practice.	Strongly agree, 33 (20.0%) Agree, 103 (62.4%) Neutral, 23 (13.9%) Disagree, 5 (3.0%) Strongly disagree, 0 (0%) I don't know, 1 (0.6%)
Item 2: I think it creates unreasonable demands to apply EBP in my daily work.	Strongly agree, 22 (13.3%) Agree, 111 (67.3%) Neutral, 24 (14.5%) Disagree, 7 (4.2%) Strongly disagree, 0 (0%) I don't know, 1 (0.6%)
Item 3: EBP does not take into account patient preference.	Strongly agree, 9 (5.5%) Agree, 61 (37.0%) Neutral, 67 (40.6%) Disagree, 25 (15.2%) Strongly disagree, 1 (0.6%) I don't know, 2 (1.2%)
Item 4: EBP improves the quality of patient care.	Strongly agree, 21 (12.7%) Agree, 119 (72.1%) Neutral, 22 (13.3%) Disagree, 2 (1.2%) Strongly disagree, 0 (0%) I don't know, 1 (0.6%)
Item 5: My reimbursement rate will increase if I incorporate EBP into my practice.	Strongly agree, 16 (9.7%) Agree, 72 (43.6%) Neutral, 51 (30.9%) Disagree, 14 (8.5%) Strongly disagree, 1 (0.6%) I don't know, 11 (6.7%)
Item 6: I am interested in learning or improving the skills necessary to incorporate EBP into my practice.	Strongly agree, 32 (19.4%) Agree, 102 (61.8%) Neutral, 24 (14.5%) Disagree, 6 (3.6%) Strongly disagree, 0 (0%) I don't know, 1 (0.6%)
Item 7: At my place of work, the use of current EBP is encouraged.	Strongly agree, 3 (1.8%) Agree, 54 (33.1%) Neutral, 70 (42.9%) Disagree, 14 (8.6%)

	Strongly disagree, 2 (1.2%) I don’t know, 20 (12.3%)
Item 8: Current research helps me making decisions about patient care.	Strongly agree, 4 (2.4%) Agree, 44 (26.7%) Neutral, 64 (38.8%) Disagree, 43 (26.1%) Strongly disagree, 3 (1.8%) I don’t know, 7 (4.2%)
Item 9: I feel confident in my ability to find relevant research to answer my clinical questions.	Strongly agree, 9 (%) Agree, 112 (67.9%) Neutral, 32 (19.4%) Disagree, 11 (6.7%) Strongly disagree, 0 (0%) I don’t know, 1 (0.6%)
Item 10: I leaned the foundations for EBP as part of my academic preparation.	Yes, 15 (9.1%) Partially, 94 (57.3%) No, 55 (33.5%)
Item 11: I received formal training in critical appraisal of research literature as part of my academic preparation.	Yes, 10 (6.1%) Partially, 70 (42.4%) No, 85 (51.5%)
Item 12: I am confident in my ability to critically review professional literature.	Strongly agree, 2 (1.2%) Agree, 12 (7.3%) Neutral, 21 (12.7%) Disagree, 75 (45.5%) Strongly disagree, 52 (31.5%) I don’t know, 3 (1.8%)
Item 13: I am confident in my ability to find relevant research to answer my clinical questions.	Strongly agree, 2 (1.2%) Agree, 27 (16.4%) Neutral, 55 (33.3%) Disagree, 63 (38.2%) Strongly disagree, 14 (8.5%) I don’t know, 4 (2.4%)
Item 14: I am familiar with the medical search engines (e.g., Ichushi, Pubmed, etc.).	Strongly agree, 1 (0.6%) Agree, 15 (9.1%) Neutral, 49 (29.7%) Disagree, 64 (38.8%) Strongly disagree, 32 (19.4%) I don’t know, 4 (2.4%)
Item 15: Number of scientific articles related to my clinical work that I	≦1 article, 56 (33.9%) 2-5 articles, 84 (50.9%) 6-10 articles, 18 (10.9%)

read, during a typical month.	11-15 articles, 4 (2.4%) 16+ articles, 2 (1.2%)
Item 16: Number of times I use PubMed or other databases to search literature that is relevant to my clinical work, during a typical month.	≦1 time, 64 (38.8%) 2-5 times, 71 (43.0%) 6-10 times, 19 (11.5%) 11-15 times, 2 (1.2%) 16+ times, 8 (4.8%)
Item 17: I'm aware that evidence-based guidelines for diagnoses relevant to my work exist.	Yes, 87 (52.4%) Partially, 64 (38.6%) No, 15 (9.0%)
Item 18: I use evidence-based guidelines in my work.	Yes, 72 (43.4%) No, 71 (42.8%) I don't know, 23 (13.9%)
Item 19: By the use of clinical practice guidelines, I was able to have confidence in the clinical setting.	Yes, 6 (6.7%) Partially, 73 (81.1%) No, 7 (7.8%) I don't know, 4 (4.4%)
Item 20: By the use of clinical practice guidelines, communication with other occupations has been facilitated.	Yes, 6 (6.5%) Partially, 43 (46.7%) No, 27 (29.3%) I don't know, 16 (17.4%)
Item 21: I consider it important to use evidence-based guidelines in my work.	Strongly agree, 16 (9.9%) Agree, 96 (59.3%) Neutral, 40 (24.7%) Disagree, 3 (1.9%) Strongly disagree, 1 (0.6%) I don't know, 5 (3.1%)
Item 22: I have fast and easy access to relevant evidence-based guidelines at my place of work.	Strongly agree, 39 (24.1%) Agree, 87 (53.7%) Neutral, 25 (15.4%) Disagree, 6 (3.7%) Strongly disagree, 1 (0.6%) I don't know, 4 (2.5%)
Item 23: Evidence-based guidelines are important to facilitate my work.	Strongly agree, 12 (7.4%) Agree, 71 (43.8%) Neutral, 57 (35.2%) Disagree, 8 (4.9%) Strongly disagree, 2 (1.2%) I don't know, 12 (7.4%)
Item 24: Evidence-based	Strongly agree, 15 (9.3%)

guidelines are important so that the patients receive the best possible treatment.	Agree, 84 (51.9%%) Neutral, 46 (28.4%) Disagree, 9 (5.6%) Strongly disagree, 0 (0%) I don't know, 8 (4.9%)
Item 25: Evidence-based guidelines are important so that patients receive equal treatment.	Strongly agree, 18 (11.1%) Agree, 86 (53.1%) Neutral, 41 (25.3%) Disagree, 6 (3.7%) Strongly disagree, 0 (0%) I don't know, 11 (6.8%)
Item 26: I can integrate the patients' preferences with evidence-based guidelines.	Strongly agree, 5 (3.1%) Agree, 42 (25.9%) Neutral, 67 (41.4%) Disagree, 27 (16.7%) Strongly disagree, 5 (3.1%) I don't know, 16 (9.9%)
Item 27-a: My understanding of the following term is: Relative risk.	Understand completely, 6 (3.6%) Understand somewhat, 75 (45.5%) Do not understand, 58 (35.2%) Do not know term in itself, 26 (15.8%)
Item 27-b: My understanding of the following term is: Absolute risk.	Understand completely, 9 (5.5%) Understand somewhat, 72 (43.6%) Do not understand, 57 (34.5%) Do not know term in itself, 27 (16.4%)
Item 27-c: My understanding of the following term is: Systematic review.	Understand completely, 12 (7.3%) Understand somewhat, 60 (36.6%) Do not understand, 64 (39.0%) Do not know term in itself, 28 (17.1%)
Item 27-d: My understanding of the following term is: Odds ratio.	Understand completely, 5 (3.0%) Understand somewhat, 52 (31.5%) Do not understand, 87 (52.7%) Do not know term in itself, 21 (12.7%)
Item 27-e: My understanding of the following term is: Meta-analysis.	Understand completely, 8 (4.8%) Understand somewhat, 51 (30.9%) Do not understand, 80 (48.5%) Do not know term in itself, 26 (15.8%)
Item 27-f: My understanding of the following term is: Confidence interval.	Understand completely, 8 (4.8%) Understand somewhat, 62 (37.6%) Do not understand, 70 (42.4%) Do not know term in itself, 25 (15.2%)
Item 27-g: My understanding of the following term is:	Understand completely, 2 (1.2%) Understand somewhat, 12 (7.3%) Do not understand, 106 (64.2%)

Heterogeneity.	Do not know term in itself, 45 (27.3%)
Item 27-h: My understanding of the following term is: Publication bias.	Understand completely, 6 (3.7%) Understand somewhat, 38 (23.2%) Do not understand, 78 (47.6%) Do not know term in itself, 42 (25.6%)
Item 27-i: My understanding of the following term is: Critical appraisal.	Understand completely, 5 (3.0%) Understand somewhat, 65 (39.4%) Do not understand, 70 (42.4%) Do not know term in itself, 25 (15.2%)
Item 27-j: My understanding of the following term is: Cost-effectiveness.	Understand completely, 14 (8.5%) Understand somewhat, 64 (38.8%) Do not understand, 64 (38.8%) Do not know term in itself, 23 (13.9%)
Item 28: I have the ability to access relevant databases and the Internet at my facility.	Yes, 100 (61.3%) No, 30 (18.4%) I don't know, 33 (20.2%)
Item 29: I have the ability to access relevant databases and the Internet at home or locations other than my facility.	Yes, 97 (59.5%) Partially, 37 (22.7%) No, 29 (17.8%)
Item 30: I know how and where to find evidence-based guidelines related to my work on the Internet.	Yes, 45 (27.8%) Partially, 74 (45.7%) No, 43 (26.5%)
Item 31: Indicate the barriers to updating your clinical practice with new knowledge.	Insufficient time, 71 (44.4%) Lack of research skills, 70 (43.8%) Don't know where to find guidelines, 24 (15.0%) Takes too long to read guidelines, 86 (53.8%) Guidelines are too general and too unspecific, 51 (31.9%) Guidelines are too verbose and do not let me decide what is most appropriate, 34 (21.3%) Inability to apply research findings to individual patients with unique characteristics, 11 (6.9%) Lack of collective support among my colleagues in my facility, 5 (3.1%) Lack of interest, 15 (9.4%)