

Table S2. Characteristics of Personal Stories used in Reviewed Studies

Authors, Year, Citation Number	Story Content	Integration of Story in PtDA	Other Features	Experimental Groups
Dillard et al. (2010) [1]	Patient story described one individual's experience of deciding about screening; no additional factual information	Patient story integrated into standard information in 4 sections focusing on: feeling uncertain about the decision; barriers to screening; impact bias.	Photograph of narrator matched to participants' sex, age and race. Information obtained from National Cancer Institute online booklet	2x2 design: Patient story (present or absent) versus Screening type (colonoscopy or virtual colonoscopy).
Volandes et al. (2009a, b; 2011) [2-4]	Dementia patient shown as unable to communicate, in a wheelchair, unable to feed herself.	Video delivery of decision support tool presented on a computer (lasting 2 minutes).	Picture stills of a real patient with advanced dementia (80 year old female) and 2 daughters in a nursing home setting. Video developed in consultation with specialists in dementia and Functional Assessment Staging (FAST) 7a (i.e., criteria for the most advanced stage of dementia).	Verbal information (consultation) versus Decision support video + verbal information (consultation).
Winterbottom et al. (2011) [5]	Four scripted scenarios. Two patient and two doctor stories describing haemodialysis (HD) and continuous cycling peritoneal	Written or video delivery delivered after standard factual information about HD and CCPD. In study 2, only video delivery of story plus	In study 1: 1 male and 1 female actor played 2 roles each. In study 2: 2 male and 2 female actors played each of the 4 roles. Narratives developed from the	Study 1: 2x2x2 format (written vs. video) x source (patient vs. doctor) x order (HD information vs. PD information). Study 2: 3x2x2x2: decision table (none, before or after

	dialysis (CCPD), decision making process, and dialysis outcome (fitting into a patient's life).	additional summary decision-attribute table before or after story.	literature, study describing patient dialysis decision making, and renal specialists.	story) x order (patient vs. doctor first) x sex of patient (male, female) x sex of doctor (male, female). Control group read only basic factual information in both studies.
El-Jawahri et al. (2009) [6]	Three levels of care described, identical to the verbal information (consultation) but with visual images of patients in different scenarios.	A 6-minute video presented on a laptop computer.	Verbal narrative describing 3 levels of medical care for advanced cancer. Pictures used of patients in intensive care being ventilated by a professional. Video developed in consultation with cancer specialists, filmed without prompts.	Verbal information (consultation) versus Verbal information (consultation) plus video.
Kreuter et al. (2010) [7]	Both videos addressed 11 key messages about breast cancer. Video 1: personal stories from African American breast cancer survivors. Video 2: didactic, expository form from an African American woman, cancer survivor.	Videos presented via a mobile communication research facility in the community.	Video 1: 57 short stories elicited from 29 cancer survivors. Edited to form narrative about risk, talking about cancer and mammography screening. Video 2: Material developed from video 1 and presented by a single narrator with images, photos, graphics and music. Videos piloted for equivalence.	Narrative video versus Factual prose video.
Jibaja-Weiss et al. (2011) [8]	Factual information about surgery options	Decision-making process for making a	In the PtDA the storyline does not reveal what surgery option	Intervention: a computerised interactive multimedia PtDA

	and other treatments presented in interactive learning modules component of ptDA	surgery decision presented in the format of didactic soap operas	the main character chooses; a values clarification exercise is included. PtDA conforms to IPDAS criteria.	utilising entertainment (soap opera episodes and interactive learning modules). Control: only usual care.
Volk et al. (2008) [9]	Factual information about prostate cancer and screening presented in the format of didactic soap operas and interactive learning modules.	A computer-based PtDA based on the Edutainment Decision Aid Model (EDAM).	In the PtDA, ethnicity of main character tailored to the viewer; celebrity testimonials and values clarification exercise included.	Intervention: an interactive computer-based PtDA. Control: receive an audio booklet with no values clarification, entertainment component, testimonials, or values-clarification exercise.
Fagerlin et al. (2005) [10]	The experience of former patients with each of the treatment options was presented with the scenario.	Written patient narratives with the number of narratives varied to be representative or non-representative of cure rate.	Information in the narratives was repetition of that presented in the scenario so no new information was supplied in the narratives. Study 1: A pictograph and trade-off quiz were also presented to some participants.	Study 1: 2 (representative vs. non-representative narratives) x 2 (pictograph and quiz vs.. no pictograph or quiz). Study 2: 2 (pictograph vs. no pictograph) x 2 (no trade off quiz vs.. trade off quiz) [all participants received non-representative narratives]
Shaffer et al. (in press 2013) [11]	Three topics including patients' reaction to diagnosis; strategies for making the decision; the least and most important aspects of treatment for the patient.	Video clips to supplement factual information talked about by the narrator.	Verbal stories from 12 patients' experiences of treatment for breast cancer. All women were middle-aged, 9 were Caucasian and 3 African-American	Video resource versus Video resource plus personal stories

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