

### **General Experience with GIC**

1. How has your experience with the GIC been going so far?
2. How have you been using the tool (e.g., to review test results, check variant updates)?
  - Initial bolus vs. ongoing
3. Describe your workflow once you receive a variant update email.
  - Do you use the review button?
  - Describe how working and communicating with other clinicians in the office (e.g., genetic counselors, other physician) fits into this workflow?
  - Do you have any communication with the lab during this process?

### **Process**

4. What are the advantages/disadvantages of receiving variant updates categorized by alert type? (e.g., value of the High, Medium, Low designation)
5. What is the value in receiving the high level variant updates through an email alert as soon as the update is made?
  - When and how would you prefer to receive high level updates?
6. Do you find it valuable to receive low and medium level updates through email? Do you like/dislike receiving low and medium level alerts in the weekly summary emails?
  - When and how would you prefer to receive medium level updates?
  - When and how would you prefer to receive low level updates?
7. Have you noticed any “repeat” notifications in the weekly summary emails? Is it helpful/unhelpful to receive the un-reviewed alerts for multiple weeks?
8. Do you review the weekly summary emails?

### **Impact**

9. How has receiving the emails with variant updates changed your workflow?
  - Increased/decreased efficiency?

10. How do the alert levels (high, medium, low) help or hinder your ability to care for patients?
11. Please describe how the variant updates you have received through the GIC so far have been handled (for example, you review alerts and then take some type of action in response)?
  - In what specific ways have your patient's been affected by this tool? Can you provide an example?
  - What type of follow-up actions have you taken as a result of an update?

### **Categorization**

12. What is your opinion on alerting (receiving notification when available in the GIC) on finalized reports?
  - When do you prefer to receive those? (immediately, daily summary, wkly summary?)
13. What is your opinion on the following being classified as high alerts?
  - Report finalized – when a report is received from the testing laboratory
  - Non-incidental to incidental – all the diseases or drugs associated with a variant are removed, making the variant incidental.
  - Incidental to non-incidental – an existing disease or drug is added to an incidental variant, making it a non-incidental variant.
  - Variant of Unknown Significance level change – the category changes between an unknown and known significance.
  - Disease or drug addition – an existing disease or drug is added to a variant which already has one or more diseases or drugs associated with the variant.

Note: The disease or drug must be part of the interpreted disease/drug list on the report.

- Disease or drug removal – an existing disease or drug is removed from a variant, leaving one or more diseases or drugs associated with the variant.

Note: The disease or drug must be part of the interpreted disease/drug list on the report

14. What is your opinion on non-incident level changes from Pathogenic to Likely Pathogenic being classified as Medium level updates?
15. What is your opinion on incidental level changes being classified as low level updates?

### **Suggestions for Improvement**

16. In addition to what we learned through the usability test, which led to changes being released in the next version (i.e., icons, summary email organization, referring provider), in what ways do you feel the tool or the process of alerting could be improved?