# APPENDIX 1 (online only).

# Complete list of Vascular Surgeon Offer and Report investigators

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Nancy Birkmeyer, PhD (Department of Surgery, University of Michigan, Ann Arbor, Mich)

Mary Burnette, MD (Department of Psychiatry, Geisel School of Medicine at Dartmouth, Lebanon, NH)

Nancy Rigotti, MD (Division of General Internal Medicine, Department of Medicine, Massachusetts General Hospital and Harvard Medical School, Boston, Mass)

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Maria Orlando Edelen, PhD (RAND Corporation, Boston, Mass)

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Dan Neal, MS (Department of Neurosurgery, University of Florida, Gainesville, Fla)

Sandi Siami, MPH (New England Research Institute, Watertown, Mass)

Colleen Kollman, MBA (Kollman Research Services, Ann Arbor, Mich)

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#### APPENDIX 2 (online only).

# Patient focus group moderator guide



Colleen Dowd Kollman
Market Research Consultant/Moderator

15 min

# A. Background/warm-up

**Moderator introduction.** Thank you for coming. Purpose of research is to help Dr Goodney and his colleagues understand how best to help their patients in their smoking cessation efforts.

You have been invited here because we are interested in your personal experiences and opinions related to having a blood vessel surgery and working to quit smoking. You don't need to agree with each other—just respect and listen to each other. We have a mix of folks who are at different stages of smoking, working to reduce or quit, and those who are currently smoking. We want to hear from each of you and are interested in all stages of the process.

We are audio recording. Start with introductions. Respondent introductions.

 Personal information: name, occupation, and household description, currently smoking now or not, and anything you want to share about your quit attempts.

#### B. Health benefits - 20 minutes

- 1. How do you think about the health benefits of not smoking or reducing to both your overall health and to your vascular problems specifically?
- What have you experienced?
- What have you been told?
- Is there any tipping point where you go from trial to actual success?

### C. Intervention specifics - 30 minutes

- 2. Overall, tell me how the process of attempting to quit went for you and what specifically was helpful? What was not helpful?
- 3. (Very brief advice). Do you remember your surgeon having a brief conversation with you about smoking? Tell me about that conversation.
- How did that go?
- How did you feel?
- Anything that would have made that interaction better?
- If you don't recall, how would you feel if your surgeon spent a few minutes telling you about how quitting would benefit you and giving you some advice?
- 4. (NRT). Was NRT offered to you? If so tell me about the process of getting it, using it, and any issues or concerns with the process. Did you use OTC or Rx? What about Chantix? Did anyone use that, and what did you think?
- 5. (Quit Line or advice). How many of you agreed to or tried to work with a Quit Line counselor? How did that process work for you?
- How many of you had contact with a Quit Line counselor?
- Did you call the Quit Line or did they call you?
- How helpful or not helpful was the Quit Line?
- What made sense? What was confusing or challenging?

- What do you think some of the reasons are people would not choose to work with the Quit Line counseling or have problems working with them?
- Is there anything that could be improved in the process of referring to a Quit Line or using one?

# D. Interest in study - 20 minutes

Dr Goodney is involved in a study called the VAPOR study which some of you are enrolled. It involves agreeing to listen the surgeon offer NRT and considering a referral to the 1-800 Quit Line and completing a very brief survey at the beginning and then 3 month later about smoking.

6. For those of you familiar with this study, can you tell me the story of how you were first invited into the study and your reaction or thoughts?

- What made you decide to participate?
- Anything that could have made the decision easier or the process smoother for you?
- Tell me about your interaction with the surgeon and office staff; how did they talk with you and how did you feel? Did you have any unanswered questions?
- What do you think are some reasons people would choose NOT to be in the study?
- 7. For those of you who are not part of that study what would make you interested? What would be the barriers or concerns? What would you want to know about it?

# E. Wrap-up and thanks - 5 minutes

If you had to give one piece of advice to a group of vascular surgeons committed to helping patients stop smoking, what would it be? What could they do to make it a better process?

# **Smoking Cessation Quality Improvement Project** The Offer and Report Protocol Sten 1: Offer Offer "very brief advice" on smoking cessation ( http://www.ncsct-training.co.uk/player/play/VBA) "Are you still smoking?" (if yes, or quit <30 days ago, then proceed as below) Advise: "Smoking increases the chance that you will have poor results from vascular procedures. Quitting smoking will greatly improve your results." Act: "It is difficult to quit smoking, but I want to help you quit. My approach is two-fold: First, we are going to connect you to a free, telephonebased program, called 1-800-QUITNOW, that will help you quit. They will contact you by phone to help you do this. Second, I'll write you a prescription for nicotine replacement therapy, which will consist of a patch for daily use, and gum or lozenges for breakthrough cravings. Step 2: Report At the end of the surgeon's clinic visit, office staff will assist interested patients in completing a pre-printed fax referral form (in some states the patient must also sign the form) and fax completed forms to the guit line. The guit line will contact the patient and assist in smoking cessation.