

## **Item S1: Interview guide**

**Thanks for agreeing to speak today. I'm interested in learning more about your approach and experiences discussing treatment options with older patients with advanced CKD and their families.**

**Before we begin with that, can you tell me a bit about yourself and your practice? For example, how many years have you been in practice? How long have you been in this current practice?**

1. How do you approach discussions with older patients with advanced CKD (over 75) who are approaching the time where they need to decide about potentially starting dialysis?
2. How have you come to this approach? For example, have you tried other approaches with patients in the past that have been less successful, or more difficult?
3. What is involved in "usual care" for people with stage 4 or 5 CKD?
  - a. PROBES: timing of conversation, who is involved, how many times is this discussed, any written materials, involvement of others (family, etc.), involvement of other clinicians (nurses, social work, dietician, etc.), visit to clinical, formal class
4. Do you tailor these conversations or do you use the same general approach with everyone?
  - a. What makes you tailor your approach? What signals or factors affect your approach?
5. What makes for a successful discussion of options?
6. What makes for an unsuccessful discussion of options?
7. What do you hope the patient walks away with?
8. In thinking about discussing treatment and choices with patients, what outcomes are most important to you?
9. Are there types of patients, or groups of patients that you find have had more challenges in discussion decision-making? Please tell me more about those instances.
10. Have you found yourself engaging some groups in a different way? (e.g. patients with health literacy constraints, low-income, patients with strong fears of needles, other physician-patients, etc.)
11. What makes you decide that a patient is ready to have a conversation about CKD treatment options?
  - a. If you decide a patient is not ready to discuss options, what do you think would facilitate a patient moving to a state where they are more ready to discuss?
12. What are your thoughts about using shared decision-making with patients? Can you tell me a little more about your experiences with that?