

**Supplementary File 3: Proposed Phases, Steps, and Criteria**

Existing standard (from IOM & USPSTF)	Phase	Step	Criteria	
Establishing transparency	Phase I: Define Process and Scope	Define the question	The question is defined according to which population is relevant for this PDA.	
			The question is defined according to which options are relevant for this PDA.	
			The question is defined according to which outcomes or patient concerns are relevant for this PDA.	
		Document process and policies	The evidence summarization process is documented.	
			The evidence summarization process minimizes bias.	
			The evidence summarization process minimizes conflicts of interest.	
			The conflict of interest policy applying to people who summarize evidence is documented.	
		Management of conflict of interest	Manage COI	The conflicts of interest of people who summarize evidence are collected.
				Actions are taken to manage relevant conflicts of interest.
The actions taken on relevant conflicts of interest are documented.				
Conflicts of interest are monitored over the course of PDA development.				
Guideline development group composition	Assemble team	A multidisciplinary team is assembled.		
		The team comprises clinicians.		
		The team comprises methodological experts.		
		The team comprises patient or consumer representatives.		
	Define the scope of patient decision aid content	The population for whom the PDA is designed for is appropriate.		
		There is a systematic process to reduce bias in the definition of the population for the PDA.		
		The options for inclusion in the PDA are appropriate for the intended population.		
		There is a systematic process to reduce bias in the definition of the options for the PDA.		
		The outcomes or patient concerns for inclusion in the PDA are appropriate for the intended population and options.		

			There is a systematic process to reduce bias in the definition of the outcomes or patient concerns for the PDA.
Guideline and systematic review intersection	PHASE II: Finding & Appraising Evidence	Search for evidence	There is a systematic search for evidence that relates to the options included in the PDA.
			There is a systematic search for evidence that relates to the outcomes or patient concerns included in the PDA.
			If the PDA is customizable to individual patient factors, there is a systematic search for evidence of how individual patient factors influence the expected outcomes.
Establishing evidence foundations and rating strength of recommendation	PHASE II: Finding & Appraising Evidence	Select evidence	There is a systematic process for selecting evidence for outcomes or patient concerns to include in the PDA (where evidence is not available, can directly ask patients).
			There is a systematic process for selecting evidence (or evidentiary gaps) about potential benefits relevant to each option.
			There is a systematic process for selecting evidence (or evidentiary gaps) about potential harms relevant to each option.
			If the PDA is customizable to individual patient factors, there is a systematic process for selecting relevant risk predictors to include in the PDA.
		Appraise evidence	Evidence selected for inclusion in the PDA is critically appraised with a defined protocol (such as GRADE).
			The protocol for critical appraisal of evidence accounts for risks of bias in study design.
			The protocol for critical appraisal of evidence accounts for risks of bias in study analysis and reporting.
			The protocol for critical appraisal of evidence accounts for assessment of certainty of evidence with attention to risk of bias, precision, directness, consistency, and publication bias.
			The conflicts of interest of study authors related to selected evidence is appraised.
Articulation of information	PHASE III: Presenting Evidence	Articulate the information	The evidence (or evidentiary gaps) about potential benefits relevant to each option is summarized in balanced ways, not expected to bias the interpretation.
			The evidence (or evidentiary gaps) about potential harms relevant to each option is summarized in balanced ways, not expected to bias the interpretation.

			The evidence (or evidentiary gaps) is summarized in ways that are easy to understand.
			The certainty of the evidence is described in ways that are easy to understand.
			The evidence summarization process is described in ways that are easy understand.
			The funding used to summarize the evidence (and develop the PDA) is reported.
		Manage COI	The conflicts of interest of people who summarize evidence are collected again before publishing the PDA.
			Any change to the conflicts of interest of people who summarize evidence are reported.
			Actions are taken to manage relevant conflicts of interest.
		Report	The methods used to translate evidence to risk communication formats are reported.
			The approach to readability of summarized evidence is reported.
			The summarization process is reported publicly.
			The conflict of interest of people who summarize evidence are reported publicly.
		Review	The PDA is reviewed externally.
Updating	PHASE IV: Post-publication update	Update	The PDA content is updated when new evidence becomes available.