

Supplementary information: Semi-structured interview-guide

As a general guide the following themes/questions were addressed during the (focus group) interviews (translated from Dutch). Depending on the background of the interviewee(s) minor adaptations have been made.

Introduction

- Welcome
- Introduction interviewer/chair (and assistant)
- Background study:
 - o Introduction of the background and the goals of the interview/focus group (including introduction of concepts pharmacogenetics and personalized medicine)
 - o Explanation of procedure during and after (focus group) interview
 - o Clarification of expectations to explain to the interviewee/FG participants:
 - Invitation to discuss/share opinions and views/suggestions
 - Questions will be posed to respond to, no obligation
 - Role interviewer and assistant (minutes secretary/observer)
 - o Short introductions with (background and reason to participate of) interviewee/FG participants

Questions

- o Opening:
 - (Write down) what comes to your mind when you think about pharmacogenetics (in your daily work)?
 - a) Where is it currently applied?
 - b) How is it currently applied?
- o Vision:
 - How do you see application of pharmacogenetics in primary care in the next 5 years?
 - a) Where is it applied?
 - b) With what purpose?
- o Advantages/disadvantages:
 - What advantages are there for application of pharmacogenetics in primary care?
 - What disadvantages are there for application of pharmacogenetics in primary care?
- o Needs:
 - What would you need to apply pharmacogenomics in a sensible way (if needed, give examples such as: information, organization, actors, your own role)
- o Procedure/roles and responsibilities:
 - Can you describe your ideal procedure for application of pharmacogenetics in primary care?
 - a) Information-exchange:
 - o What information is relevant?
 - o How should that information be provided (orally/written/online etc.)?
 - o When should this information be provided?
 - o Where would you want to go if you have further questions?
 - b) Organisation:
 - o When should the test be done?
 - o Where is the sample (blood/saliva) taken?
 - o How long would you want to wait for the results?
 - o What happens after the test-results?
 - o Who pays for the test (and how much does it cost maximally)?
 - c) Health care providers involved:
 - o Who requests the PGx test and when?
 - o Who is giving information abt. the test?
 - o Who interprets the test results?
 - o Who discusses the results of the test (with whom)?
 - o Does the patient receive other information (e.g. pamphlet/gene-profile on a card)?
 - o What is role of pharmacists?
 - o What is role of GPs?
 - o What is role of the lab?
 - d) Role of the patient:
 - o How do you see the role of the patient?
 - Consent of the patient?
 - Are pharmacogenetics profiles determined on patients request?

- *Implementation:*
 - *Which factors are relevant for implementation of pharmacogenetics in primary care?*
 - *Which factors inhibit implementation of pharmacogenetics in primary care?*
- *Conclusion:*
 - *The goal was to elucidate your views and expectation about the implementation of pharmacogenetics in practice. Is there anything that has not been discussed, but requires further attention?*