Appendices

Appendix 1. Survey

Screen 1

Scı	een	1			
-	What is your age?				
-	Wh	at is your sex?			
		Male			
		Female			
-	Wh	at is your current profession (licensed or in training)?			
		Rheumatologist			
		Physician assistant			
		Nurse specialist			
		Rheumatology nurse			
		Other, namely:			
-	Hov	w many years do you work in your current profession?			
-	Wh	at is your work setting (multiple answers are possible)?			
		Academic hospital			
		Teaching hospital			
		General hospital			
		Other, namely:			
Scı	een	2			
-	Hov	w much do you know about shared decision making? Please score your knowledge on a scale from 0 (=no			
	kno	wledge) to 10 (=comprehensive knowledge)?			
Scı	een	3			
-	Sha	ared decision making is a process in which healthcare professionals and patients work together to make			
	dec	isions. How do you define shared decision making?			
Scı	een				
-	-	our opinion, are the following communicative behaviors essential for shared decision making or not?			
	Ple	ase tick the box if you consider a communicative behavior essential for shared decision making.			
		Informing the patient about the possible pros and cons of the treatment options			
		Informing the patient how big the chances of these pros and cons are			

 \square Informing the patient that a decision has to be made ☐ Allowing the patient time by making the decision in the next consultation ☐ Asking the patient about his/her personal values and preferences ☐ Letting the patient decide after giving thorough information ☐ Asking the patient to bring someone to the consultation \square Explaining to the patient that there is more than one treatment option ☐ Explaining to the patient why a certain treatment is chosen ☐ Making the decision together with the patient ☐ Explaining to the patient that his/her opinion is important in making the decision \square Letting the patient repeat the given information ☐ Giving information in more ways than only verbally (e.g. leaflets, websites) Screen 5 How do you feel about applying shared decision making in clinical practice? ☐ Very positive ☐ Positive ☐ Neutral ☐ Negative Very negative Could you please motivate your answer to the above question? Screen 6 Which types of rheumatic diseases do you consider appropriate for shared decision making (multiple answers are possible)? ☐ Rheumatoid arthritis Psoriatic arthritis ☐ Ankylosing spondylitis ☐ Monoarthritis ☐ Polymyalgia rheumatica ☐ Scleroderma ☐ Grout ☐ Osteoarthritis ☐ Osteoporosis

Supplementary material

RMD Open

☐ Fibromyalgia ☐ Other, namely Which types of decisions do you consider appropriate for shared decision making (multiple answers are possible)? □ Diagnostic testing ☐ Starting and/or stopping medication ☐ Adjusting medication doses ☐ Administering single medication doses □ Operation Paramedical treatment (e.g. physical therapy, occupational therapy, and dietetics) ☐ Making lifestyle changes (e.g. diet, physical activity, and smoking) ☐ Other, namely: Could you please motivate your answers to the above questions? Screen 7 What is your usual decision making style? ☐ I make decisions alone ☐ I make decisions after seriously considering my patient's opinion ☐ My patient and I share responsibility for making decisions ☐ My patient makes decisions after seriously considering my opinion ☐ My patient makes decisions alone Screen 8 In what percentage of the situations appropriate for shared decision making do you apply shared decision making? □ 0% □ 25% □ 50% □ 75% □ 100%

Supplementary material

RMD Open

Screen 9

-	- If you do not always apply shared decision making, please tick up to three reasons for not applying s				
	dec	ision making.			
		Not applicable (i.e. I always apply shared decision making)			
		Shared decision making is often too complex for patients			
		Patients want me to make the decision			
		I often know better than patients what the best decision is			
		Shared decision making is not professional			
		I do not know exactly how to apply shared decision making			
		I do not have enough time to apply shared decision making			
		Shared decision making is incompatible with standardized treatment protocols			
		I forget to apply shared decision making			
		My colleagues do not have a positive attitude toward shared decision making			
		My employer does not support shared decision making			
		Other, namely:			
Scr	een	10			
-	Do you have problems with the application of shared decision making?				
		Not applicable (i.e. I never apply shared decision making)			
		No			
		Yes, namely:			

Screen 11

- What do you need in order to improve the application of shared decision making in clinical practice?

Appendix 2. Overview of communicative behaviors predefined as essential for SDM, not essential for SDM, and conflicting with SDM

Communicative behaviors essential for SDM

Informing the patient that a decision has to be made

Explaining to the patient that there is more than one treatment option

Informing the patient about the possible pros and cons of the treatment options

Informing the patient how big the chances of these pros and cons are

Explaining to the patient that his/her opinion is important in making the decision

Asking the patient about his/her personal values and preferences

Making the decision together with the patient

Communicative behaviors not essential for SDM

Asking the patient to bring someone to the consultation

Allowing the patient time by making the decision in the next consultation

Giving information in more ways than only verbally (e.g. leaflets, websites)

Letting the patient repeat the given information

Communicative behaviors conflicting with SDM

Explaining to the patient why a certain treatment is chosen

Letting the patient decide after giving thorough information

Abbreviations: SDM, shared decision making.

Appendix 3. Examples of participants' definitions of SDM that were rated as concordant, discordant, and inconclusive

Participants' definitions	Ratings (reasons for ratings)
"After discussing the possible treatment options and their associated pros	Concordant (refers to at least two communicative behaviors essential for SDM: "Explaining to
and cons, making an appropriate decision together WITH the patient,	the patient that there is more than one treatment option", "Informing the patient about the
considering his/her needs, wishes, and motivations." (rheumatologist,	possible pros and cons of the treatment options", "Asking the patient about his/her personal
man, 38 years old)	values and preferences", and "Making the decision together with the patient").
"Exploring what the patient's treatment expectations are, but also what is	Concordant (refers to at least two communicative behaviors essential for SDM: "Explaining to
important to him/her in life on a daily basis. Discussing possible treatment	the patient that there is more than one treatment option", "Asking the patient about his/her
options and, from this, making a decision together with the patient."	personal values and preferences", and "Making the decision together with the patient").
(rheumatologist, woman, 40 years old)	
"Individualized treatment arrived at by the physician and the patient."	Discordant (does not refer to any communicative behavior essential for SDM).
(rheumatologist, man, 50 years old)	
"SDM means that the patient is able to have input, but that the physician	Discordant (refers to communicative behavior conflicting with SDM: "Explaining to the patient
decides how to manage treatment." (rheumatology nurse, woman, 62	why a certain treatment is chosen").
years old)	
"Making treatment decisions together." (rheumatologist, man, 46 years	Inconclusive (too short).
old)	
"As much as possible, select the best treatment available based on	Inconclusive (too ambiguous).
sound reasoning." (nurse specialist, man, 56 years old)	
Abbroviations: SDM shared decision making	l

Abbreviations: SDM, shared decision making.

Appendix 4. Participants' answers to questions about their attitudes and experiences of SDM in rheumatology

Questions	Physicians (n=77)	Nurses (n=70)	P-value
How do you feel about applying SDM in clinical practice?*, n (%)			
(Very) negative	0 (0)	0 (0)	0.04
Neutral	6 (8)	0 (0)	
Positive	44 (57)	39 (56)	
Very positive	27 (35)	31 (44)	
What is your usual decision making style?, n (%)			
I make decisions alone	0	0	0.05
I make decisions after seriously considering my patient's opinion	9 (12)	3 (4)	
My patient and I share responsibility for making decisions	60 (78)	51 (73)	
My patient makes decisions after seriously considering my opinion	8 (10)	16 (23)	
My patient makes decisions alone	0	0	
In what percentage of the situations appropriate for SDM do you apply SDM?*, n (%)			
0%	0 (0)	0 (0)	<0.01
25%	0 (0)	2 (3)	
50%	15 (19)	7 (10)	
75%	52 (68)	39 (56)	
100%	10 (13)	22 (31)	

^{*}Significant difference between physicians and nurses (p<0.05).

Abbreviations: SDM, shared decision making.