

## Supplementary Online Content

Oppenheim IM, Lee EM, Vasher ST, Zaeh SE, Hart JL, Turnbull AE. Effect of intensivist communication in a simulated setting on interpretation of prognosis among family members of patients at high risk of intensive care unit admission: a randomized trial. *JAMA Netw Open*. 2020;3(4):e201945. doi:10.1001/jamanetworkopen.2020.1945

**eFigure 1.** Definition of Difference in Belief

**eFigure 2.** Study Flow Diagram

**eTable 1.** Unadjusted Models of the Effect of Intensivist's Response on Family Member Understanding of the Intensivist, Belief About Prognosis, and Difference in Belief

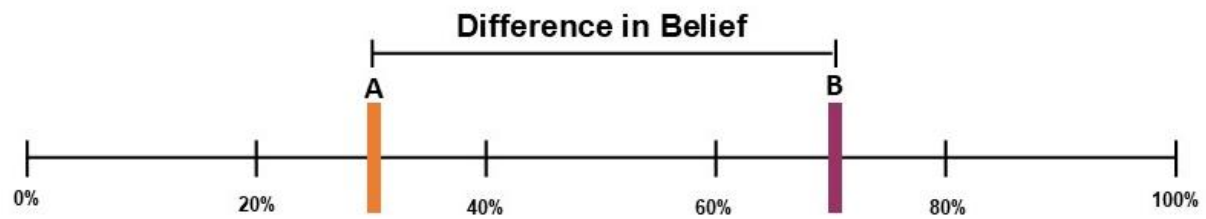
**eTable 2.** Effect of Intensivist's Response on Family Member Confidence in Their Own Prognostic Estimate and Their Perceived Prognostic Estimate of the Intensivist



**eTable 3.** Sensitivity Analysis of Effect of Intensivist's Response on Family Member Confidence in Their Own Prognostic Estimate and Their Perceived Prognostic Estimate of the Intensivist

**eReference.**

This supplementary material has been provided by the authors to give readers additional information about their work.

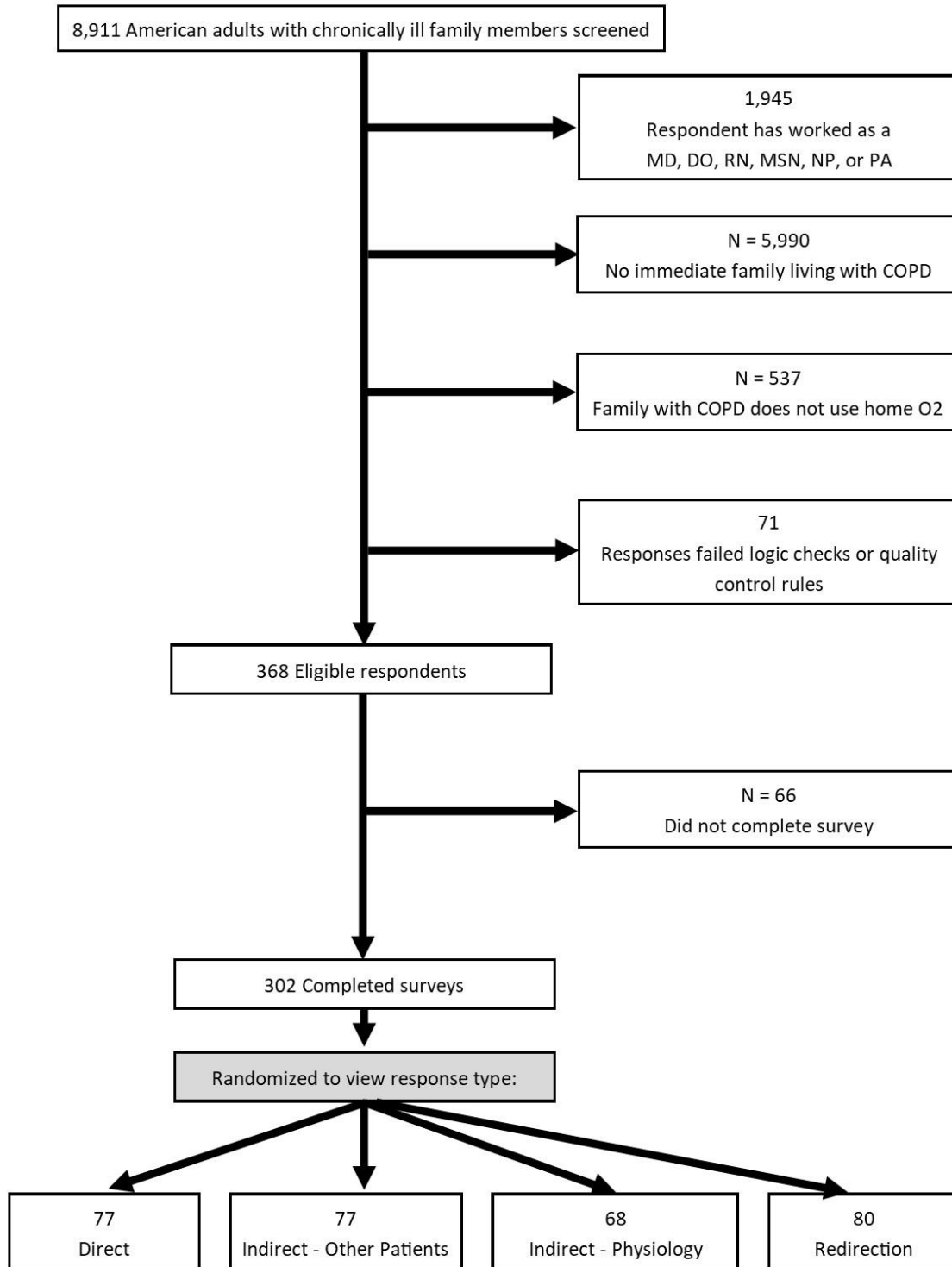
**eFigure 1.** Definition of Difference in Belief



- A**  **Participant's** answer to: "If you had to guess, what do you think the doctor thinks is the chance that your loved one will survive this hospitalization?"
- B**  **Participant's** answer to: "What do you think are the chances that your loved one will survive this hospitalization?"

**eFigure 1:** Difference in Belief is defined as the participant's prognostic estimate (**B** in eFigure 1) minus their perception of the intensivist's prognostic estimate (**A** in eFigure 1).<sup>1</sup>

**eFigure 2.** Study Flow Diagram



**eTable 1.** Unadjusted Models of the Effect of Intensivist’s Response on Family Member Understanding of the Intensivist, Belief About Prognosis, and Difference in Belief

Model	$\beta$ (95% CI)	P value
<b>Question 1:</b> “What do you think <i>the doctor thinks</i> is the chance that your loved one will survive this hospitalization?” <sup>a</sup>		
<b>Model 1:</b> unadjusted		
Direct	<b>Ref</b>	-
Indirect – Other Patients	10 (1, 19)	.03
Indirect – Physiology	11 (2, 21)	.02
Redirection	22 (13, 31)	<.0001
<b>Question 2:</b> “What do <i>you</i> think are the chances that your loved one will survive this hospitalization?” <sup>a</sup>		
<b>Model 2:</b> unadjusted		
Direct	<b>Ref</b>	-
Indirect – Other Patients	8 (-1, 17)	.10
Indirect – Physiology	7 (-2, 16)	.14
Redirection	17 (8, 26)	.0002
<b>Difference in Belief</b> = (response to Question 2) – (response to Question 1)		
<b>Model 3:</b> unadjusted		
Direct	<b>Ref</b>	-
Indirect – Other Patients	-2 (-9, 5)	0.54
Indirect – Physiology	-4 (-12, 3)	0.23
Redirection	-4 (-11, 3)	0.22
<p>a. Measured on a 0 – 100 scale, with higher scores indicating a greater likelihood of survival.  <b>Abbreviations:</b> CI, confidence interval; Ref, reference</p>		

**eTable 2.** Effect of Intensivist’s Response on Family Member Confidence in Their Own Prognostic Estimate and Their Perceived Prognostic Estimate of the Intensivist

	Intensivist’s Response				Difference in proportions <sup>c</sup> (95% CI)	P value
	Direct (n=77)	Indirect – Other patients (n=77)	Indirect – Physiology (n=68)	Redirection (n=80)		
Confident they know what the doctor thinks <sup>a</sup> n (%)	52 (68%)	48 (62%)	–	–	.05 (-.11, .21)	0.61
		–	43 (63%)	–	.04 (-.13, .21)	0.71
		–	–	51 (64%)	.04 (-.12, .20)	0.74
Confident in their own understanding <sup>b</sup> n (%)	59 (77%)	50 (65%)	–	–	.12 (-.04, .27)	0.16
		–	53 (78%)	–	-.01 (-.16, .14)	1.00
		–	–	58 (73%)	.04 (-.11, .19)	0.68

a. Response to the question “How confident are you that you know what the doctor thinks your loved one’s chances for surviving the hospitalization are?” using on a 5-point Likert scale, with higher scores indicating greater confidence. Responses scored a 4 or 5 were analyzed as “Confident.”

b. Response to the question “How confident are you that you understand your loved one’s chances for surviving the hospitalization?” using on a 5-point Likert scale, with higher scores indicating greater confidence. Responses scored a 4 or 5 were analyzed as “Confident.”

c. The difference in the proportion of respondents who are confident compared to those randomized to view a direct response to the question.

**Abbreviations:** CI, confidence interval; Ref, reference

**eTable 3.** Sensitivity Analysis of Effect of Intensivist’s Response on Family Member Confidence in Their Own Prognostic Estimate and Their Perceived Prognostic Estimate of the Intensivist

	Intensivist’s Response				Difference in proportions <sup>c</sup> (95% CI)	P value
	Direct (n=77)	Indirect – Other patients (n=77)	Indirect – Physiology (n=68)	Redirection (n=80)		
Confident they know what the doctor thinks <sup>a</sup> n (%)	65 (84%)	61 (79%)	–	–	.05 (-.08, .19)	0.53
		–	56 (73%)	–	.02 (-.11, .16)	0.91
		–	–	64 (80%)	.04 (-.02, .18)	0.61
Confident in their own understanding <sup>b</sup> n (%)	68 (88%)	62 (81%)	–	–	.08 (-.05, .20)	0.27
		–	59 (87%)	–	-.02 (-.11, .14)	0.98
		–	–	70 (88%)	.01 (-.10, .12)	1.00

a. Response to the question “How confident are you that you know what the doctor thinks your loved one’s chances for surviving the hospitalization are?” using on a 5-point Likert scale, with higher scores indicating greater confidence. Responses scored 3, 4, or 5 were analyzed as “Confident.”

b. Response to the question “How confident are you that you understand your loved one’s chances for surviving the hospitalization?” using on a 5-point Likert scale, with higher scores indicating greater confidence. Responses scored 3, 4, or 5 were analyzed as “Confident.”

c. The difference in the proportion of respondents who are confident compared to those randomized to view a direct response to the question.

**Abbreviations:** CI, confidence interval

**eReference.**

1. White DB, Ernecoff N, Buddadhumaruk P, et al. Prevalence of and Factors Related to Discordance About Prognosis Between Physicians and Surrogate Decision Makers of Critically Ill Patients. *JAMA*. 2016;315(19):2086. doi:10.1001/jama.2016.5351