

Online Supplement — Table of Contents

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Recruitment Process

- Screen patient (mostly Group Practice Directors will do this and let you know which patients may be eligible). Eligible patients must
 - Understand spoken and written English
 - Be at least 18 years old
 - Be new: the patient should be new to the dental clinic and should not have completed an intake with a student dentist before (an intake involves questions like “what is your dental history? Do you have any allergies?” Etc.)
 - The participants should be patients of third- and fourth-year dental students who have consented to participate.
- Check out the patient schedule of student dentists on the clinic’s board. Look at this schedule and write down the dentists’ who are going to do “treatment planning” and their chair numbers.
- Go to those student dentists with new patients, introduce yourself and ask if they are treating a brand-new patient. If yes, briefly talk to both the patient and the dentist about the study.
 - Make sure dentist is interested, and consent dentist if he/she is not already consented.
 - If patient seems interested, describe the study, give them consent forms, and have them sign them, date them.

Instructions for Video Recall

Okay, now I'm going to have you watch a part of the interaction with the student dentist, thinking about how you were feeling *during the interaction*. I'm going to have you use this dial to rate how you were feeling. I want you to rate how much *unpleasant emotion* you were feeling. By *unpleasant emotion*, we mean any bad feeling, like anxious, afraid, angry, upset, and other kinds of bad feelings. I want you to move the joystick *as much as you need to or as little as you need to*, so that it's always reflecting how you were feeling *at that moment* during the interaction. The joystick rests at the neutral place, so think of that as "No unpleasant emotion." Only use the top half of this bar, or anywhere from "no unpleasant emotion" to "extreme unpleasant emotion." Remember, we'd like you to rate how you *were* feeling during the discussion, *not* how you're feeling now as you're watching it.

Patient-Provider Coding System

The goal of this project is to understand ways in which patients and providers communicate in dental practice. You will watch approximately 20 minutes of patients' initial appointments in a dental training clinic, and code both patient and provider behavior.

A few key overview points about this coding:

- You will assign a code for each person for each 30-second interval.
- You will consider both verbal and nonverbal behaviors.
- If multiple behaviors occur during an interval, code the behavior that is higher on the list below (unless otherwise noted; e.g., if there is a provider action in the interval you should code ANE/AWE instead of any other codes).

Patient Behaviors		
Code	Description	Example(s)
Q (Question)	Asks a question.	“Are you going to work on the molar today?” “Is that instrument clean?”
DIS (Discomfort)	Expresses current discomfort (either explicitly or implicitly). <i>Note.</i> Description of previous or general discomfort (e.g., pain associated with previous dental work) should be coded as “I” instead.	“Umph” (or other sound that appears to indicate discomfort) “The crown has been bothering me.”
I (Information/response)	Responds to question and/or otherwise provides information.	“I don’t really check my blood pressure at home.”
OT (Other)	Expresses something of note but not in the above categories (e.g., small talk unrelated to the appointment; scheduling; specify what in comments). Includes non-verbal acknowledgements.	Patient nods in agreement
NO (No codeable content)	Poor audio quality, no patient-provider interaction (e.g., patient is completing a questionnaire), or content that does not fall under other categories (e.g., patient answering a phone call during appointment).	

Provider Behaviors

Code	Explanation	Example
ANE (Action without explanation)	Takes action (e.g., puts blood pressure cuff on patient, leaves the room) without a clear explanation of what he/she is/will be doing.	“Open your mouth please.” (without explaining why)
AWE (Action with explanation)	Takes action (e.g., puts blood pressure cuff on patient, leaves the room) after/while explaining what he/she will do/is doing.	“Now I’m going to feel your lymph nodes.”
QF (Question - facts)	Asks a question related to health facts.	“Have you been diagnosed with any medical conditions?” “When was your last visit to the dentist?”
QE (Question - experience)	Asks a question related to patient’s <i>experience</i> or perception.	“How is the crown?” “Any unpleasant dental visits in the past?”
SI (Superficial information/response)	Gives a brief explanation, either in response to a patient question or unprompted, that is unclear or dismissive.	“No” (response to detailed question, while looking down at notes) “You need to relax” (in response to high blood pressure)
DI (Detailed information/response)	Gives a detailed explanation, either in response to a patient question or unprompted, that is clear or encouraging.	“Today we will take some x-rays and I will ask you about your dental history.”
OT (Other)	Something not in the above categories (e.g., small talk unrelated to the appointment; scheduling; always specify in comments).	
NO (No codeable content)	Poor audio quality, no patient-provider interaction (e.g., patient is completing a questionnaire), or content that does not fall under other categories (e.g., talking to a colleague).	