

Supplementary Notes 1. Plain language genomic test report templates

Brett GR, Ward A, Bouffler SE, Palmer EE, Boggs K, Lynch F, Springer A, Nisselle A, Stark Z. *Co-design, implementation, and evaluation of plain language genomic test reports.* npj Genomic Medicine 2022

Plain language genomic test report templates developed in the above study are enclosed in the following order:

- page 2: *de novo* dominant
- page 3: inherited autosomal dominant
- page 4: autosomal recessive
- page 5: X-linked inherited
- page 6: X-linked de novo
- page 7: mitochondrial
- page 8: variant(s) of unknown significance with high clinical relevance (i.e., strongly suspected to be causing the phenotype)
- page 9: uninformative result (i.e., no variants reported)

These plain language genomic test report templates were designed in Microsoft Word using Microsoft Forms fields. Use of these fields enables sections to be locked against changes to the template, while still enabling personalisation of relevant content.

When the document was 'unlocked', the templates were fully modifiable, allowing form fields to be added, edited or deleted.

When the document was 'protected' (enabled in the 'Developer' tab in Microsoft Word), the template content was 'locked' so only the fields in grey could be modified, along with the final sections of '*What happens next*', '*Your genetic team*', and '*Community supports*'.



Parents' names	Parents' names
	Study ID: A Testing Laboratory:
	Sample IDs: Patient – 22W , Mum – 22W , Dad – 22W
Reason for test	Unexplained seizures in Patient
About the test	We performed a ' trio whole genome sequencing' (trio WGS) test. This test examines your and Patient's genetic information to try and find a cause for Patient's condition. You can find links to more information about this test at the bottom of this document.
Patient's result	KCNQ2-related epileptic encephalopathy
	Gene: KCNQ2
	Variant: NM_000000: c.000C>G, p.Arg000Cys
Inheritance and recurrence	Inheritance pattern: Patient has not inherited the <i>KCNQ2</i> gene variant, it has occurred in him/her for the first time (it is <i>de novo</i>).
	Parents
	Child Child
	Recurrence: Parents' names, you have a low chance of recurrence in future pregnancies for this condition. You have options for testing to avoid a recurrence and can discuss these in more detail with your genetics team.
What happens next	Clinical recommendations: You will be advised by the Neurology team whether any changes to Patient's seizure medication are necessary.
	Data storage and re-analysis: Your and Patient 's genomic data will be stored securely and can be re-analysed in the future if new clinical questions arise.
Your genetic team	We will work together with the other medical teams involved in Patient's care.
	Clinical geneticist:
	Genetic counsellor:
	Genetics follow up:
Community supports	Further resources and community support networks:
	Genomics Info - <u>genomicsinfo.org.au</u>
	SWAN Australia - <u>swanaus.org.au</u>
	Genetic Alliance Australia - <u>geneticalliance.org.au</u> Scan the QR code for n
	MedlinePlus Genetics - <u>medlineplus.gov/genetics</u> information on genon



Parents' names	Parents' names							
	Study ID: A Testing Laboratory:							
	Sample IDs: Patient – 22W , Mum – 22W , Dad – 22W							
Reason for test	Unexplained cardiac arrest							
About the test	We performed a ' trio whole genome sequencing' (trio WGS) test. This test examines your and Patient's genetic information to try and find a cause for Patient's condition. You can find links to more information about this test at the bottom of this document.							
Patient's result	Long QT syndrome							
	Gene: SCN5A							
	Variant: NM_000000: c.000C>G, p.Arg000Cys							
Inheritance and	Inheritance pattern: The SCN5A gene variant in Patient has been inherited from mum/dad.							
recurrence	Recurrence: Parents' names, you have a 1 in 2, or 50%, chance of recurrence in each future pregnancy for the two of you. You have options for testing to avoid a recurrence and can discuss these in more detail with your genetics team. mum/dad, other members of your family are also at risk of Long QT syndrome.							
	Parents							
	Child(ren)							
	UNAFECTED AFFECTED 50% chance 50% chance							
What happens next	Clinical recommendations: The Cardiology team will discuss management options with you. mum/dad, we will refer you to a cardiology specialist and we will discuss recommendations for testing other family members further.							
	Data storage and re-analysis: Your and Patient's genomic data will be stored securely and can be re-analysed in the future if new clinical questions arise.							
Your genetic team	We will work together with the other medical teams involved in Patient's care.							
	Clinical geneticist:							
	Genetic counsellor:							
	Genetics follow up:							
Community supports	Further resources and community support networks:							
	Genomics Info - <u>genomicsinfo.org.au</u>							
	SWAN Australia - <u>swanaus.org.au</u>							
	Genetic Alliance Australia - <u>geneticalliance.org.au</u> Scan the QR code for mo							
	MedlinePlus Genetics - <u>medlineplus.gov/genetics</u> information on genomic							



Parents' names	Parents' names								
	Study ID: A Testing Laboratory:								
	Sample IDs: Patient – 22W , Mum – 22W , Dad – 22W								
Reason for test	Congenital diarrhoea								
About the test	We performed a ' trio whole genome sequencing' (trio WGS) test. This test examines your and Patient's genetic information to try and find a cause for Patient's condition. You can find links to more information about this test at the bottom of this document.								
Patient's result	Microvillus inclusion disease								
	Gene: MYO5B								
	Variant: NM_000000: c.000C>G, p.Arg000Cys and c.000A>C, p.Glu000*								
Inheritance and recurrence	Inheritance pattern: The two <i>MYO5B</i> gene variants in Patient have been inherited. Patient has inherited the c.000C>G, p.Arg000Cys from mum and the c.000A>C, p.Glu000* from dad. Parents' names, you are both healthy 'carriers' for microvillus inclusion disease.								
	Recurrence: Parents' names, you have a 1 in 4, or 25%, chance of recurrence in each future								
	pregnancy for the two of you. You have options for testing to avoid a recurrence and can								
	discuss these in more detail with your genetics team.								
	Parents								
	Child(ren)								
	25% chance 50% chance 25% chance								
What happens next	Clinical recommendations: You will be advised by the Gastroenterology team whether any changes to Patient's medication are necessary.								
	Data storage and re-analysis: Your and Patient's genomic data will be stored securely and								
	can be re-analysed in the future if new clinical questions arise.								
Your genetic team	We will work together with the other medical teams involved in Patient's care.								
	Clinical geneticist:								
	Genetic counsellor:								
	Genetics follow up:								
Community supports	Further resources and community support networks:								
	Genomics Info - <u>genomicsinfo.org.au</u>								
	SWAN Australia - <u>swanaus.org.au</u>								
	Genetic Alliance Australia - <u>geneticalliance.org.au</u> Scan the QR code for I								
	MedlinePlus Genetics - <u>medlineplus.gov/genetics</u> information on genor								



Parents' names	Parents' names						
	Study ID: A Testing Laboratory:						
	Sample IDs: Patient – 22W , Mum – 22W , Dad – 22W						
Reason for test	Seizures and developmental delay						
About the test	We performed a ' trio whole genome sequencing' (trio WGS) test. This test examines your and Patient's genetic information to try and find a cause for Patient's condition. You can find links to more information about this test at the bottom of this document.						
Patient's result	Menke's disease						
	Gene: ATP7A						
	Variant: NM_000000: c.000A>C, p.Glu000*						
Inheritance and recurrence	Inheritance pattern: Mum, Patient has inherited the ATP7A gene variant from you. Mum, you are a healthy 'carrier' for Menke's disease, and other members of your family may also be carriers.						
	Recurrence: Parents' names, you have a 1 in 4, or 25%, chance of recurrence in each future pregnancy for the two of you. You have options for testing to avoid a recurrence and can discuss these in more detail with your genetics team.						
	Parents						
	Child(ren)						
	Boys Girls UNAFFECTED AFFECTED UNAFFECTED CARRIER 50% chance 50% chance 50% chance 50% chance						
What happens next	Clinical recommendations: The Metabolic team will discuss management options with you.						
	Data storage and re-analysis: Your and Patient's genomic data will be stored securely and can be re-analysed in the future if new clinical questions arise.						
Your genetic team	We will work together with the other medical teams involved in Patient's care.						
	Clinical geneticist:						
	Genetic counsellor:						
	Genetics follow up:						
Community supports	Further resources and community support networks:						
	Genomics Info - <u>genomicsinfo.org.au</u>						
	SWAN Australia - <u>swanaus.org.au</u>						
	 Genetic Alliance Australia - <u>geneticalliance.org.au</u> MedlinePlus Genetics - <u>medlineplus.gov/genetics</u> Scan the QR code for modified provided information on genomic 						
	MedlinePlus Genetics - <u>medlineplus.gov/genetics</u> information on genomi						



Parents' names	Parents' names
	Study ID: A Testing Laboratory:
	Sample IDs: Patient – 22W , Mum – 22W , Dad – 22W
Reason for test	Seizures and developmental delay
About the test	We performed a ' trio whole genome sequencing' (trio WGS) test. This test examines your and Patient's genetic information to try and find a cause for Patient's condition. You can find links to more information about this test at the bottom of this document.
Patient's result	Menke's disease
	Gene: ATP7A
	Variant: NM_000000: c.000A>C, p.Glu000*
Inheritance and	Inheritance pattern: Patient has not inherited the ATP7A gene variant, it has occurred in
recurrence	him/her for the first time (it is <i>de novo</i>). x y x x
	Parents
	X Y X Genetic variant
	Child
	Boy AFFECTED
	Recurrence: Parents' names, you have a low chance of recurrence in future pregnancies for this condition. You have options for testing to avoid a recurrence and can discuss these in
	more detail with your genetics team.
What happens next	Clinical recommendations: The Metabolic team will discuss management options with you.
	Data storage and re-analysis: Your and Patient's genomic data will be stored securely and can be re-analysed in the future if new clinical questions arise.
Your genetic team	We will work together with the other medical teams involved in Patient's care.
	Clinical geneticist:
	Genetic counsellor:
	Genetics follow up:
Community supports	Further resources and community support networks:
	Genomics Info - <u>genomicsinfo.org.au</u>
	SWAN Australia - <u>swanaus.org.au</u>
	 Genetic Alliance Australia - <u>geneticalliance.org.au</u> MedlinePlus Genetics - <u>medlineplus.gov/genetics</u> Scan the QR code for medineplus.gov/genetics
	Medimerius Genetics - <u>medimepius.gov/genetics</u> information on genomics



Parents' names	Parents' names
	Study ID: A Testing Laboratory:
	Sample IDs: Patient – 22W , Mum – 22W , Dad – 22W
Reason for test	Suspected optic neuropathy
About the test	We performed a ' trio whole genome sequencing' (trio WGS) test. This test examines your
	and Patient's genetic information to try and find a cause for Patient's condition. You can
	find links to more information about this test at the bottom of this document.
Patient's result	Leber hereditary optic neuropathy
	Gene: MT-ND4
	Variant: NC_000000: m.0000G>A, p.(Arg000His)
Inheritance and recurrence	Inheritance pattern:
	Parents
	Unaffected father Affected mother
	Child(ren)
What happens next	Child(ren)
What happens next	Child(ren) $$
What happens next	Child(ren)
	Child(ren) $$
	Child(ren) $\stackrel{\bullet}{\longleftrightarrow}$ $\stackrel{\bullet}{\longleftrightarrow}$ $\stackrel{\bullet}{\longleftrightarrow}$ $\stackrel{\bullet}{\longleftrightarrow}$ $\stackrel{\bullet}{\longleftrightarrow}$ $\stackrel{\bullet}{\longleftrightarrow}$ $\stackrel{\bullet}{Imaffected}$ Affected Recurrence: Clinical recommendations: The Metabolic team will discuss management options with you. Data storage and re-analysis: Your and Patient's genomic data will be stored securely and can be re-analysed in the future if new clinical questions arise.
	Child(ren) Child
	Child(ren) Child
Your genetic team	Child(ren) Child(ren
Your genetic team	Child(ren) Child
Your genetic team	Child(ren) Child
What happens next Your genetic team Community supports	Child(ren) Image: Im



Family Report Issued: dd/mm/yyyy

Parents' names	Parents' names
	Study ID: A Testing Laboratory:
	Sample IDs: Patient – 22W , Mum – 22W , Dad – 22W
Reason for test	Hydrops
About the test	We performed a ' trio whole genome sequencing' (trio WGS) test. This test examines your and Patient's genetic information to try and find a cause for Patient's condition. You can find links to more information about this test at the bottom of this document.
Patient's result	No genetic diagnosis was made
	However, two gene variants were identified that may be indicative of Nemaline myopathy 2. At the present time, we do not have enough evidence to be certain they are responsible for Patient's condition.
	Gene: NEB
	Variant: NM_0000: c.000C>G, p.Arg000Cys (variant of uncertain significance) and c.000C>G, p.Arg000Cys (variant of uncertain significance)
Inheritance	The two <i>NEB</i> gene variants have been inherited from both of you. Patient has inherited the c.000C>G, p.Arg000Cys from Mum and the c.000C>G, p.Arg000Cys from Dad.
What happens next	Clinical recommendations: if applicable, can be deleted if not
	Data storage and re-analysis: Your and Patient's genomic data will be stored securely and can be re-analysed in the future if new clinical questions arise.
Your genetic team	We will work together with the other medical teams involved in Patient's care.
	Clinical geneticist:
	Genetic counsellor:
	Genetics follow up:
Community supports	Further resources and community support networks:
	Genomics Info - <u>genomicsinfo.org.au</u>
	SWAN Australia - <u>swanaus.org.au</u>
	 Genetic Alliance Australia - <u>geneticalliance.org.au</u> MedlinePlus Genetics - medlineplus.gov/genetics



Family Report Issued: dd/mm/yyyy

Parents' names	Parents' names							
	Study ID: A Testing Laboratory:							
	Sample IDs: Patient – 22W , Mum – 22W , Dad – 22W							
Reason for test	Unexplained seizures in Patient							
About the test	We performed a 'trio whole genome sequencing' (trio WGS) test. This test examines your							
	and Patient's genetic information to try and find a cause for Patient's condition. You can find links to more information about this test at the bottom of this document.							
Patient's result	No genetic diagnosis was made							
Possible reasons for	The cause of Patient's seizures may not be genetic							
result	The cause of Patient's seizures may be genetic, but							
	 the particular gene change causing his/her seizures may be difficult to detect 							
	and interpret with current technology and knowledge							
	 may be due to a change in a gene that is yet to be linked to health problems 							
What happens next	Clinical recommendations: if applicable, can be deleted if not							
	Data storage and re-analysis: Your and Patient's genomic data will be stored securely and can be re-analysed in the future if new clinical questions arise.							
Your genetic team	We will work together with the other medical teams involved in Patient's care.							
	Clinical geneticist:							
	Genetic counsellor:							
	Genetics follow up:							
Community supports	Further resources and community support networks:							
	Genomics Info - <u>genomicsinfo.org.au</u>							
	SWAN Australia - <u>swanaus.org.au</u>							
	Genetic Alliance Australia - <u>geneticalliance.org.au</u> Scan the QR code for mor							
	MedlinePlus Genetics - <u>medlineplus.gov/genetics</u> information on genomics							



Supplementary Notes 2. Family survey tool.

6	ation 1. Domographics									
Section 1: Demographics										
	rself. This can be used to help understand if certain trends in ticular group. This could be categorised by location, age, or									
Note: as some demographic data could identify individual respondents in areas with few acute care units, we will combine data for some analyses.										
1) What is your gender? Please select one option.										
Male Female	e Other Prefer not to answer									
a. If other, please specify										
2) What is your age? (years)										
3) What is your home postcode?										
4) What is the highest level of educ	ation you have completed? Please select one.									
□ Year 11 or below / □	Bachelor degree Dostgraduate degree									
Certificate 3 Year 12 or equivalent / Certificate 4	Graduate degree D Other (please specify)									
5) What is the combined income of tax? Please select one option.	all adults (including you) in your household per year before									
 Less than \$4,900 \$5,000 - \$9,999 \$10,000 - \$19,999 \$40,000 - \$49,999 	 \$50,000 - \$80,000 - \$150,000 or more \$60,000 - \$90,000 - \$119,999 \$70,000 - \$120,000 - \$149,999 									
6) What is your current marital stat	us?									
MarriedDe facto (living with a partner)	 Divorced/separated Widowed Widowed Other (specify) 									
a) If other, please specify										
7) How many children do you have	?									
 0 1 2 	□ 3 □ 6 □ 4 □ >6 □ 5									
a) How many of your childr	en are 15 years or younger?									
8) Do you have private health insur	ance?									
Yes No Unsure										



9) Is English the main language you use? Please select one option.

	Yes		No	
	a. If no, do you need assistan	ce reading English	?	
	Yes		No	
10)	Do you plan on having more ch	nildren? Please sele	ect one option.	
	Yes in the next 2 years	Yes in more the second seco	an 5 years 🛛 🗖	I am not currently planning to have more children
	Yes in the next 5 years	Yes but I'm no	ot sure when 🛛 🗖	Unsure

Section 2: Genomic Medicine and your Child's Family Report

We are gathering information about your experiences so far with genetic testing and genomic medicine. We will ask you to reflect and comment on your experiences with genomic testing, the layout of the family report, the information available on the family report, how you best understand information, and any recommendations you have to add to the report.

EXPERIENCES WITH GENOMIC TESTING

- 11) Before the ultra-rapid genomic testing for your child, did you have any experience with genetic conditions, e.g. personal history, family history, general knowledge? *Please select one option.*
- Yes
 No
 Unsure
 - a. If yes or unsure, please describe, including the name of the genetic condition if you know it.....
- 12) Before the ultra-rapid genomic testing for your child, did you have any experience with genetic testing, whether through a GP, specialist, genetics clinic, or an online test, e.g., non-invasive prenatal screening/testing (NIPS/NIPT), carrier/reproductive screening, ancestry testing, etc.? *Please select one option.*
- Yes
 No
 Unsure
 a. If yes or unsure, which genetic testing have you had experience with? *Please select all that apply.*

Non-invasive prenatal screening/testing (NIPS/NIPT) → reveal question c.		Ancestry testing	Pharmacogenomic testing
Carrier/reproductive screening – reveal question c. b. If other, please list		Nutrigenomic testing	Other→ <i>reveal</i> question b . and c.
c. Have you paid for any of thes	e tests?		
Yes 🛛	No		Unsure



- **13)** Which of the following best describes the outcome of your child's ultra-rapid genomic test? *Please select one option.*
- A genetic diagnosis was made
 More than one genetic
 Not sure diagnosis was made
 A partial genetic diagnosis was made (not
 A genetic diagnosis was not
 - all of my child's features were explained by made the genetic diagnosis)
- **14)** Do you recall receiving a family report with the outcome of your child's ultra-rapid genomic test? *Please select one option.*
- Yes No → SURVEY STOP "This survey asks for feedback about the family report. Please contact [relevant Genetic Counsellor] for a copy of the report for your child's ultra-rapid genomic test."
- □ Unsure → SURVEY STOP "This survey asks for feedback about the family report. Please contact [relevant Genetic Counsellor] for a copy of the report for your child's ultra-rapid genomic test."

LAYOUT OF THE FAMILY REPORT

15) How easy was it to find the result of your child's ultra-rapid genomic test in the family report? *Please select one option.*

Not at all	Not so	Neutral	Easy	Very easy
easy	easy			

- **16)** How helpful was the family report in understanding the result of your child's ultra-rapid genomic test? *Please select one option.*
- □ Not at all helpful □ Not so helpful □ OK □ Helpful □ Very helpful
- **17)** How satisfied were you with the general format (layout and style) of the family report? *Please* select one option.
- Not at all satisfied
 Not so satisfied
 Neutral
 Satisfied
 Very satisfied
- **18)** How satisfied were you that the family report was structured in a logical manner? *Please select one option.*
- Not at all satisfied Not so satisfied Neutral Satisfied Very satisfied
- 19) How helpful were visual aids (e.g. pictures, bolded text, section headings, etc.) in helping you understand the information in the family report? *Please select one option.*
 - □ Not at all helpful □ Not so helpful □ OK □ Helpful □ Very helpful
 - a. Please feel free to comment.....



INFORMATION AVAILABLE IN THE FAMILY REPORT

20) How easy is it to understand the language used in the family report? Please select one option.

Not at all	Not so	Neutral	Easy	Very easy
easy	easy			

- 21) Where medical terms are used in the family report, were they explained in a clear manner? *Please select one option.*
- □ Yes □ No \rightarrow reveal question a. □ Unsure \rightarrow reveal question a.
 - a. If no or unsure, please explain which terms weren't explained clearly and elaborate if you wish.....
- 22) Does the family report contain any unnecessary information? Please select one option.
- □ Yes \rightarrow reveal question a. □ No □ Unsure \rightarrow reveal question a.
 - a. If yes or unsure, please give examples of what information was unnecessary.....

[Q21 only for VUS or null result reports that include explanation of test limitations; piping from patient database:]

23) Did your family report explain any limitations of the test? Please select one option.

L Yes L No L Unsure	Yes	🗖 No	🖵 Unsure
---------------------	-----	------	----------

- 24) Did you find it helpful to have a list of which genetic health professionals (your genetic team) are involved in your child's care in the family report? *Please select one option.*
- □ Not at all helpful □ Not so helpful □ OK □ Helpful □ Very helpful
- **25)** How easy was it to find sources of further information on the family report? *Please select one option.*
 - □ Not at all easy □ Not so easy □ Neutral □ Easy □ Very easy
 - a. Please feel free to comment if there are other types of information you would find helpful.....
- 26) Using the information in the family report, if you were to have another child, what is the chance that the condition would occur again? *Please select one option.*
- □ Less than 1 in 100
 □ Less than 1 in 10
 □ 1 in 4
 □ 1 in 2
 □ 3 in 4
 □ Definite (less than 1%)

 (less than 1%)
 (up to 10%)
 (25%)
 (50%)
 (75%)
 (100%)

[Q25 will not appear for respondents who chose 'I'm not currently planning to have more children' in Q8:]

27) Using the information in the family report, do you feel you have enough information for future family planning? *Please select one option.*

□ Yes □ No □ Unsure

a. If no or unsure, please explain.....



- 28) Using the information on the family report, would you/have you felt confident explaining the result of your child's ultra-rapid genomic test to someone else e.g. family or friends? *Please select one option.*
 - □ Yes □ No □ Unsure
 - a. If no or unsure, please explain.....
- 29) Using the information in the family report, do you feel confident explaining to other family members whether or not they have a chance of being affected by the same condition as your child and/or having a child with the same condition? *Please select one option.*
- □ Yes □ No □ Unsure
 - a. If no or unsure, please explain.....
- **30) Who have you have shared this report with?** *Please select all that apply and provide details of their relationship to you e.g. aunt, social worker. Please do not provide individual names or contact details.*
- Other Health ProfessionalsImage: FriendsImage: No one
- Family
 Other (specify)
 - a. If other, please specify.....

HOW YOU BEST UNDERSTAND INFORMATION

31) When something is explained to you, is it easier to understand fractions (e.g., 'there's a 1 in 2 (1/2) chance that the coin will be heads') or percentages (e.g., 'there's a 50% chance that the coin will be heads')? *Please select one option.*

□ Fractions □ Percentages □ No difference □ Not sure

- 32) When reading or watching the news, how helpful do you find tables and graphs to explain parts of the story? *Please select one option.*
- □ Not at all helpful □ Not so helpful □ OK □ Helpful □ Very helpful
- 33) When you hear a weather forecast, do you prefer predictions using percentages (e.g., 'there will be a 20% chance of rain today') or predictions using only words (e.g., 'there is a small chance of rain today')? *Please select one option.*
 - Percentages
 Words
 No difference
 Not sure
- 34) Do you have any suggestions or comments about the family report that would help us improve it?



Supplementary Notes 3. Clinician survey tool.

Section 1: About you

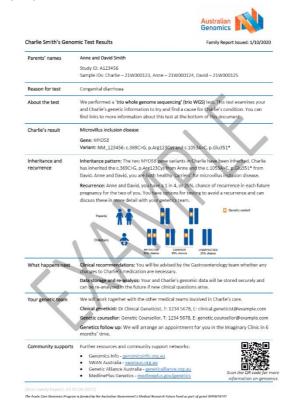
1.	Wł	nere do yo	u w	ork? Plea	ise sel	ect a	ıll hospit	als the	at apply.						
		ACT - The Canberra Hospital													
		NSW - Children's Hospital Westmead													
		NSW - John Hunter Children's Hospital													
		NSW - Ro	oyal	Prince Al	fred										
		NSW - Ro	oyal	Hospital ⁻	for Wo	omer	n Randw	vick							
		NSW - Sy	dne	y Childre	n's Ho	spita	al Randw	vick							
		NSW - W	estn	nead Hos	pital (adul	t)								
		NT - The	Roya	al Darwin	Hosp	ital									
		QLD - Qu	een	sland Chi	ldren'	s Ho	spital								
		QLD - Ro	yal E	Brisbane a	and W	ome	n's Hosp	oital							
		SA - Wor	nen'	s and Chi	ldren'	s Ho	spital								
		TAS - The	e Roy	/al Hobar	t Hosp	oital									
		VIC - Roy	al Cl	nildren's	Hospit	tal									
		VIC - Mo	nash	Health											
		VIC - Roy	al W	/omen's I	lospit	al									
		WA - Kin	g Ed	ward Me	moria	l Hos	spital								
		WA - Per	th C	hildren's	Hospi	tal									
		Other													
		a. If oth	ner,	please sp	ecify:										
2.	wł	nat is your	prir	narv role	? Plea	ISP SI	elect on	ontic	n.						
		linical Gen	•	-			cal Gene	•			0	Genet	ic Coun	sellor	
0					U	•					0				
3.	Но	w many y	ears	of profe	ssiona	l exp	perience	in cli	nical gene	etics o	do	you have	e? Pleas	e select	one
	ор	tion.													
0	</th <th>5</th> <th>0</th> <th>6-10</th> <th>С</th> <th>) 1</th> <th>1-15</th> <th>0</th> <th>16-20</th> <th>(</th> <th>0</th> <th>21-25</th> <th>0</th> <th>>25</th> <th></th>	5	0	6-10	С) 1	1-15	0	16-20	(0	21-25	0	>25	
	11.5			aa hayaa				files		- C				2020	
4.		w many fa wards? Pla			•		is part o	t the A	Acute Car	e Ger	or	nics prog	gram <u>tro</u>	<u>m 2020</u>	<u> </u>

o 1-2 o 3-5 o 6-10 o >10



Section 2: Your feedback on the plain language family report

This survey asks for feedback on the Acute Care Genomics plain language family report. See below for an example of the family report:



USE OF THE FAMILY REPORT

- **5.** Have you used a family report with any families from the Acute Care Genomics program? *Please select one option.*
- Yes
 No → EXIT: Thank you for your interest in our study but this survey is only for health professionals who have used the family report.
- 6. How have you used the family report(s)? Please select all that apply.
 - $\hfill\square$ At the start of the result disclosure consultation, to guide the discussion
 - During the result disclosure consultation, to help families' understanding and recollection
 - □ At the end of the result disclosure consultation, to give families a written/visual record to take as a summary
 - Other
 - a. If other, please tell us more ...
- **7.** How helpful is the family report as part of the result disclosure process? *Please select one option.*
- \circ Not at all helpful \circ Not so helpful \circ OK \circ Helpful \circ Very helpful
 - a. Please feel free to comment on the helpfulness of the family report...



- 8. Have you distributed a family report to anyone else apart from the family? E.g., Intensive care team
- o Yes o No o Unsure

a. If yes, who did you distribute it to and why? ...

- 9. Have you used the family report templates outside the Acute Care Genomics program?
- o Yes o No o Unsure
 - a. If yes, please tell us more...

LAYOUT OF THE FAMILY REPORT

- **10.** How easy was it to find the result of the ultra-rapid genomic test in the family report? *Please* select one option.
- oNot at all easyoNot so easyoNeutraloEasyoVery easy
- **11.** How satisfied were you with the general format (layout and style) of the family report? *Please* select one option.
- \circ Not at all satisfied \circ Not so satisfied \circ Neutral \circ Satisfied \circ Very satisfied
- **12.** How satisfied were you that the family report was structured in a logical manner? *Please select one option.*
- \circ Not at all satisfied \circ Not so satisfied \circ Neutral \circ Satisfied \circ Very satisfied
- **13.** How helpful were visual aids (e.g., pictures, bolded text, section headings, etc.) as part of the result disclosure discussion? *Please select one option.*
- Not at all helpful Not so helpful OK Helpful Very helpful
- 14. Please feel free to comment on any aspect of the layout...

INFORMATION AVAILABLE IN THE FAMILY REPORT

- 15. How easy do you think it is for families to understand the language used in the family report? *Please select one option.*Not at all easy
 Not so easy
 Neutral
 Easy
 Very easy
- **16.** Where medical terms are used in the family report, do you think they are explained in a sufficiently clear manner for families? *Please select one option.*
- o Yes o No o Unsure
 - a. If no or unsure, please explain which terms aren't explained clearly and elaborate if you wish...
- **17.** Does the family report contain any unnecessary information for families? *Please select one option.*
- o Yes o No o Unsure
 - a. If yes or unsure, please give examples of what information was unnecessary.....



- 18. Did you modify the family report beyond adding the details of the genetics team? E.g., community supports, clinical recommendations.
 Yes
 No
 Unsure
 - a. If yes, how easy was it to modify the family report?
- Not at all easy Not so easy Neutral Easy Very easy
 - b. What did you modify and why? ...

FINAL COMMENTS

19. Please feel free to provide any other comments about the family report. For example, any differences in how you used the report for informative or uninformative results.

Gender (n=51)	n (%)
female	40 (78)
male	11 (22)
Age (n=49)	mean (range)
in years	34.9 (22-52)
<pre>_ocation (state/territory) (n=48)</pre>	n (%)
Australian Capital Territory	0 (0)
New South Wales	15 (31)
Northern Territory	0 (0)
Queensland	2 (4)
South Australia	4 (8)
Tasmania	1 (2)
Victoria	24 (50)
Western Australia	2 (4)
lighest level of education (n=50)	n (%)
secondary	16 (32)
post-secondary	34 (68)
ncome (centiles) (n=49)	n (%)
0-20% (< AU\$38,896)	5 (10)
20-40% (AU\$38,897 to AU\$69,524)	6 (12)
40-60% (AU\$69,525 to AU\$109,304)	11 (22)
60-80% (AU\$109,305 to AU \$168,688)	6 (12)
80-100% (>AU\$168,689)	19 (39)
prefer not to say / missing	2 (4)
English as main language (n=51)	n (%)
yes	44 (86)
no	7 (17)
f English not main language – any assistance needed reading English (n=7)	n (%)
yes	0 (0)
no	7 (100)
Planning more children (n=51)	n (%)
Yes in the next 2 years	8 (16)
Yes in the next 5 years	3 (6)
Yes in more than 5 years	0 (0)
Yes but I'm not sure when	9 (8)
I am not currently planning to have more children	0 (0)
Unsure	9 (18)

Supplementary Table 1. Demographics of family respondents.

Location (state/territory)	n (%)
Australian Capital Territory	0 (0)
New South Wales	18 (32)
Northern Territory	0 (0)
Queensland	7 (12)
South Australia	3 (5)
Tasmania	2 (4)
Victoria	23 (40)
Western Australia	4 (7)
Years of professional experience in clinical genetics	n (%)
<5	22 (39)
6-10	10 (18)
11-15	15 (26)
16-20	5 (9)
21-25	3 (5)
>25	2 (4)
Number of families seen in ACG study	n (%)
1-2	9 (16)
3-5	15 (26)
6-10	21 (37)
> 10	11 (19)
prefer not to say / missing	1 (2)

Supplementary Table 2. Demographics of clinician respondents (n=57).

Supplementary Table 3. Means for family and clinician responses to five-point Likert scale questions regarding layout, content, and use of 'family reports'.

	respondents	n	mean	SD
Layout of 'family reports'				
How easy was it to find the result of your child's ultra-rapid genomic test in the family report?	family	40	4.33	0.62
How satisfied were you with the general format (layout and style) of the family report?	family	40	4.18	0.64
How satisfied were you that the family report was structured in a logical manner?	family	39	4.26	0.59
How helpful were visual aids (e.g., pictures, bolded text, section headings, etc.) in helping you understand the information in the family report?	family	40	4.18	0.68
How easy was it to find sources of further information on the family report?	family	37	3.81	0.74
How easy was it to find the result of the ultra-rapid genomic test in the family report?	clinician	53	4.57	0.5
How satisfied were you with the general format (layout and style) of the family report?	clinician	53	4.60	0.4
How satisfied were you that the family report was structured in a logical manner?	clinician	52	4.60	0.5
How helpful were visual aids (e.g., pictures, bolded text, section headings, etc.) as part of the result disclosure discussion?	clinician	53	4.40	0.8
Content of 'family reports'				
How helpful was the family report in understanding the result of your child's ultra-rapid genomic test?	family	39	3.97	0.74
How easy is it to understand the language used in the family report?	family	40	4.05	0.8
How helpful was it to have a list of which genetic health professionals (your genetic team) are involved in your child's care in the family report?	family	39	4.18	0.7
How easy do you think it is for families to understand the language used in the family report?	clinician	52	4.17	0.5
Use of 'family reports'				
How easy was it to modify the family report?	clinician	24	4.25	0.5
How helpful is the family report as part of the result disclosure process?	clinician	53	4.49	0.6

Supplementary Table 4. Final survey questions mapped to constructs: personal characteristics of respondent, 'family report' layout, content, and use. Survey question sources were: ^a Brett *et al.*, 2020 (questions used directly or modified); ^b study investigators (questions crafted by study investigator team); ^c Recchia *et al.*, 2020 (questions used directly or modified); ^d Nisselle *et al.*, 2019 (questions used directly or modified).

Family survey	Clinician survey	Survey question	Source	Personal charact -eristics	Report layout	Report content	Report use
Х		What gender are you?	а	Х			
Х		What is your age? (years)	а	Х			
Х		What is your home postcode?	а	Х			
Х		What is the highest level of education you have completed?	а	Х			
Х		What is the combined income of all adults (including you) in your household per year before tax?	а	Х			
Х		What is your current marital status?	а	Х			
Х		How many children do you have?	а	Х			
Х		Do you have private health insurance?	b	Х			
Х		Is English the main language you use?	b	Х			
Х		Do you plan on having more children?	b	Х			
Х		Before the ultra-rapid genomic testing for your child, did you have any experience with genetic conditions, e.g. personal history, family history, general knowledge?	b	х			
Х		Before the ultra-rapid genomic testing for your child, did you have any experience with genetic testing, whether through a GP, specialist, genetics clinic, or an online test, e.g., non- invasive prenatal screening/testing (NIPS/NIPT), carrier/reproductive screening, ancestry testing, etc.?	b	Х			
Х		Which of the following best describes the outcome of your child's ultra-rapid genomic test?	С	х			
	Х	Where do you work?	d	Х			
	Х	What is your primary role?	d	Х			
	Х	How many years of professional experience in clinical genetics do you have?	d	Х			

Family survey	Clinician survey	Survey question	Source	Personal charact -eristics	Report layout	Report content	Report use
	Х	How many families have you seen as part of the Acute Care Genomics program from 2020 onwards?	b	Х			
Х		Do you recall receiving a family report with the outcome of your child's ultra-rapid genomic test?	b	х			
	Х	Have you used a family report with any families from the Acute Care Genomics program?	b				Х
	Х	How have you used the family report(s)?	b				Х
	Х	How helpful is the family report as part of the result disclosure process?	b				Х
	Х	Have you distributed a family report to anyone else apart from the family?	b				Х
	Х	Have you used the family report templates outside the Acute Care Genomics program?	b				Х
Х	Х	How easy was it to find the result of [your child's/the] ultra- rapid genomic test in the family report?	С		Х		
Х		How helpful was the family report in understanding the result of your child's ultra-rapid genomic test?	С			Х	
Х	Х	How satisfied were you with the general format (layout and style) of the family report?	С		Х		
Х	Х	How satisfied were you that the family report was structured in a logical manner?	С		Х		
Х	х	How helpful were visual aids (e.g. pictures, bolded text, section headings, etc.) in helping you understand the information in the family report?	b		Х		
Х	Х	How easy [is it/do you think it is for families] to understand the language used in the family report?	С			Х	
Х	Х	Where medical terms are used in the family report, [were they/do you think they are] explained in a clear manner [for families]?	b			х	

Family survey	Clinician survey	Survey question	Source	Personal charact -eristics	Report Iayout	Report content	Report use
Х	Х	Does the family report contain any unnecessary information?	b			Х	
Х		Did your family report explain any limitations of the test?	b			Х	
Х		Did you find it helpful to have a list of which genetic health professionals (your genetic team) are involved in your child's care in the family report?	b			х	
Х		How easy was it to find sources of further information on the family report?	b		Х		
Х		Using the information in the family report, if you were to have another child how likely is it that the condition would occur again?	С			х	Х
Х		Using the information in the family report, do you feel you have enough information for future family planning?	С			Х	Х
Х		Using the information in the family report, would you/do you feel confident explaining the result of your child's ultra-rapid genomic test to someone else e.g. family or friends?	С			х	Х
Х		Using the information in the family report, do you feel confident explaining to other family members whether or not they have a chance of being affected by the same condition as your child and/or having a child with the same condition?	С			Х	х
Х		Who have you have shared this report with?	b				Х
	Х	Did you modify the family report beyond adding the details of the genetics team?	b				Х
Х		When something is explained to you, is it easier to understand fractions (e.g., 'there's a 1 in 2 (1/2) chance that the coin will be heads') or percentages (e.g., 'there's a 50% chance that the coin will be heads')?	С	х			
Х		When reading or watching the news, how helpful do you find tables and graphs to explain parts of the story?	С	Х			

Family survey	Clinician survey	Survey question	Source	Personal charact -eristics	Report layout	Report content	Report use
х		When you hear a weather forecast, do you prefer predictions using percentages (e.g., 'there will be a 20% chance of rain today') or predictions using only words (e.g., 'there is a small chance of rain today')?	С	х			
Х		Do you have any suggestions or comments about the family report that would help us improve it?	С		Х	х	Х
	Х	Please feel free to provide any other comments about the family report.	С		Х	Х	Х