Supplemental Digital Appendix 1

Entrustable Professional Activities and Associated Behavioral Indicators, Presented by Round, From a National Delphi Study, 2017a

<table>
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<th>Round 1</th>
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| The resident...

…tailors the communication to the patient’s personal context
- Clarifies the patient’s perspective (ideas, concerns, and expectations) and personal goals and values, while consistently tailoring communication.
- Clarifies the patient’s motivation and level of health literacy as regards shared decision making, and tailors communication to the roles as desired in the consultation.
- Coaches the patient during the decision-making process in expressing personal considerations, always taking the patient’s intellectual level and health literacy into consideration.

…discusses the desirability of shared decision making with the patient
- Explains that shared decision making is desirable, as a choice needs to be made.
- Explains the objective of shared decision making and the way to approach this process.
- Clarifies the patient’s perspective (ideas, concerns, and expectations) and personal goals and values.
- Tailors communication to the patient’s motivation for being involved in shared decision making.
- Coaches the patient during the decision-making process in expressing personal considerations, always taking the patient’s intellectual level and health literacy into consideration.

The resident...

…discusses the desirability of shared decision making with the patient
- Explains that shared decision making is desirable, as a choice needs to be made.
- Explains the objective of shared decision making and the way to approach this process.
- Clarifies the patient’s perspective (ideas, concerns, and expectations) and personal goals and values.
- Coaches the patient during the decision-making process in expressing personal considerations, always taking the patient’s intellectual level and health literacy into consideration.

…informs the patient about the desirability of shared decision making
- Explains that shared decision making is desirable, as a choice needs to be made.
- Explains the objective of shared decision making and the way to approach this process.
- Clarifies the patient’s perspective (ideas, concerns, and expectations) and personal goals and values.
- Coaches the patient during the decision-making process in expressing personal considerations, always taking the patient’s intellectual level and health literacy into consideration.

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| • Clarifies that in the current situation shared decision making is desirable.  
• Explains the process, objective, and importance of shared decision making.  | • Discusses the relevant options for management (including the wait-and-see option), based on up-to-date knowledge about these options and available evidence-based guidelines and recommendations.  
• Tailors the minimally required information about the options to the patient’s need for information, perspective, and personal goals and values.  
• Provides clear, objective, and structured information about the options.  
• Discusses the potential burden of treatment and chances of favorable or unfavorable outcomes for each option.  
• Quantifies chances associated with each option as accurately as possible or describes these chances in neutral terms as feasible if quantification is impossible.  | • Discusses the relevant options for management (including the wait-and-see option), based on up-to-date knowledge about these options and available evidence-based guidelines and recommendations.  
• Tailors the minimally required information about the options to the patient’s need for information, perspective, and personal goals and values.  
• Provides clear, objective, and structured information about the options.  
• Discusses the potential burden of treatment and chances of favorable or unfavorable outcomes for each option.  
• Uses or refers to available evidence-based patient education and advisory materials (e.g., websites like the Dutch thuisarts.nl, or decision  

...inform the patient about the options for management  
• Discusses the relevant options for management, based on up-to-date knowledge about these options and available evidence-based guidelines and recommendations.  
• Discusses the potential burden of treatment and chances of favorable or unfavorable outcomes for each option.  
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### Round 1
- Discusses chances as concretely as feasible, using natural frequencies, preferably with a denominator of 100 persons, and using positive and negative framing as well as a clear and relevant time frame.
- Visualizes chances as simply as possible, using the same format, visual support (icon arrays), and the same denominator.
- Uses or refers to evidence-based patient education and advisory materials (e.g., websites like the Dutch thuisarts.nl, or decision aids) to support the decision-making process.
- Checks how the information about the options is understood and interpreted, and if necessary provides sufficient time to consider the information.

...explores the patient’s preferences
- Clarifies the perceptions of the options and the preferences regarding the options.
- Clarifies how the patient’s preferences relate to their perspective and personal goals and values.
- Clarifies the motivation, practicability, and feasibility of

### Round 2
- Discusses chances as concretely as feasible, using natural frequencies, preferably with a denominator of 100 persons, and using positive and negative framing as well as a clear and relevant time frame.
- Visualizes chances as simply as possible, using the same format, visual support (icon arrays), and the same denominator.
- Uses or refers to available evidence-based patient education and advisory materials (e.g., websites like the Dutch thuisarts.nl, or decision aids) to support the decision-making process.
- Checks how the information about the options is understood and interpreted, and if necessary provides sufficient time to consider the information.

...explores the patient’s preferences and deliberations
- Clarifies the perceptions and preferences regarding the options.
- Discusses whether the patient’s preferences fit in sufficiently with their perspective and personal goals and values.

### Round 3
- Discusses chances as concretely as feasible, using natural frequencies, preferably with a denominator of 100 persons, and using positive and negative framing as well as a clear and relevant time frame.
- Visualizes chances as simply as possible, using the same format, visual support (icon arrays), and the same denominator.
- Uses or refers to available evidence-based patient education and advisory materials (e.g., websites like the Dutch thuisarts.nl, or decision aids) to support the decision-making process.
- Checks how the information about the options is understood and interpreted, and if necessary provides sufficient time to consider the information.

...explores the patient’s preferences and deliberations
- Clarifies the perceptions and preferences regarding the options.
- Introduces own preferences where indicated.
- Clarifies the motivation, practicability, and feasibility of the options, taking the patient’s
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| the options, taking the patient’s personal context into consideration.\(^c\)  
- Involves, when necessary, information from other concerned health care professionals, relatives or friends about the (preferences of the) patient.\(^c,e\)  

...assists the patient in deliberating the options\(^b\)  
- Counsels the patient in deliberating the options, taking perspectives and personal goals and values into account.\(^b\)  
- Introduces own preferences into the deliberation and ensures to leave enough space for the shared decision-making process.\(^c,e\)  
- Marks the main arguments the deliberation of the different options and checks their correct expression and understanding by the patient.\(^c,e\)  

...takes a well-argued decision together with the patient  
- Adjusts the timing of the decision-making to the patient’s pace.\(^f\)  
- Comes to a decision together with the patient, based on both perspectives and personal goals and values.  

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| - Introduces own preferences into the deliberation in a neutral manner.\(^e\)  
- Clarifies the motivation, practicability, and feasibility of the options, taking the patient’s personal context into consideration  
- Involves information from other concerned health care professionals, relatives, and friends about the (preferences of the) patient in the deliberation, if contributing to the decision-making process.\(^e\)  
- Summarizes the main deliberations on the different options and checks whether this is correct for the patient.  

...takes a well-argued decision together with the patient  
- Adjusts the timing of the decision-making to the patient’s pace, while taking a potential medical urgency into consideration.  

...takes a well-argued decision together with the patient  
- Adjusts the timing of the decision-making to the patient’s pace, while taking a potential medical urgency into consideration.  

- Includes the information provided by involved third parties (including health care professionals, relatives, and friends) if this is relevant for the deliberation of preferences.  
- Summarizes the main deliberations on the different options and checks whether this is correct for the patient.  

...takes a well-argued decision together with the patient  
- Adjusts the timing of the decision-making to the patient’s pace, while taking a potential medical urgency into consideration.
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<td>perspectives taking the patient’s preferences into account.⁴</td>
<td>• Comes to a decision together with the patient, based on the most important deliberations.</td>
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<td>• Checks whether the patient agrees with the decision and discusses practical consequences and further implementation of the decision.</td>
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<td>• Records the decision and underlying motivation for the decision in the patient’s medical file.¹</td>
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<td>• Evaluates the decision and if necessary makes adjustments in consultation with the patient.</td>
<td>• Evaluates the decision at a later stage and if necessary makes adjustments in consultation with the patient.⁷</td>
<td></td>
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⁴Participants were 32 Dutch experts in shared decision making and medical education from a variety of disciplines. The experts used a Dutch version of the information presented here. The English version was created by having a professional translator translate the Dutch into English, and then a native Dutch speaker proficient in English and terms specific to SDM and medical education translated the information back into Dutch (to verify the accuracy of the translations).

⁵Combined for next round.

⁶Rearranged for next round.

⁷Removed content for next round.

⁸Reformulated for next round.

⁹Added content for next round.

⁰Removed for next round.