

Supplementary Material

Understanding Advice Sharing among Physicians: Towards Trust-Based Clinical Alerts

Section1: Survey Questionnaire

Part A

Imagine you are a 2nd-Year Medical Resident on an inpatient General Medicine team. Last night you admitted a 65-year old man with community-acquired pneumonia.

This morning one of your colleagues is recommending a change in your antibiotic treatment plan. How likely would you be to trust such a recommendation if coming from:

Q1. The infectious disease consultant

	1	2	3	4	5	6	7	8	9	10
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Extremely unlikely to trust										Extremely likely to trust

Q2. The team attending

	1	2	3	4	5	6	7	8	9	10
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Extremely unlikely to trust										Extremely likely to trust

Q3. The primary intern caring for the patient

	1	2	3	4	5	6	7	8	9	10
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Extremely unlikely to trust										Extremely likely to trust

Q4. The team pharmacist, who has been reviewing antibiotic sensitivities at the hospital

	1	2	3	4	5	6	7	8	9	10
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Extremely unlikely to trust										Extremely likely to trust

Q5. The team's medical student, who has brought in a recent review article from the New England Journal of Medicine on treatment of community-acquired pneumonia

	1	2	3	4	5	6	7	8	9	10
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○ ○ ○ ○ ○ ○ ○ ○ ○ ○

Extremely unlikely to trust Extremely likely to trust

Continuing the scenario above, imagine you are confident that your choice of antibiotic is a reasonable one. Nevertheless, how likely would you be to still follow your colleague's recommendation to change medications, if coming from:

Q6. The infectious disease consultant

1 2 3 4 5 6 7 8 9 10

○ ○ ○ ○ ○ ○ ○ ○ ○ ○

Extremely unlikely to follow Extremely likely to follow

Q7. The team attending

1 2 3 4 5 6 7 8 9 10

○ ○ ○ ○ ○ ○ ○ ○ ○ ○

Extremely unlikely to follow Extremely likely to follow

Q8. The primary intern caring for the patient

1 2 3 4 5 6 7 8 9 10

○ ○ ○ ○ ○ ○ ○ ○ ○ ○

Extremely unlikely to follow Extremely likely to follow

Q9. The team pharmacist, who has been reviewing antibiotic sensitivities at the hospital

1 2 3 4 5 6 7 8 9 10

○ ○ ○ ○ ○ ○ ○ ○ ○ ○

Extremely unlikely to follow Extremely likely to follow

Q10. The team's medical student, who has brought in a recent review article from the New England Journal of Medicine on treatment of community-acquired pneumonia

1 2 3 4 5 6 7 8 9 10

○ ○ ○ ○ ○ ○ ○ ○ ○ ○

Extremely unlikely to follow Extremely likely to follow

Part B

Now imagine the same clinical situation, but you are receiving conflicting advice from two different colleagues regarding the optimal antibiotic. For each of the following pairs of individuals, whose advice are you more likely to TRUST (regardless of whether or not you actually follow it)?

Q11. Infectious Disease Attending vs Team Attending

1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Far more trust ID Attending									Far more trust Team Attending

Q12. Patient's Intern vs Team Pharmacist

1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Far more trust Intern									Far more trust Pharmacist

Q13. New England Journal of Medicine Study vs Team Attending

1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Far more trust NEJM									Far more trust Team Attending

Q14. Curbside Consult from new ID Fellow vs Curbside Consult from Hospitalist with 10-years' Experience

1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Far more trust ID Fellow Hospitalist									Far more trust

Finally, given the same situation with two colleagues offering conflicting advice on antibiotic selection, for each of the following pairs of individuals, whose advice are you more likely to actually FOLLOW?

Q15. Infectious Disease Attending vs Team Attending

1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Definitely									Definitely

follow ID
Attending

follow Team
Attending

Q16. Patient's Intern vs Team Pharmacist

1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Definitely follow Intern									Definitely follow Pharmacist

Q17. New England Journal of Medicine Study vs Team Attending

1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Definitely follow NEJM									Definitely follow Team Attending

Q18. Curbside Consult from new ID Fellow vs Curbside Consult from Hospitalist with 10-years' Experience

1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Definitely follow ID Fellow								Definitely follow Hospitalist	

Part C

You are now discussing a new patient, a 58 year-old woman admitted for hypertensive urgency. The team attending recommends adding amlodipine to better control her BP. You think this may be a risk given the patient's history of lower extremity edema. You feel another medication would be more appropriate.

Q19. How would you convey this recommendation to the attending?

Demographics

Q20. Please select your gender.

- Male
- Female

Q21. Please select your age.

- Less than 30
- 30 – 39
- 40 – 49
- 50 – 59
- 60 – 65
- Older than 65

Q22. Please select your current position.

- Intern
- Resident
- Fellow
- Staff
- Other

Q23. When did you complete medical school?

- 2011 – Present
- 2006 – 2010
- 2000 – 2005
- 1990 – 1999
- 1980 – 1989
- Before 1980

Q24. About what % of time do you spend in the INPATIENT environment?

- None
- 1% to 25%
- 26% to 50%
- 51% to 75%
- 76% to 100%

Q25. If you would like to receive a \$10 Amazon gift card, please enter your email address.
