

## Supplementary Online Content

Rothberg MB, Scherer L, Kashef MA, et al. The effect of information presentation on beliefs about the benefits of elective percutaneous coronary intervention. *JAMA Intern Med*. Published online August 25, 2014. doi:10.1001/jamainternmed.2014.3331.

**eAppendix.** Study questionnaire

**eBox.** Chest pain scenario provided to the participants in each group

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

## eAppendix. Study questionnaire

### Part 1. Opinions and Beliefs

For the following questions, please answer in a way that best describes your own opinions and beliefs. There are no right or wrong answers--just answer in a way that feels best to you.

1. If you had to decide right now, would you choose to get the stenting procedure or not?

- Yes, I would get the stent.
- No, I would not get the stent.

2. How confident are you in this decision?

Not at all confident	1	2	3	4	5	6	7	8	9	10	Extremely confident
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3. If you DID NOT have the stenting procedure, how likely do you think you would be to have a heart attack within 5 years?

Not at all likely	1	2	3	4	5	6	7	8	9	10	Extremely likely
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4. If you HAD the stenting procedure, how likely do you think you would be to have a heart attack within 5 years?

Not at all likely	1	2	3	4	5	6	7	8	9	10	Extremely likely
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5. If you had to decide right now, would you decide to take the medications or not?

- Yes, I would take the medications.
- No, I would not take the medications.

6. How confident are you in this decision?

Not at all confident	1	2	3	4	5	6	7	8	9	10	Extremely confident
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7. If you DID NOT take medications, how likely do you think you would be to have a heart attack within 5 years?

Not at all likely	1	2	3	4	5	6	7	8	9	10	Extremely likely
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8. If you DID take medications, how likely do you think you would be to have a heart attack within 5 years?

Not at all likely	1	2	3	4	5	6	7	8	9	10	Extremely likely
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9. Which do you think is more effective at reducing your risk of having a heart attack in the future: Getting a stent, or taking medications?

The stent is much more effective	1	2	3	4	5	<b>6</b>	7	8	9	10	Medications are much more effective
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10. What did the doctor tell you about how the stent will influence your risk of having a heart attack in the future?

- The stent will decrease my risk.
- The stent will increase my risk.
- My risk will be the same with or without the stent.
- The doctor did not say anything about how the stent would affect my risk.

11. Do you feel like you understand why the doctor is offering the stenting procedure?

Not at all	1	2	3	4	5	<b>6</b>	7	8	9	10	Very much so
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12. Do you feel like you understand why the doctor is recommending medication?

Not at all	1	2	3	4	5	<b>6</b>	7	8	9	10	Very much so
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13. If your doctor told you that you had coronary artery disease, would you see this as an immediate and severe threat to your life?

Not at all	1	2	3	4	5	<b>6</b>	7	8	9	10	Very much so
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14. If your doctor told you that you had inflammation in your arteries, would you see this as an immediate and severe threat to your life?

Not at all	1	2	3	4	5	<b>6</b>	7	8	9	10	Very much so
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15. If your doctor told you that you had a place in your arteries that was 95% blocked, would you see this as an immediate and severe threat to your life?

Not at all	1	2	3	4	5	<b>6</b>	7	8	9	10	Very much so
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16. Given your current level of activity, if you actually experienced these chest pain symptoms how much would they limit what you could do?

Not at all	1	2	3	4	5	<b>6</b>	7	8	9	10	Very much so
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17. If you actually experienced these chest pain symptoms, how much would they bother you?

Not at all    1    2    3    4    5    6    7    8    9    10    Very much so

18. If you actually experienced these chest pain symptoms, how worried would you be about having a heart attack?

Not at all worried    1    2    3    4    5    6    7    8    9    10    Extremely worried

19. If you HAD the stenting procedure, how worried would you be about having a heart attack?

Not at all worried    1    2    3    4    5    6    7    8    9    10    Extremely worried

20. If you took medication, how worried would you be about having a heart attack?

Not at all worried    1    2    3    4    5    6    7    8    9    10    Extremely worried

*For the following statements, please indicate whether they are true or false:*

21. Getting a stent for stable angina will reduce my risk of heart attack or death when compared to medicines alone.

- True
- False

22. There is a risk of having a heart attack with the stent procedure itself.

- True
- False

23. Stents eliminate symptoms of angina in all patients.

- True
- False

**Part 2. Your feelings about heart disease** (First 3 questions adapted from the Memorial Anxiety Scale for Prostate Cancer; last 3 questions from a non-validated Action Bias scale)

	1 Strongly disagree	2 Disagree	3 Neither agree nor disagree	4 Agree	5 Strongly agree
The thought of having a heart attack scares me.	1	2	3	4	5
I am afraid to think about heart disease and the possibility of having a heart attack.	1	2	3	4	5
If I had a heart attack, I would probably die.	1	2	3	4	5
Doing everything to fight heart disease is the right choice.	1	2	3	4	5
When it comes to heart disease, the only responsible thing is to do some sort of surgical treatment.	1	2	3	4	5
When it comes to heart disease, it is always better to do something than nothing.	1	2	3	4	5

### Part 3. Questions about you

In general, would you say your health is:

- Excellent
- Very good
- Good
- Fair
- Poor

Are you Hispanic or Latino/a?

- Yes
- No

Are you of Middle Eastern origin?

- Yes
- No

What is your race? (Select all that apply)

- White or Caucasian
- Black or African American
- American Indian or Alaskan Native
- Asian or Asian-American
- Pacific Islander or Native Hawaiian
- Other (please specify) \_\_\_\_\_

What is the highest level of education you have completed?

- None
- Elementary school
- Some high school, but no diploma
- High school (Diploma or GED)
- Trade school
- Some college, but no degree
- Associate's degree (AA, AS, etc.)
- Bachelor's degree (BS, BA, etc.)
- Master's degree (MA, MPH, etc.)
- Doctoral/Professional degree (PhD, MD, etc.)

Have you worked or trained in any of the following medical/health professions: (Select all that apply)

- I am not a medical professional
- Physician or practitioner (MD, DO, DDS, CRNP, PA, etc.)
- Nurse (BSN, RN, LPN, etc.)
- Clinical psychologist or social worker
- Pharmacist
- Medical technologist/technician
- Medical/health researcher
- Medical/health administrator
- Other medical/health profession (Please specify)  
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## eBox. Chest pain scenario provided to the participants in each group

### Background:

Imagine that recently you have started to notice some occasional chest pain. When you climb up 4 flights of stairs, or when you exercise vigorously, your chest feels like someone is pressing down on it. The feeling is uncomfortable, but it does not interfere with your normal activities. The next time you see your doctor, you mention it.

### At the doctor's office:

After hearing about your symptoms, your doctor is concerned. He says that people who have symptoms like yours often have coronary artery disease, which is caused by inflammation in their arteries. He further says that you may have a buildup of plaque in your arteries that is blocking blood flow. People with plaque buildup are more likely to have a heart attack.

Your doctor orders a stress test to check and see if your chest pain is likely caused by coronary artery disease. You end up having a positive stress test. This suggests that when you exercise not enough blood is getting to your heart, but the test is not 100% accurate.

### At the follow-up appointment:

Because of the stress test results, your doctor recommends another procedure to check your arteries to see if plaque is blocking blood flow. Your doctor tells you that the procedure involves threading a tiny tube into the arteries around your heart and then injecting dye and taking pictures. This will let the doctor look at the insides of your arteries and check for blockage.

### Respondents then randomized to 1 of 3 information scenarios:

1. No information: black text only
2. Explicit information: black text + red text
3. Explanatory information: black text + red text + blue text

### Your decision:

Then the doctor tells you that you have a decision to make: During the procedure, if he sees that 1 of your arteries has a lot of blockage (eg, if it is 90%-95% blocked), he can put in a tiny metal tube (a stent) which will widen your artery. This stent will most likely make your chest pain go away immediately. The alternative is to not put in the stent, and to treat your symptoms with medications that will help, but that do not work as fast.

Your doctor tells you that there is a small chance that the stenting procedure could cause a heart attack, stroke, or death. [He also tells you

that scientific studies have shown that stents do not reduce the chance of having a heart attack in the future. You will have the same risk of having a heart attack, regardless of whether he puts in a stent or not.]

[Most people have trouble understanding why stents do not reduce the risk of heart attack. This is because most people think that arteries are like pipes, and that fat and cholesterol slowly clog up the pipe, until it is completely clogged and a heart attack occurs. So, opening the artery with a stent (unclogging the pipe) seems like it should make heart attacks less likely. But this idea is actually wrong. People who have plaque that blocks one part of their artery usually have plaque in all of their arteries. Heart attacks happen when one area of plaque ruptures (kind of like a pimple popping), and the body's own blood cells clot around the rupture. This clot of blood cells can completely block the artery and cause a heart attack, even in places where the artery is pretty wide. What this means is that for people who have a lot of plaque, a heart attack could occur almost anywhere in the artery. So, opening up just one part of your artery does not reduce the chance of having a heart attack.]

Regardless of what you decide, your doctor says that if he finds evidence of significant blockage, you will need to take an aspirin every day, and another drug that will lower your cholesterol. These drugs will lower your risk of having a heart attack. The aspirin has a small chance of causing stomach bleeding and the cholesterol medicine causes some people's muscles to ache.

The doctor then asks what you would like to do. If he finds that you have blockage, would you like him to put in a stent, or not?