**Differences in Lung Cancer Treatment Preferences among Oncologists, Patients and Family Members: A Semi-Structured Qualitative Study in China**

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**Supplementary Materials**

**Interview Guide for Oncologists**

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| Ⅰ. Basic Information (No.: O-0 - Date: / ) |
| Age |   |
| Gender | ◻ Male ◻ Female |
| Department |   |
| Academic Title |   |
| Practicing Years |   |
| Number of Patients Treated Monthly |   |

Ⅱ. Open-ended Questions

1. How do you introduce a treatment to your patients or their family members?

(*Probe*) What kind of information about the treatment will you give?

(*Prompt*) Will you describe the curative effects/side effects/drug administration way/cost of the treatment?

1. How many treatment options will you recommend? Why do you recommend the specific treatment?

(*Prompt*) Are there certain factors of recommended treatment which you value? What are they and why? (like effectiveness, side effects, cost, route of treatment etc.)

(*Probe*) What factors do you consider when weighing one treatment option against another?

1. What factors do you consider during your treatment decision-making process?

(*Probe*) Among them, what are more important and what are less important from your perspective?

(*Prompt*) Are/Is curative effects/side effects/drug administration route/cost more important?

(*Prompt*) Are/Is curative effects/side effects/drug administration route/cost less important?

1. What would your ideal treatment be?
2. Have patients or their family members expressed their expectations or worries for the treatment to you? What are they?

**Interview Guide for Patients**

|  |
| --- |
| Ⅰ. Basic Information (No.: P-0 - Date: / ) |
| Age |   |
| Gender | ◻ Male ◻ Female |
| Education Degree | ◻ Primary School and Below◻ Middle School ◻ College and Above |
| Employment Status | ◻ Employed ◻ Unemployed ◻ Retired ◻ Others |
| Registered Residence | ◻ Urban ◻ Rural |
| Type of Medical Insurance | ◻ Urban Employee Basic Medical Insurance◻ Urban and Rural Resident Basic Medical Insurance ◻ Other Commercial Medical Insurance◻ No Medical Insurance |
| Individual Monthly Income (CNY) | ◻ ≤2000 ◻ 2001-5000 ◻ 5001-10000 ◻ ＞10000 |

Ⅱ. Open-ended Questions

1. Please tell me about the treatment experience/process?

(*Probe*) What treatment do you have?

(*Probe*) How do you feel about the treatment? / How does the treatment affect your life?

(*Prompt*) Are there any symptoms or side effects during the treatment? What are they?

(*Prompt*) How much does the treatment cost?

1. How do you decide on the current treatment?

(*Probe*) Do you have any other treatment options? What are they?

(*Probe*) What made you to choose current treatment over others?

(*Prompt*) Do you choose current treatment because of its prominent extended survival/lower cost/lower adverse effects?

(*If patient have experienced two more treatments*) Why did you change the treatment? What are the differences between the previous one and the current one?

1. What factors do you consider during your treatment decision-making process?

(*Probe*) Among them, what are more important and what are less important from your perspective?

(*Prompt*) Are/Is curative effects/side effects/drug administration route/cost more important?

(*Prompt*) Are/Is curative effects/side effects/drug administration route/cost less important?

1. What would your ideal treatment be?
2. Have you expressed your expectations or worries for the treatment to oncologists or other people? What are they?

**Interview Guide for Family Members**

|  |
| --- |
| Ⅰ. Basic Information (No.: F-0 - Date: / ) |
| Age |   |
| Gender | ◻ Male ◻ Female |
| Relationship with patient |   |
| Disease stage of patient | ◻ Early◻ Locally Advanced◻ Advanced |
| Disease duration of patient |  (Months) |
| Treatment experience of patient | ◻ Surgery◻ Chemotherapy◻ Radiotherapy◻ Targeted therapy◻ Immune therapy◻ Traditional Chinese Therapy◻ Other Supportive Therapy |
| Individual Monthly Income (CNY) | ◻ ≤2000 ◻ 2001-5000◻ 5001-10000 ◻ ＞10000 |

Ⅱ. Open-ended Questions

1. Please tell me about the treatment experience/process?

(*Probe*) What treatment do the patient have?

(*Probe*) How do you feel about the treatment? / How does the treatment affect your life?

(*Prompt*) Are there any symptoms or side effects during the treatment? What are they?

(*Prompt*) How much does the treatment cost?

1. How do you decide on the current treatment?

(*Probe*) Do you have any other treatment options? What are they?

(*Probe*) What made you to choose current treatment over others?

(*Prompt*) Do you choose current treatment because of its prominent extended survival/lower cost/lower adverse effects?

(*If patient have experienced two more treatments*) Why did you change the treatment? What are the differences between the previous one and the current one?

1. What factors do you consider during your treatment decision-making process?

(*Probe*) Among them, what are more important and what are less important from your perspective?

(*Prompt*) Are/Is curative effects/side effects/drug administration route/cost more important?

(*Prompt*) Are/Is curative effects/side effects/drug administration route/cost less important?

1. What would your ideal treatment be?
2. Have you expressed your expectations or worries for the treatment to oncologists or other people? What are they?