

Supplemental Data

Supplemental Table 1 Clinician Survey

Screening Questions

Select your role: (select only one)

<input type="checkbox"/>	Physician (MD, DO, MD/PhD)
<input type="checkbox"/>	Nurse practitioner (NP)
<input type="checkbox"/>	Physician assistant (PA)
<input type="checkbox"/>	None of these <screen out>

Select your specialty: (select only one)

<input type="checkbox"/>	Psychiatry
<input type="checkbox"/>	Internal medicine <screen out>
<input type="checkbox"/>	Family medicine <screen out>
<input type="checkbox"/>	Other (please specify) <screen out>

Approximately how many individual patients do you personally see each week?

_____ / per week <if 0, screen out>

Approximately what percentage of your patients are child/adolescents (<18 years)?

_____ %

Approximately how many individual patients (total) do you personally manage for schizophrenia each month?

_____ /per month <if 0, screen out>

Approximately how many individual child/adolescent (<18 years) patients do you personally manage for schizophrenia each month?

_____ /per month <do NOT screen on this question>

Do you consider yourself an academic or community-based clinician? (select only one)

<input type="checkbox"/>	Community-based (most patients are seen in a private practice or non-teaching hospital)
<input type="checkbox"/>	Academic-based (most patients are seen in a university/teaching hospital or practice)

Case-vignette Questions

Case #1: A 23-year-old man presents to you as an inpatient in a psychiatric unit. He was recently admitted because of agitation associated with hallucinations and delusions. He first experienced psychotic symptoms about 2 months ago but they have become progressively worse and his functioning has become grossly impaired. When distressed he seems to have awareness that something is wrong; however, when he is calm he does not and becomes unsure about the need of treatment. To date, he has not been treated with any antipsychotic medication.

1. How likely are you to discuss the option of a long-acting injectable (LAI) antipsychotic with this patient at this point?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. How likely are you to recommend transitioning this patient to a LAI medication?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Case 1 (cont.): He is discharged on oral antipsychotic medication with instructions to follow-up at the Community Mental Health Center. At a follow-up visit three months later, he has had marked improvement in the severity of his symptoms. He is able to focus his attention elsewhere during hallucinations. There are no signs of sedation or other adverse effects.

3. How likely are you to discuss the option of a long-acting injectable (LAI) antipsychotic with this patient at this point?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. How likely are you to recommend transitioning this patient to a LAI medication?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4a. [if likelihood = 1-3] **Why would you choose not to transition to a LAI?** (please describe) [open]

4b. [if likelihood = 3-5] **Why would you choose to transition to a LAI?** (please describe) [open]

Case #2: A 35-year-old woman with a 10-year history of schizophrenia presents for follow-up. Six months ago, she was hospitalized due to paranoid delusions after forgetting to pick up a refill of her oral antipsychotic medication from the pharmacy. She was stabilized on an oral antipsychotic while hospitalized, and continued on this treatment following discharge.

This patient recently has become divorced and is currently living alone. She has no other friends and family in town that help with her medical care. She presents now 2 months post-discharge. Today, she states she is taking her medication, doing well, and denies any symptoms.

5. How likely is this patient to experience a relapse if continued on the same regimen? (please select one)

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. How likely are you to discuss the option of a long-acting injectable (LAI) antipsychotic with this patient at this point? (please select one)

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. How likely are you to recommend transitioning this patient to a LAI medication?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7a. [if likelihood = 1-3] **Why would you choose not to transition to a LAI?** [open]

7b. [if likelihood = 3-5] **Why would you choose to transition to a LAI?** [open]

Case #3: A 50-year-old woman with schizophrenia diagnosed at age 35 presents for follow-up. She has been functioning reasonably well now on oral antipsychotic medication, but has a history of multiple relapses. She was recently hospitalized due to an exacerbation of unrelated acute bronchitis, for which she was prescribed multiple other oral medications. She reports some difficulty in remembering to take all her medications.

8. How likely is this patient to experience a relapse?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. How likely are you to discuss the option of a LAI antipsychotic with this patient at this point?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. How likely are you to recommend transitioning this patient to a LAI medication?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10a. [if likelihood = 1-3] **Why would you choose not to transition to a LAI?** [open]

10b. [if likelihood = 3-5] **Why would you choose to transition to a LAI?** [open]

Case #4: A 16-year-old high school junior with schizophrenia diagnosed six months ago is functioning reasonably well on oral antipsychotic medication. She also is on 2-3 other oral medications.

11. How likely is this patient to experience a relapse?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. How likely are you to discuss the option of a LAI antipsychotic with this patient at this point?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. How likely are you to recommend transitioning this patient to a LAI medication?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13a. [if likelihood = 1-3] **Why would you choose not to transition to a LAI?** [open]

13b. [if likelihood = 3-5] **Why would you choose to transition to a LAI?** [open]

Case #5: A 30-year-old man with schizophrenia presents for follow-up. He recently returned to college after a 7-year hiatus due to poorly controlled symptoms. He is finally on an oral antipsychotic medication regimen that has helped him function better. He states that he consistently takes his medication. He wonders if he will ever be able to stop taking medications and tells you he does not want this “daily reminder” that he is chronically mentally ill.

14. How likely is this patient to experience a relapse?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. How likely are you to discuss the option of a LAI antipsychotic with this patient at this point?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16. How likely are you to recommend transitioning this patient to a LAI medication?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16a. [if likelihood = 1-3] **Why would you choose not to transition to a LAI?** [open]

16b. [if likelihood = 3-5] **Why would you choose to transition to a LAI?** [open]

Case 5 (cont.): You decide not to alter his medication at this point. One month later, he is hospitalized due to a relapse in which he was experiencing hallucinations, delusions, and disordered thinking which were severely interfering with daily functioning and leading to failing grades. A family member reports that he is inconsistent in taking his medication, despite their efforts to assist with this.

17. How likely are you to discuss the option of a LAI antipsychotic with this patient at this point?

Definitely will not	Probably will not	May or may not	Probably will	Definitely will
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. How likely are you to recommend transitioning this patient to a LAI medication?

Not at all likely	Unlikely	Neither likely nor unlikely	Likely	Very likely
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18a. [if likelihood = 1-3] **Why would you choose not to transition to a LAI?** [open]

18b. [if likelihood = 3-5] **Why would you choose to transition to a LAI?** [open]

Please answer the following general questions about your experience managing patients with schizophrenia.

19. What type of patient do you find most suitable for a LAI antipsychotic?

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20. What type of patient do you find least suitable for a LAI antipsychotic?

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21. When you do transition from an oral to a LAI antipsychotic medication for a patient with schizophrenia, what is your typical approach? (select one)

Always switch molecules	Mostly switch molecules	Depends on the patient	Mostly stay with the same molecule	Always stay with the same molecule
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. Please rate your level of agreement with the following statements about your typical patient with schizophrenia.

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
Long-acting injectable (LAI) antipsychotics are saved for patients with more severe symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I primarily use LAIs in my patients with adherence concerns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have concerns of stigmatization when I diagnose an individual with schizophrenia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have concerns of stigmatization when I prescribe a LAI for a patient with schizophrenia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most patients on oral antipsychotic medication for schizophrenia will eventually have adherence issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

23. Which approach best characterizes how you prefer to make a final treatment decision for patients with schizophrenia? (select only one)

<input type="checkbox"/>	I prefer to make the final decision about which treatment my patients receive
<input type="checkbox"/>	I prefer to make the final decision after seriously considering the patient's/caregiver's opinion
<input type="checkbox"/>	I prefer that the patient/caregiver and I share responsibility for deciding which treatment is best
<input type="checkbox"/>	I prefer that the patient/caregiver make the final decision, but after seriously considering my opinion
<input type="checkbox"/>	I prefer to leave all decisions regarding treatment to the patient/caregiver

24. In general, please rank the following goals you have when initiating an antipsychotic medication for your patients with schizophrenia. (1 = most important, 5 = least important)

<input type="checkbox"/>	Reducing the potential for future psychotic relapse
<input type="checkbox"/>	Improving social/occupational functioning
<input type="checkbox"/>	Managing co-morbid psychological or medical issues
<input type="checkbox"/>	Improve quality of life
<input type="checkbox"/>	Minimize side effects

25. Please indicate the significance of each of the following barriers to the optimal management of patients with schizophrenia: (select one for each item)

	Not applicable or not at all significant	Slightly significant	Moderately significant	Very significant	Extremely significant
Patient nonadherence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication side effects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comorbid medical conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comorbid mental health conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of social support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of coordination of care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social stigma of a schizophrenia diagnosis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of efficacy of antipsychotic medications despite complete adherence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

26. Please indicate the significance of each of the following barriers to the optimal use of long-acting injectable antipsychotics in patients with schizophrenia: (select one for each item)

	Not applicable or not at all significant	Slightly significant	Moderately significant	Very significant	Extremely significant
Patient aversion to needles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Logistical issues (eg, lack of storage of medication, lack of staff to manage injections, lack of patient transportation to appointments)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Short dosing intervals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of experience with prescribing injectable treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clinicians think patients aren't interested in or would not want to take a LAI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited comfort in discussing pros and cons of LAIs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Increased cost compared to oral medications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

27. Are there any other barriers you've experienced related to use of LAI antipsychotics in your patients with schizophrenia?

28. Please rate your level of agreement with the following statements about your typical patient with schizophrenia.

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
LAI antipsychotics are as safe as other medications for schizophrenia management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patients are able to tolerate LAI antipsychotics as much as other medications for schizophrenia management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patients on LAIs have more severe symptoms than patients on other medications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LAI have similar efficacy as other medications to stabilize disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LAI have similar efficacy as other medications to prevent relapse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29. How confident are you in the following aspects of schizophrenia management? (select one for each item)

	Not at all confident	Slightly confident	Moderately confident	Very confident	Extremely confident
Determining when to begin treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Selecting treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discussing the use of injectable therapy with my patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiating injectable therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Administering injectable therapy in my practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transitioning a stable patient from an oral to an injectable antipsychotic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

30. How comfortable are you in initiating a conversation related to transitioning from an oral medication to a LAI?

Not at all comfortable	Uncomfortable	Neither comfortable nor uncomfortable	Comfortable	Very comfortable
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

a. [if comfort = 1-3] What information/education would you need to increase your comfort in these situations? [open]

b. [if comfort = 4-5] How do you typically initiate this discussion? [open]

31. Please rate your familiarity with the following new or emerging therapies for schizophrenia:
(select one for each item)

	Not at all familiar	Slightly familiar	Moderately familiar	Very familiar	Extremely familiar
ALKS 3831 (combination of olanzapine and samidorphan)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lumateperone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roluperidone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pimavanserin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TAK-831	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

32. How likely are you to seek out information on new or emerging therapies for schizophrenia?
(select one)

Not at all likely	Slightly likely	Moderately likely	Very likely	Extremely likely
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

33. Please list one or two topics that you would find valuable for upcoming CE opportunities related to schizophrenia:

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Demographic Questions

34. How many years have you been in psychiatry practice? _____

35. How many individuals would you consider a part of your support staff (ie, nurses, medical assistants, etc.)? _____

36. What percentage of your patients (adult or pediatric) with schizophrenia are currently using a LAI antipsychotic? _____%

37. Have you received additional certification in Child/Adolescent Psychiatry?" (select only one)

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

38. Practice location: (select only one)

<input type="checkbox"/>	Urban
<input type="checkbox"/>	Suburban
<input type="checkbox"/>	Rural

39. Present employment: (select only one)

<input type="checkbox"/>	Solo practice
<input type="checkbox"/>	Group single-specialty practice
<input type="checkbox"/>	Group multi-specialty practice
<input type="checkbox"/>	Academic/university hospital/medical school
<input type="checkbox"/>	Non-government community hospital/mental health center
<input type="checkbox"/>	Government/military/VA hospital
<input type="checkbox"/>	Other (please specify)

Supplemental Table 2 Clinician discussion/recommendation of LAI antipsychotic medications by scenario^a

Response to case presentations	%		
	Psychiatrist (n=302)	Psychiatric NP/PA (n=77)	Overall (n=379)
Case 1			
Discuss LAI antipsychotic medication			
Definitely will not	11	5	10
Probably will not	21	14	19
May or may not	22	31	24
Probably will	27	30	28
Definitely will	19	20	19
Recommend transition to LAI antipsychotic medication			
Definitely will not	5	3	5
Probably will not	15	7	14
May or may not	34	31	33
Probably will	32	38	33
Definitely will	14	22	16
Case 1 (continued)			
Discuss LAI antipsychotic medication			
Definitely will not	8	1	7
Probably will not	29	25	28
May or may not	21	26	22
Probably will	29	30	19
Definitely will	14	18	14
Recommend transition to LAI antipsychotic medication			
Definitely will not	7	0	5
Probably will not	29	25	28
May or may not	30	33	30
Probably will	25	26	25
Definitely will	10	17	12
Case 2			
Discuss LAI antipsychotic medication			
Definitely will not	1	0	1
Probably will not	8	1	6
May or may not	14	5	12
Probably will	44	53	46
Definitely will	33	40	34
Recommend transition to LAI antipsychotic medication			
Definitely will not	1	0	1
Probably will not	10	1	8
May or may not	23	22	22
Probably will	43	39	42
Definitely will	24	38	27

Response to case presentations	%		
	Psychiatrist (n=302)	Psychiatric NP/PA (n=77)	Overall (n=379)
Case 3			
Discuss LAI antipsychotic medication			
Definitely will not	0	0	0
Probably will not	1	1	1
May or may not	6	4	6
Probably will	35	46	38
Definitely will	57	49	56
Recommend transition to LAI antipsychotic medication			
Definitely will not	0	0	0
Probably will not	1	1	1
May or may not	9	9	9
Probably will	41	47	42
Definitely will	49	42	48
Case 4			
Discuss LAI antipsychotic medication			
Definitely will not	6	5	6
Probably will not	23	22	22
May or may not	33	34	34
Probably will	28	26	28
Definitely will	10	13	11
Recommend transition to LAI antipsychotic medication			
Definitely will not	5	5	5
Probably will not	25	27	25
May or may not	39	37	39
Probably will	22	21	22
Definitely will	9	9	9
Case 5			
Discuss LAI antipsychotic medication			
Definitely will not	1	0	1
Probably will not	1	0	1
May or may not	7	3	6
Probably will	31	34	32
Definitely will	60	64	61
Recommend transition to LAI antipsychotic medication			
Definitely will not	1	0	1
Probably will not	2	0	1
May or may not	12	12	12
Probably will	35	27	34
Definitely will	51	61	53

Response to case presentations	%		
	Psychiatrist (n=302)	Psychiatric NP/PA (n=77)	Overall (n=379)
Case 5 (continued)			
Discuss LAI antipsychotic medication			
Definitely will not	0	0	0
Probably will not	0	0	1
May or may not	0	3	12
Probably will	12	5	34
Definitely will	87	92	53
Recommend transition to LAI antipsychotic medication			
Definitely will not	0	0	0
Probably will not	0	0	0
May or may not	1	3	1
Probably will	14	8	11
Definitely will	85	90	88

Note: ^aTotals may not equal 100% because of rounding.

Abbreviations: LAI, long-acting injectable; NP, nurse practitioner; PA, physician assistant.

Supplemental Table 3 Clinician perception of relapse by scenario^a

How likely is this patient to experience a relapse if continued on the same regimen?	%		
	Psychiatrist (n=302)	Psychiatric NP/PA (n=77)	Overall (n=379)
Case 2			
Definitely will not	0	0	0
Probably will not	8	4	7
May or may not	36	33	36
Probably will	47	52	48
Definitely will	9	12	10
Case 3			
Definitely will not	0	0	0
Probably will not	1	0	1
May or may not	8	8	8
Probably will	58	73	61
Definitely will	33	20	30
Case 4			
Definitely will not	3	0	2
Probably will not	7	9	7
May or may not	49	52	50
Probably will	36	35	36
Definitely will	6	4	5
Case 5			
Definitely will not	0	0	0
Probably will not	3	3	3
May or may not	23	26	24
Probably will	53	51	53
Definitely will	21	21	21

Note: ^aTotals may not equal 100% because of rounding.

Abbreviations: NP, nurse practitioner; PA, physician assistant.

Supplemental Table 4 Variables in the Equation

A. Q1

		B	SE	Wald	df	Sig.	Exp(B)	95% CI for Exp(B)	
								Lower	Upper
Step 1 ^a	V1_CONFIDENCE	.467	.204	5.249	1	.022	1.595	1.070	2.379
	V2_MEDBARRIERS	.304	.211	2.074	1	.150	1.356	.896	2.051
	V3_EMERGINGTx	.409	.196	4.339	1	.037	1.505	1.024	2.210
	V4_LACKEXPERIENCE	.105	.122	.743	1	.389	1.111	.875	1.412
	V5_PATIENTLIMIT	-.362	.182	3.975	1	.046	.696	.488	.994
	V6_SAFETY	.494	.185	7.110	1	.008	1.639	1.140	2.356
	V7_EFFICACY	-.265	.145	3.315	1	.069	.767	.577	1.020
	V8_SOCIALBARRIERS	-.087	.219	.156	1	.693	.917	.597	1.409
	V11_STIGMA	-.033	.163	.040	1	.841	.968	.704	1.332
	D1_SCHIZPTLOAD	.008	.003	5.724	1	.017	1.008	1.001	1.015
	D3_YEARS	-.022	.013	2.594	1	.107	.979	.953	1.005
	D4_SUPPORT	.019	.011	2.877	1	.090	1.019	.997	1.042
	D5_ROLE	.171	.321	.285	1	.594	1.187	.633	2.224
	D6_cert	.183	.270	.457	1	.499	1.201	.707	2.039
	Constant	-3.880	1.402	7.657	1	.006	.021		

Note: ^aVariable(s) entered on step 1: V1_CONFIDENCE, V2_MEDBARRIERS, V3_EMERGINGTx, V4_LACKEXPERIENCE, V5_PATIENTLIMIT, V6_SAFETY, V7_EFFICACY, V8_SOCIALBARRIERS, V11_STIGMA, D1_SCHIZPTLOAD, D3_YEARS, D4_SUPPORT, D5_ROLE, D6_cert.

B. Q2

		B	SE	Wald	df	Sig.	Exp(B)	95% CI for Exp(B)	
								Lower	Upper
Step 1 ^a	V1_CONFIDENCE	.683	.206	11.053	1	.001	1.981	1.324	2.963
	V2_MEDBARRIERS	.111	.211	.276	1	.599	1.117	.739	1.689
	V3_EMERGINGTx	.622	.204	9.273	1	.002	1.864	1.248	2.782
	V4_LACKEXPERIENCE	-.279	.126	4.933	1	.026	1.322	1.033	1.691
	V5_PATIENTLIMIT	-.377	.182	4.295	1	.038	.686	.480	.980
	V6_SAFETY	.370	.184	4.043	1	.044	1.448	1.009	2.078
	V7_EFFICACY	-.071	.142	.252	1	.616	.931	.705	1.230
	V8_SOCIALBARRIERS	-.295	.221	1.773	1	.183	.745	.483	1.149
	V11_STIGMA	.079	.165	.228	1	.633	1.082	.783	1.495
	D1_SCHIZPTLOAD	.002	.003	.405	1	.524	1.002	.996	1.008
	D3_YEARS	-.019	.013	1.968	1	.161	.981	.956	1.007
	D4_SUPPORT	.023	.012	3.984	1	.046	1.024	1.000	1.047
	D5_ROLE	.610	.323	3.562	1	.059	1.840	.977	3.467
	D6_cert	.121	.272	.199	1	.656	1.129	.663	1.923
	Constant	-4.760	1.420	11.236	1	.001	.009		

Note: ^aVariable(s) entered on step 1: V1_CONFIDENCE, V2_MEDBARRIERS, V3_EMERGINGTx, V4_LACKEXPERIENCE, V5_PATIENTLIMIT, V6_SAFETY, V7_EFFICACY, V8_SOCIALBARRIERS, V11_STIGMA, D1_SCHIZPTLOAD, D3_YEARS, D4_SUPPORT, D5_ROLE, D6_cert.

C. Q3

		B	SE	Wald	df	Sig.	Exp(B)	95% CI for Exp(B)	
								Lower	Upper
Step 1 ^a	V1_CONFIDENCE	.396	.196	4.094	1	.043	1.486	1.012	2.182
	V2_MEDBARRIERS	-.010	.204	.003	1	.959	.990	.664	1.475
	V3_EMERGINGTx	.431	.189	5.185	1	.023	1.538	1.062	2.229
	V4_LACKEXPERIENCE	-.241	.119	4.091	1	.043	1.272	1.007	1.606
	V5_PATIENTLIMIT	-.442	.175	6.371	1	.012	.643	.456	.906
	V6_SAFETY	.261	.178	2.147	1	.143	1.298	.916	1.841
	V7_EFFICACY	-.072	.137	.275	1	.600	.931	.712	1.217
	V8_SOCIALBARRIERS	-.175	.213	.678	1	.410	.839	.553	1.273
	V11_STIGMA	.286	.159	3.212	1	.073	1.331	.974	1.819
	D1_SCHIZPTLOAD	.003	.003	1.105	1	.293	1.003	.997	1.009
	D3_YEARS	-.021	.013	2.539	1	.111	.979	.955	1.005
	D4_SUPPORT	.018	.010	3.006	1	.083	1.018	.998	1.038
	D5_ROLE	.123	.309	.157	1	.692	1.130	.617	2.072
	D6_cert	.501	.261	3.674	1	.055	1.650	.989	2.755
	Constant	-2.799	1.344	4.336	1	.037	.061		

Note: ^aVariable(s) entered on step 1: V1_CONFIDENCE, V2_MEDBARRIERS, V3_EMERGINGTx, V4_LACKEXPERIENCE, V5_PATIENTLIMIT, V6_SAFETY, V7_EFFICACY, V8_SOCIALBARRIERS, V11_STIGMA, D1_SCHIZPTLOAD, D3_YEARS, D4_SUPPORT, D5_ROLE, D6_cert.

D. Q4

		B	SE	Wald	df	Sig.	Exp(B)	95% CI for Exp(B)	
								Lower	Upper
Step 1 ^a	V1_CONFIDENCE	.652	.212	9.445	1	.002	1.919	1.266	2.907
	V2_MEDBARRIERS	.244	.218	1.259	1	.262	1.277	.833	1.956
	V3_EMERGINGTx	.525	.195	7.234	1	.007	1.691	1.153	2.480
	V4_LACKEXPERIENCE	-.384	.124	9.555	1	.002	1.468	1.151	1.873
	V5_PATIENTLIMIT	-.440	.183	5.818	1	.016	.644	.450	.921
	V6_SAFETY	.151	.189	.636	1	.425	1.163	.803	1.684
	V7_EFFICACY	-.129	.142	.820	1	.365	.879	.665	1.162
	V8_SOCIALBARRIERS	-.378	.226	2.802	1	.094	.685	.440	1.067
	V11_STIGMA	.253	.169	2.252	1	.133	1.288	.925	1.793
	D1_SCHIZPTLOAD	.003	.003	1.194	1	.274	1.003	.998	1.009
	D3_YEARS	-.022	.014	2.494	1	.114	.978	.952	1.005
	D4_SUPPORT	.011	.009	1.548	1	.213	1.011	.994	1.029
	D5_ROLE	.243	.324	.564	1	.452	1.275	.676	2.406
	D6_cert	.755	.275	7.554	1	.006	2.128	1.242	3.646
	Constant	-4.203	1.419	8.777	1	.003	.015		

Note: ^aVariable(s) entered on step 1: V1_CONFIDENCE, V2_MEDBARRIERS, V3_EMERGINGTx, V4_LACKEXPERIENCE, V5_PATIENTLIMIT, V6_SAFETY, V7_EFFICACY, V8_SOCIALBARRIERS, V11_STIGMA, D1_SCHIZPTLOAD, D3_YEARS, D4_SUPPORT, D5_ROLE, D6_cert.

E. Q6

		B	SE	Wald	df	Sig.	Exp(B)	95% CI for Exp(B)	
								Lower	Upper
Step 1 ^a	V1_CONFIDENCE	.400	.300	1.781	1	.182	1.493	.829	2.688
	V2_MEDBARRIERS	.340	.313	1.180	1	.277	1.406	.760	2.598
	V3_EMERGINGTx	-.230	.290	.626	1	.429	.795	.450	1.404
	V4_LACKEXPERIENCE	.151	.199	.573	1	.449	1.163	.787	1.719
	V5_PATIENTLIMIT	-.988	.298	10.986	1	.001	.372	.207	.668
	V6_SAFETY	.843	.272	9.608	1	.002	2.323	1.363	3.959
	V7_EFFICACY	-.268	.238	1.261	1	.261	.765	.480	1.221
	V8_SOCIALBARRIERS	.064	.332	.037	1	.848	1.066	.556	2.042
	V11_STIGMA	.047	.252	.035	1	.852	1.048	.639	1.718
	D1_SCHIZPTLOAD	.000	.005	.011	1	.916	1.000	.992	1.009
	D3_YEARS	-.004	.019	.051	1	.821	.996	.959	1.033
	D4_SUPPORT	-.009	.011	.641	1	.423	.991	.971	1.013
	D5_ROLE	1.505	.610	6.092	1	.014	4.502	1.363	14.869
	D6_cert	.459	.422	1.185	1	.276	1.583	.692	3.618
	5. How likely is this patient to experience a relapse if continued on the same regimen? – Please select one	2.151	.295	53.334	1	.000	8.592	4.824	15.304
Constant	-9.520	2.335	16.620	1	.000	.000			

Note: ^aVariable(s) entered on step 1: V1_CONFIDENCE, V2_MEDBARRIERS, V3_EMERGINGTx, V4_LACKEXPERIENCE, V5_PATIENTLIMIT, V6_SAFETY, V7_EFFICACY, V8_SOCIALBARRIERS, V11_STIGMA, D1_SCHIZPTLOAD, D3_YEARS, D4_SUPPORT, D5_ROLE, D6_cert, 5. How likely is this patient to experience a relapse if continued on the same regimen? – Please select one.

F. Q7

		B	SE	Wald	df	Sig.	Exp(B)	95% CI for Exp(B)	
								Lower	Upper
Step 1 ^a	V1_CONFIDENCE	.318	.246	1.666	1	.197	1.374	.848	2.227
	V2_MEDBARRIERS	.378	.260	2.115	1	.146	1.459	.877	2.427
	V3_EMERGINGTx	-.076	.240	.101	1	.750	.926	.579	1.483
	V4_LACKEXPERIENCE	.227	.159	2.029	1	.154	1.255	.918	1.715
	V5_PATIENTLIMIT	-.737	.232	10.051	1	.002	.479	.304	.755
	V6_SAFETY	.397	.219	3.291	1	.070	1.487	.969	2.283
	V7_EFFICACY	-.007	.179	.002	1	.967	.993	.698	1.411
	V8_SOCIALBARRIERS	.059	.273	.047	1	.828	1.061	.622	1.811
	V11_STIGMA	-.037	.208	.031	1	.860	.964	.641	1.449
	D1_SCHIZPTLOAD	.001	.004	.054	1	.816	1.001	.993	1.009
	D3_YEARS	-.011	.016	.495	1	.481	.989	.959	1.020
	D4_SUPPORT	-.006	.010	.367	1	.545	.994	.976	1.013
	D5_ROLE	.189	.403	.221	1	.639	1.208	.548	2.662
	D6_cert	.442	.344	1.647	1	.199	1.556	.792	3.056
	5. How likely is this patient to experience a relapse if continued on the same regimen? – Please select one	2.000	.241	68.756	1	.000	7.386	4.604	11.849
	Constant	-8.512	1.929	19.469	1	.000	.000		

Note: ^aVariable(s) entered on step 1: V1_CONFIDENCE, V2_MEDBARRIERS, V3_EMERGINGTx, V4_LACKEXPERIENCE, V5_PATIENTLIMIT, V6_SAFETY, V7_EFFICACY, V8_SOCIALBARRIERS, V11_STIGMA, D1_SCHIZPTLOAD, D3_YEARS, D4_SUPPORT, D5_ROLE, D6_cert, 5. How likely is this patient to experience a relapse if continued on the same regimen? – Please select one.

G. Q9

		B	SE	Wald	df	Sig.	Exp(B)	95% CI for Exp(B)	
								Lower	Upper
Step 1 ^a	V1_CONFIDENCE	-.149	.540	.076	1	.783	.862	.299	2.482
	V2_MEDBARRIERS	.472	.550	.736	1	.391	1.603	.546	4.709
	V3_EMERGINGTx	.965	.658	2.147	1	.143	2.625	.722	9.540
	V4_LACKEXPERIENCE	-.128	.381	.112	1	.737	.880	.417	1.856
	V5_PATIENTLIMIT	-.829	.565	2.150	1	.143	.437	.144	1.322
	V6_SAFETY	.721	.382	3.550	1	.060	2.056	.971	4.351
	V7_EFFICACY	.660	.384	2.955	1	.086	1.935	.912	4.105
	V8_SOCIALBARRIERS	.845	.638	1.757	1	.185	2.328	.667	8.125
	V11_STIGMA	-.260	.478	.295	1	.587	.771	.302	1.968
	D1_SCHIZPTLOAD	.008	.011	.442	1	.506	1.008	.985	1.030
	D3_YEARS	.050	.038	1.746	1	.186	1.051	.976	1.131
	D4_SUPPORT	-.002	.020	.015	1	.903	.998	.960	1.037
	D5_ROLE	1.165	.987	1.393	1	.238	3.207	.463	22.206
	D6_cert	.771	.785	.963	1	.326	2.161	.464	10.074
8. How likely is this patient to experience a relapse? – Please select one	3.780	.658	33.047	1	.000	43.811	12.075	158.954	
Constant	-21.959	5.656	15.074	1	.000	.000			

Note: ^aVariable(s) entered on step 1: V1_CONFIDENCE, V2_MEDBARRIERS, V3_EMERGINGTx, V4_LACKEXPERIENCE, V5_PATIENTLIMIT, V6_SAFETY, V7_EFFICACY, V8_SOCIALBARRIERS, V11_STIGMA, D1_SCHIZPTLOAD, D3_YEARS, D4_SUPPORT, D5_ROLE, D6_cert, 8. How likely is this patient to experience a relapse? – Please select one.

H. Q10

		B	SE	Wald	df	Sig.	Exp(B)	95% CI for Exp(B)	
								Lower	Upper
Step 1 ^a	V1_CONFIDENCE	.481	.383	1.579	1	.209	1.618	.764	3.427
	V2_MEDBARRIERS	.397	.400	.986	1	.321	1.487	.680	3.255
	V3_EMERGINGTx	.544	.482	1.275	1	.259	1.723	.670	4.433
	V4_LACKEXPERIENCE	.235	.287	.670	1	.413	1.265	.721	2.218
	V5_PATIENTLIMIT	-.898	.423	4.506	1	.034	.407	.178	.933
	V6_SAFETY	.813	.330	6.072	1	.014	2.254	1.181	4.304
	V7_EFFICACY	.218	.315	.477	1	.490	1.243	.670	2.307
	V8_SOCIALBARRIERS	-.057	.439	.017	1	.897	.945	.400	2.234
	V11_STIGMA	.283	.330	.738	1	.390	1.328	.696	2.534
	D1_SCHIZPTLOAD	.003	.007	.139	1	.709	1.003	.988	1.018
	D3_YEARS	.026	.027	.949	1	.330	1.027	.974	1.083
	D4_SUPPORT	.012	.025	.216	1	.642	1.012	.963	1.062
	D5_ROLE	.138	.654	.045	1	.832	1.149	.319	4.138
	D6_cert	-.146	.524	.077	1	.781	.865	.310	2.415
	8. How likely is this patient to experience a relapse? –Please select one	3.198	.512	39.077	1	.000	24.484	8.983	66.735
	Constant	-17.393	4.187	17.252	1	.000	.000		

Note: ^aVariable(s) entered on step 1: V1_CONFIDENCE, V2_MEDBARRIERS, V3_EMERGINGTx, V4_LACKEXPERIENCE, V5_PATIENTLIMIT, V6_SAFETY, V7_EFFICACY, V8_SOCIALBARRIERS, V11_STIGMA, D1_SCHIZPTLOAD, D3_YEARS, D4_SUPPORT, D5_ROLE, D6_cert, 8. How likely is this patient to experience a relapse? – Please select one.

I. Q12

		B	SE	Wald	df	Sig.	Exp(B)	95% CI for Exp(B)	
								Lower	Upper
Step 1 ^a	V1_CONFIDENCE	.469	.237	3.927	1	.048	1.598	1.005	2.541
	V2_MEDBARRIERS	-.187	.239	.615	1	.433	.829	.519	1.324
	V3_EMERGINGTx	.158	.222	.504	1	.478	1.171	.757	1.811
	V4_LACKEXPERIENCE	-.290	.143	4.146	1	.042	1.337	1.011	1.768
	V5_PATIENTLIMIT	-.710	.212	11.219	1	.001	.491	.324	.745
	V6_SAFETY	.203	.216	.881	1	.348	1.225	.802	1.870
	V7_EFFICACY	-.107	.171	.389	1	.533	.899	.642	1.258
	V8_SOCIALBARRIERS	.023	.254	.008	1	.927	1.023	.623	1.682
	V11_STIGMA	.296	.187	2.520	1	.112	1.345	.933	1.940
	D1_SCHIZPTLOAD	.007	.004	4.306	1	.038	1.007	1.000	1.014
	D2_SETTING	-.071	.338	.044	1	.834	.932	.480	1.807
	D3_YEARS	-.011	.015	.488	1	.485	.989	.960	1.020
	D4_SUPPORT	.007	.012	.325	1	.568	1.007	.984	1.030
	D5_ROLE	.154	.366	.178	1	.673	1.167	.570	2.389
	D6_cert	.357	.308	1.341	1	.247	1.429	.781	2.612
	11. How likely is this patient to experience a relapse? – Please select one	1.800	.237	57.908	1	.000	6.050	3.805	9.618
	Constant	-8.262	1.747	22.369	1	.000	.000		

Note: ^aVariable(s) entered on step 1: V1_CONFIDENCE, V2_MEDBARRIERS, V3_EMERGINGTx, V4_LACKEXPERIENCE, V5_PATIENTLIMIT, V6_SAFETY, V7_EFFICACY, V8_SOCIALBARRIERS, V11_STIGMA, D1_SCHIZPTLOAD, D2_SETTING, D3_YEARS, D4_SUPPORT, D5_ROLE, D6_cert, 11. How likely is this patient to experience a relapse? – Please select one.

J. Q13

		B	SE	Wald	df	Sig.	Exp(B)	95% CI for Exp(B)	
								Lower	Upper
Step 1 ^a	V1_CONFIDENCE	.451	.257	3.082	1	.079	1.569	.949	2.595
	V2_MEDBARRIERS	-.163	.257	.404	1	.525	.849	.513	1.406
	V3_EMERGINGTx	.144	.239	.364	1	.546	1.155	.723	1.846
	V4_LACKEXPERIENCE	-.343	.152	5.078	1	.024	1.410	1.046	1.900
	V5_PATIENTLIMIT	-.576	.217	7.025	1	.008	.562	.367	.861
	V6_SAFETY	.044	.230	.037	1	.848	1.045	.666	1.640
	V7_EFFICACY	-.116	.179	.421	1	.516	.890	.627	1.264
	V8_SOCIALBARRIERS	-.113	.277	.168	1	.682	.893	.519	1.536
	V11_STIGMA	.105	.199	.279	1	.597	1.111	.752	1.640
	D1_SCHIZPTLOAD	.009	.004	6.485	1	.011	1.010	1.002	1.017
	D2_SETTING	.561	.355	2.488	1	.115	1.752	.873	3.515
	D3_YEARS	-.002	.016	.018	1	.895	.998	.966	1.030
	D4_SUPPORT	-.003	.010	.111	1	.739	.997	.976	1.017
	D5_ROLE	.115	.393	.086	1	.769	1.122	.520	2.423
	D6_cert	.433	.334	1.678	1	.195	1.541	.801	2.966
	11. How likely is this patient to experience a relapse? – Please select one	2.126	.270	62.024	1	.000	8.385	4.939	14.234
	Constant	-9.605	1.892	25.775	1	.000	.000		

Note: ^aVariable(s) entered on step 1: V1_CONFIDENCE, V2_MEDBARRIERS, V3_EMERGINGTx, V4_LACKEXPERIENCE, V5_PATIENTLIMIT, V6_SAFETY, V7_EFFICACY, V8_SOCIALBARRIERS, V11_STIGMA, D1_SCHIZPTLOAD, D2_SETTING, D3_YEARS, D4_SUPPORT, D5_ROLE, D6_cert, 11. How likely is this patient to experience a relapse? – Please select one.

K. Q15

		B	SE	Wald	df	Sig.	Exp(B)	95% CI for Exp(B)	
								Lower	Upper
Step 1 ^a	V1_CONFIDENCE	.059	.402	.022	1	.883	1.061	.482	2.333
	V2_MEDBARRIERS	.119	.456	.068	1	.794	1.127	.461	2.756
	V3_EMERGINGTx	-.277	.347	.637	1	.425	.758	.384	1.496
	V4_LACKEXPERIENCE	-.154	.261	.346	1	.556	.858	.514	1.430
	V5_PATIENTLIMIT	.299	.370	.655	1	.418	1.349	.654	2.783
	V6_SAFETY	.544	.322	2.850	1	.091	1.722	.916	3.238
	V7_EFFICACY	.466	.278	2.807	1	.094	1.593	.924	2.748
	V8_SOCIALBARRIERS	.581	.443	1.718	1	.190	1.788	.750	4.261
	V11_STIGMA	-.362	.333	1.180	1	.277	.696	.363	1.338
	D1_SCHIZPTLOAD	.001	.008	.036	1	.849	1.001	.987	1.017
	D3_YEARS	-.032	.026	1.496	1	.221	.969	.920	1.019
	D4_SUPPORT	-.009	.020	.174	1	.677	.992	.953	1.032
	D5_ROLE	1.184	.884	1.793	1	.181	3.268	.578	18.491
	D6_cert	-.443	.516	.735	1	.391	.642	.233	1.767
	14. How likely is this patient to experience a relapse? – Please select one	1.536	.343	20.094	1	.000	4.644	2.373	9.087
Constant	-9.323	3.236	8.303	1	.004	.000			

Note: ^aVariable(s) entered on step 1: V1_CONFIDENCE, V2_MEDBARRIERS, V3_EMERGINGTx, V4_LACKEXPERIENCE, V5_PATIENTLIMIT, V6_SAFETY, V7_EFFICACY, V8_SOCIALBARRIERS, V11_STIGMA, D1_SCHIZPTLOAD, D3_YEARS, D4_SUPPORT, D5_ROLE, D6_cert, 14. How likely is this patient to experience a relapse? – Please select one.

L. Q16

		B	SE	Wald	df	Sig.	Exp(B)	95% CI for Exp(B)	
								Lower	Upper
Step 1 ^a	V1_CONFIDENCE	.607	.330	3.389	1	.066	1.836	.962	3.504
	V2_MEDBARRIERS	.538	.388	1.925	1	.165	1.713	.801	3.665
	V3_EMERGINGTx	.029	.348	.007	1	.933	1.029	.520	2.037
	V4_LACKEXPERIENCE	-.185	.238	.601	1	.438	.831	.521	1.326
	V5_PATIENTLIMIT	.428	.311	1.895	1	.169	1.534	.834	2.820
	V6_SAFETY	.335	.278	1.448	1	.229	1.398	.810	2.412
	V7 EFFICACY	.289	.249	1.343	1	.247	1.335	.819	2.176
	V8_SOCIALBARRIERS	-.293	.360	.661	1	.416	.746	.369	1.511
	V11_STIGMA	-.173	.273	.399	1	.527	.841	.492	1.438
	D1_SCHIZPTLOAD	.004	.007	.353	1	.553	1.004	.990	1.018
	D3_YEARS	-.028	.021	1.786	1	.181	.972	.933	1.013
	D4_SUPPORT	.025	.030	.688	1	.407	1.025	.967	1.086
	D5_ROLE	.305	.569	.287	1	.592	1.356	.445	4.138
	D6_cert	-.029	.431	.004	1	.947	.972	.418	2.260
14. How likely is this patient to experience a relapse? – Please select one	2.214	.347	40.658	1	.000	9.155	4.635	18.083	
Constant	-12.082	2.846	18.026	1	.000	.000			

Note: ^aVariable(s) entered on step 1: V1_CONFIDENCE, V2_MEDBARRIERS, V3_EMERGINGTx, V4_LACKEXPERIENCE, V5_PATIENTLIMIT, V6_SAFETY, V7 EFFICACY, V8_SOCIALBARRIERS, V11_STIGMA, D1_SCHIZPTLOAD, D3_YEARS, D4_SUPPORT, D5_ROLE, D6_cert, 14. How likely is this patient to experience a relapse? – Please select one.