

Supplement file 2. Survey for Primary Health Care Centers

Translated from Swedish to English.

#	Variable / Field Name	Field Label <i>Field Note</i>	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)																					
Instrument: Kontoadministratör (kontoadministratr) ☐ Enabled as survey																								
1	[record_id]	Record ID	text																					
2	[vc_namn]	What is the name of your health care center?	text, Required, Identifier																					
3	[listing]	How many listed patients do you have at your health center (rounded to the nearest 100)?	text (number, Min: 2000, Max: 30000), Required																					
4	[intro_month]	In which (or which) months did your health center receive an introduction to teledermatoscopy?	checkbox, Required <table border="1"> <tr><td>0</td><td>intro_month 0</td><td>April</td></tr> <tr><td>1</td><td>intro_month 1</td><td>August</td></tr> <tr><td>2</td><td>intro_month 2</td><td>September</td></tr> <tr><td>3</td><td>intro_month 3</td><td>October</td></tr> <tr><td>4</td><td>intro_month 4</td><td>November</td></tr> <tr><td>5</td><td>intro_month 5</td><td>February 2023</td></tr> <tr><td>6</td><td>intro_month 6</td><td>Don't know</td></tr> </table>	0	intro_month 0	April	1	intro_month 1	August	2	intro_month 2	September	3	intro_month 3	October	4	intro_month 4	November	5	intro_month 5	February 2023	6	intro_month 6	Don't know
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5	[nr_dr]	How many doctors completed the full introduction (the regional cancer center online course + introduction course)?	radio, Required <table border="1"> <tr><td>0</td><td>0</td></tr> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3</td></tr> <tr><td>4</td><td>4</td></tr> <tr><td>5</td><td>>4</td></tr> <tr><td>6</td><td>Don't know</td></tr> </table>	0	0	1	1	2	2	3	3	4	4	5	>4	6	Don't know							
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6	[prickmottagning]	Do you have a "skin check clinic" at your health care centre? Specific clinic time for assessment of suspected skin lesions.	radio, Required <table border="1"> <tr><td>0</td><td>No</td></tr> <tr><td>1</td><td>Yes, since before we started using teledermatoscopy</td></tr> <tr><td>2</td><td>Yes, we started a skin check clinic as we started using teledermatoscopy</td></tr> <tr><td>3</td><td>No, but we are planning to start a skin check clinic</td></tr> </table>	0	No	1	Yes, since before we started using teledermatoscopy	2	Yes, we started a skin check clinic as we started using teledermatoscopy	3	No, but we are planning to start a skin check clinic													
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7	[material]	Had you received phone, mobile dermatoscope and the application before the time of introduction?	radio, Required <table border="1"> <tr><td>0</td><td>No</td></tr> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>Don't know</td></tr> </table>	0	No	1	Yes	2	Don't know															
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8	[ansvar_per]	Do you have an appointed person responsible for TDS present at your PHC center ? <i>Someone who makes sure that the phone and dermatoscope are charged and that immersion liquid is ordered</i>	radio, Required <table border="1"> <tr><td>0</td><td>No</td></tr> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>Don't know</td></tr> </table>	0	No	1	Yes	2	Don't know															
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9	[fritext]	Is there anything else that has hindered you from getting started with teledermatoscopy?	notes																					
10	[kontoadministratr_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete															
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