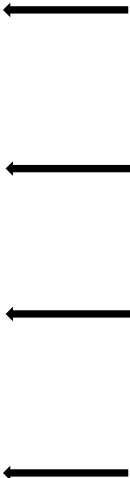
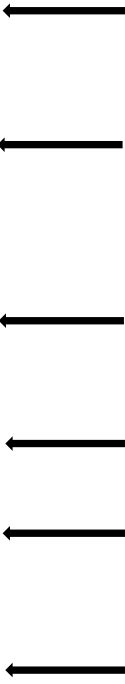


Table S1: Comparison of evaluation criteria of patient decision aids and the criteria for evaluating websites, in the analysis of evidence-based patient information of cancer patients.

IPDAS 2005 (criteria for assessing quality for patient decision aids).	Similarities between the evaluation criteria	Paper: Developing a quality criteria framework for patient decision aids: online international Delphi consensus process; 26. August 2006 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1553508/	Similarities between the evaluation criteria	What cancer patients find on the internet - the visibility of evidence-based patient information Analysis of German websites (criteria for the evaluation of websites)
				1. criteria for the evaluation of the Information quality
1.1 Includes peer review with patients/subject matter experts who were not involved in developing and are involved in the field tests as independent experts		1.1 The decision aid was reviewed by external experts [health professionals] who were not involved in the development or field trials		1.1 •Expertise - a report written by experts on a specific issue in a field of expertise.
1.1.1		1.1.1		1.1.1
- Contains procedures for quality assurance of a scientific paper or project by independent reviewers from the same discipline - Will be field tested with users (patients facing decision; practitioners presenting options)	 	- The decision aid was reviewed by external experts [patients who had previously faced the decision] or health professionals who were not involved in the development or field trials - Practitioners counseling patients on the option field tested the decision aid. - Patients who faced the decision field tested the decision aid		Quality management

Contains the developer credentials/qualifications	←	- The patient decision aid contains information about the credentials of the people who developed it - Patients were asked what they needed to prepare them to make a particular decision - Practitioners were asked what they need in order to discuss a specific decision with patients		
				1.2 Explanation of the objectives and Target groups
				1.2.1 Achieving the goals
				1.2.2 Relevance
1.3		1.3		1.3
Field testing with users [patients, practitioners] indicates that the Patient Decision Aid: - Reasonable/justifiable is - Balanced/neutral for undecided patients is	←	- Field testing showed that decision support was acceptable/appropriate for patients - Field testing showed that decision support was acceptable/appropriate for practitioners - Field tests showed that undecided patients felt that the information was presented in a balanced manner	←	Fair balance/ neutrality

1.4 Use simple language?		1.4 Using simple language		1.4
- Is written at a level that can be understood by the majority of patients in the target group - After the readability assessment, is written at a level equal to or below grade 8 (SMOG or BRJ). - Provides ways to help patients understand information other than reading [audio, video, face-to-face discussion]. - Can be understood by people with limited reading skills		- The patient decision aid identifies the reading level at which it is written and the formula [method] used to determine the level - The patient decision aid is written at a level that can be understood by at least half of the patients for whom it is intended - The patient decision aid is written at a level no higher than grade 8 [or equivalent] according to a readability formula (e.g., SMOG or BRJ) - Patient decision support provides ways to help patients understand information other than reading (e.g., audio, video, or in-person discussion) - Field tests showed that the patient decision aid was understood by patients with limited reading skills - The patient decision aid describes the "professional standards for plain language materials" that guided its development (e.g., Plain Language Association International)		- Comprehensibility for layman (e.g. suitable graphics) - Language adapted to the needs of the target group

1.5 Decision-making processes leading to Lead decision quality		1.5 Establishing effectiveness		1.5
• Recognize/show that a decision needs to be made. • Be clear about the option features that are most important at the end of the patient decision aid • Request to discuss options with a physician • Mention that personal values influence decisions • Involve patients in the decision • Improving the match, between the existing and finally chosen options with the values and characteristics that are most important to the patient.		• Helps to recognize that a decision must be made • Helps to know about the available options • Helps to know about different features of the options • Helps to be clear about which features of options are most important to them • Helps to discuss values with their doctors • The patient decision aid suggests ways to talk to a doctor about the decision • Helps to understand that values influence decision making • Helps to participate in decision making in their preferred way • The match between the functions that are most important to the informed patient and the option chosen improves		• Suitability to support joint decision making

1.6 Use current scientific evidence - cited in a reference section or technical document. become?		1.6 Based on current scientific findings		1.6
- Includes references to the evidence used - Report steps to search, evaluate, summarize evidence. - Report date of the last update - Report how often the patient decision aid is updated - Describe the quality of scientific evidence (including missing evidence). - Uses evidence from studies with patients similar to those in the target population	    	- Contains references to scientific findings - The steps for selecting scientific evidence (e.g., find, claim, summarize) are included [in a reference section or accessible technical document] - Indicates the date when it was last updated - Specifies how often the information in the decision aid is updated - Describes the quality of scientific knowledge (e.g. quality of research studies) - Describes the quality of scientific evidence (e.g., quality of research studies) [including lack of evidence]. - Uses evidence from studies of patients similar to those who would use decision support (e.g., age, sex)		- Scientific findings and topicality - No statements on topics without evidence - Marking missing evidence - Completeness of information on sources of evidence - Information on additional references and resources - Accuracy/thoroughness

1.7 Provide information about options in sufficient detail for the decision-making process?		1.7 Providing information about the possibilities/options		1.7
- Describe the state of health - Options list - List the possibility of doing nothing - Describe the natural course without options - Describe procedures - Describe positive features (advantages) - Describe negative features of options [damage / side effects / Disadvantages] - Describe which test is designed for the measurement - Include opportunities for positive / negative outcomes - Chances of real positive, real	      	- The patient decision aid describes the health condition in the context of the decision to - Patient decision aid lists health care options - The option not to select any of the health options [e.g. Do nothing] is included - The patient decision aid describes what happens in the natural course of a health condition when none of the health care options is chosen - The patient decision aid includes information about the procedures involved (e.g., what is done before, during, and after the health option) - The patient decision aid provides information about the positive features of the options (e.g., advantages, benefits) - The patient decision aid has information about the negative characteristics of the options (e.g., harms, side effects, disadvantages) For decision support that focuses on testing - Has information about what the test is supposed to measure - Has information about the chances of getting a true positive, true positive, false positive, and false negative test result. to obtain		- Detailed information about the treatments, - their benefits and risks, - Impact on quality of life; - Mode of action; - Consequences of non-treatment

negative, false positive, false negative test results - Describe possible next steps based on test result - Include chances that the disease will be found with / without screening - Detection description /treatment that would never have caused problems if you were not screened.	← ← ←	- Describes possible next steps based on the test results - Has information on the chances of diseases being found with and without screening - Provides information on the detection and treatment of diseases that would never have caused problems if screening had not been performed		
1.8 Does it include methods for clarifying and expressing patient values?		1.8 Clarification and expression of values		1.8
- Describe procedures and outcomes that help patients imagine what it is like to experience their physical, emotional, social impact - Ask patients to consider which positive and negative features are most important - Suggest ways patients can share what matters most with others - Feedback on personal health information that can be included in patient decision aid	← ← ←	- The patient decision aid describes the characteristics of options that help patients imagine what it is like to experience their physical, emotional, and social impacts - The patient decision aid asks patients to think about which positive and negative features of the options are most important to them - Patient decision support suggests ways patients can share what matters most to them when others are involved in decision making	←	Focus on the patient

1.9 Information in balanced way presented?		1.9 Weighing the presentation of options		1.9
• Able to compare positive and negative characteristics of options • Shows negative / positive features with the same detail (fonts, sequence, display of statistics)	 	• Allows to compare the positive and negative features of the available options • Shows the negative and positive features of options with the same details (e.g. with similar fonts, order, display of statistical information)		• Layout aspects • Clear arrangement of the information • Completeness
				2. formal criteria
2.1 Disclose conflicts of interest?		2.1 Disclosure of conflicts of interest		2.1
• Funding source for development and distribution of patient decision aids • Report whether authors or their affiliations stand to gain or lose from the decisions patients make after using patient decision aids • Reports if there was a financial or other reason why patients decided to share their story	  	• Reported where the money came from to develop the decision support tool • Reported where the money came from to copy and distribute the decision aid The patient decision aid reports whether • the originator or author of the decision aid stands to gain or lose from the decisions that patients make after using a decision aid If the patient decision aid includes stories • about other patients' experiences, it reports whether there was a financial or other reason why patients decided to share them		• Transparency in relation to Vendors, supporters, funding, advertising, etc.

2.2 Data protection		2.2		2.2
- Provides security for personal health information included in the decision support tool When stories are used in patient decision support - State in an accessible document that the patient has given informed permission for their stories to be used	←	When stories are used in a patient decision aid, a statement that patients have given informed consent to have their stories included. [in a reference section or accessible technical document].	←	Privacy
2.3 Present the Probability of results in an unbiased and understandable way?		2.3 Presenting probabilities		2.3
- Use event rates that indicate the population and time period - Compare outcome probabilities using the same denominator, time period, and scale - Using visual diagrams - Use multiple methods to display probabilities [words, numbers, graphs].	 ← ← ← ←	Patient Decision Support... - Represents probabilities using event rates in a defined patient group for a given time - Compares the probabilities of options with the same denominator - Compares the probabilities of options in the same time period - Uses visual diagrams to display the probabilities (e.g., areas, stick figures, or bar graphs) - Uses the same scales in the diagrams where options are compared - Provides more than one way to explain probabilities (e.g., words, numbers, diagrams)	←	Observation scientific knowledge about the presentation of figures and results

• Allow patients to consider probabilities based on their own situation (e.g., age, risk group, etc.)	←	• Enables patients to recognize the probabilities of what might happen based on their individual situation (e.g., specific to their age or severity of illness)		
• Description of the uncertainty around probabilities	←	• Allows patients to select a way to display probabilities (e.g., words, numbers, graphs)		
• Putting probabilities in context with other events	←	• Describes the uncertainty around the probabilities (e.g., by giving a range or using phrases like "our best guess is") • Places emphasis on the odds of what might happen in other situations (e.g., odds of developing other diseases, dying from other diseases, or dying from any cause)		
• Both positive and negative frames are used [e.g., with survival and death rates].	←	• Represents probabilities that include both positive and negative frames (e.g., with survival and mortality rates) • The way in which the probabilities were calculated is described (in a reference section or an accessible technical document) • If the likelihood of disease of subgroups [e.g., younger, middle-aged, or elderly] is provided, the tool used to estimate these risks is described [in a reference section or accessible technical document]		

2.4 Structured consulting and Include communication?		2.4 Leadership/Coaching in Consulting and Communication		2.4
• Steps for decision making • Suggestions on how to talk to a doctor about the decision • Include tools [worksheet, question list] to discuss options with others		• The patient decision aid explains a step-by-step process to make a decision • The patient decision aid suggests ways to talk to a doctor about the decision • Patient decision support offers the opportunity to work with a trained "coach" to help patients consider their options • Patient Decision Support offers the opportunity to work with a trained "coach" to help patients prepare to make decisions with a physician • Patient decision support includes tools such as worksheets or lists of questions that can be used when discussing options with a practitioner		• Possibilities of the Feedback and participation for users
2.5 Facilitation on websites		2.5 Provision of Patient decision aids on the Internet		
• Providing a step-by-step way to go through the web pages • Enable patients to search for keywords		• Provides a step-by-step way to move through the web pages (screens) on the Internet • Patients can search for keywords in the decision aid		

• See point privacy • Make it easier for patients to return to decision support after linking to other websites • Allow printing as single document		• Provides feedback on personal health information entered into the decision aid. [e.g., the chances that you will have a complication]. • Does the website provide security for personal health information entered into the decision support tool • Is it easy for patients to find their way back to where they were in the decision support when they clicked on links to other websites • If the patient decision aid is on the internet, it can also be printed as a single document (e.g. pdf- document)		
2.6 Meet additional criteria when stories are used in patient decision support become?		2.6 Decision support with patient stories		
• Use stories that represent a range of positive and negative experiences		• Gives stories about the experiences of other patients • Do the stories represent a range of experiences (positive and negative) • If the steps used to select these stories are described [in a reference section or accessible technical document]. • If the steps experts used to verify the information contained in these reports are included [in a reference section or accessible technical document]		

