Data Supplement 1. Survey Instrument

Survey: Dyad to Triad Study

Consent to Participation
You are invited to complete a survey on clinical practice as part of a research study on the effect of privacy in the emergency department. This research study is being conducted by Hanni Stoklosa, MD, MPH and J. Stephen Bohan, MD, MS, physicians at Brigham and Women’s Hospital. Your responses will help us learn more about privacy considerations in caring for patients in the emergency department. We are recruiting emergency clinicians, including nurses, physicians, and physician assistants. We are contacting you through your affiliation with a national association in your profession. It should take approximately 3 minutes to complete and you will not be paid for your participation.

☐ I agree to participate in this research.
☐ I do not agree to participate in this research.

Section 1 - Patient Interview
When interviewing a patient, has the presence of the patient's family member, friend or other accompanying individuals ever caused you to alter or omit a question?

☐ Yes
☐ No

If No Is Selected, Then Skip to Section 2

1A. Are you more likely to alter or omit questions when
The patient is located in the hallway?

☐ Never
☐ Rarely
☐ Sometimes
☐ Often
☐ All of the Time

1B. Are you more likely to alter or omit questions when
Someone known to the patient (family/friend/acquaintance) is present

☐ Never
☐ Rarely
☐ Sometimes
☐ Often
☐ All of the Time

1C. Are you more likely to alter or omit questions when
The patient's gender is:

☐ Male
☐ Female
☐ Neither. The patient's gender plays no role
1D. When you altered or omitted a question, did it ever lead to any delay or failure to diagnose that you are aware of?
☐ Yes
☐ No
If No Is Selected, Then Skip to Section 2

1E. If YES to delay, Was the delay:
☐ Minutes
☐ Hours
☐ Days

1F. If YES to "failure to diagnose"
To which of the following Medical System was it related?
☐ None - Was not related with a Medical System
☐ Neurologic
☐ Cardiovascular
☐ Pulmonary
☐ Gastroenterological
☐ Genitourinary
☐ Musculoskeletal
☐ Dermatologic
☐ Other - Please elaborate____________________

1G. If YES to "failure to diagnose"
To which of the following Psychiatric Conditions was it related?
☐ None - Was not related with a Psychiatric Condition
☐ Suicidal Ideation or Self-Harm
☐ Homicidal Ideation or Harm to Others
☐ Auditory or Visual Hallucination
☐ Delusions
☐ Psychosis
☐ Other - Please elaborate____________________

1H. If YES to "failure to diagnose"
To which of the following Social Issue was it related?
☐ None - Was not related with a Social Issue
☐ Domestic Violence/Intimate Partner Violence
☐ Child Abuse
☐ Human Trafficking
☐ Elder Abuse
☐ Substance Abuse
☐ Other - Please elaborate____________________
Section 2- Physical Exam

When examining a patient, has the presence of a patient's family member, friend or other accompanying individual ever caused you to alter your physical exam? (This includes not performing an element of the physical exam, or performing it in an abbreviated manner e.g. not undressing the patient)

- Yes
- No

If No Is Selected, Then Skip to Section 3

2A. Are you more likely to alter your assessment when
   The patient is in the hallway?
   - Never
   - Rarely
   - Sometimes
   - Often
   - All of the Time

2B. Are you more likely to alter your assessment when
   Someone known to the patient (family/friend/acquaintance) is present?
   - Never
   - Rarely
   - Sometimes
   - Often
   - All of the Time

2C. Are you more likely to alter your assessment when
   The patient is
   - Male
   - Female
   - Neither. The patient's gender plays no role.

2D. When you alter the physical exam, did it ever lead to a delay or failure to diagnose that you are aware of?
   - Yes
   - No

If No Is Selected, Then Skip to Section 3
2E. If YES to "delay"
Was the delay
☑ Minutes
☑ Hours
☐ Days

2F. If YES to "failure to diagnose"
To which of the following Medical System was it related?
☑ None - Was not related with a Medical System
☑ Neurologic
☑ Cardiovascular
☑ Pulmonary
☑ Gastroenterological
☑ Genitourinary
☑ Musculoskeletal
☑ Dermatologic
☑ Other - Please elaborate ____________________

2G. If YES to "failure to diagnose"
To which of the following Psychiatric Conditions was it related?
☑ None - Was not related with a Psychiatric Condition
☑ Suicidal Ideation or Self-Harm
☑ Homicidal Ideation or Harm to Others
☑ Auditory or Visual Hallucination
☑ Delusions
☑ Psychosis
☑ Other - Please elaborate ____________________

2H. If YES to "failure to diagnose"
To which of the following Social Issue was it related?
☑ None - Was not related with a Social Issue
☑ Domestic Violence/Intimate Partner Violence
☑ Child Abuse
☑ Human Trafficking
☑ Elder Abuse
☑ Substance Abuse
☑ Other - Please elaborate ____________________
Section 3 - Practice and Demographic Information

3A. How many years have you practiced clinically in an emergency department setting after medical school? ________________

3B. How often do you evaluate patients in the hallway?
   ☐ Never
   ☐ Rarely
   ☐ Sometimes
   ☐ Often
   ☐ All of the Time

3C. What is your gender?
   ☐ Male
   ☐ Female

3D. Comments or anecdotes you would like to share related with your responses above? (optional)