We are collecting information to help us understand how a new web-based family health history tool might work in your clinic. I will describe this tool shortly. First I would like to learn about your clinic and how family health history is currently used in your clinic.

Can you please tell me about your current position? How long have you been in that role? How long have you been employed at your facility?

1. Please start by describing how patients flow through your clinic.
   a. What happens when patients come to the clinic? Where do they check in? Who checks them in? How?
   b. Where do patients go after they check in? Who sees them next? How does triage work at your facility? Who does the triage?
   c. What happens after the visit? How are orders carried out?
   d. How do providers communicate with patients who are not in the clinic?
   e. How do providers communicate with other providers about patients? (NOTE: Specify if inside or outside of clinic.)

2. IF SCHEDULER, ASK: How do you carry out provider recommendations, for example for colonoscopies, mammograms, genetic testing referrals? Current practice

3. How important is it to collect family health history? Change valence

4. IF PROVIDER OR NURSE, ASK Q3-5: What is currently done in your facility regarding family health history screening? Current practice
   a. How do you collect family health history information?
   b. How do you see the results?
   c. How do you use family health history? How does family health history information affect the recommendations that you make to patients?

5. Is there a recognized champion for using family health history? What is his/her role? Org readiness

6. How important is it to provide decision support to physicians regarding cancer and other disease screening? Change valence

7. What motivates your participation in this study? Innovation values fit

IF SCHEDULER, SKIP TO Q 13-15.

Now I will describe the tool. McTree will be available as an independent web service that provides risk stratification and clinical decision support for over 10 common conditions, including breast cancer, ovarian cancer, and colon cancer. With this tool, patients can input their 3-generation family health history information directly from any computer into the program. Lay level and technical decision support will be provided that is activating for patients, clinically actionable for providers, and easy to understand. Decision support will include a calculated score (eg, Gail or Framingham score) and will be based upon guidelines widely accepted by PCPs. Decision support will provide just-in-time education with the reports about what criteria triggered the recommendation, points to consider about the recommendation, data such as number needed to treat, references to the guidelines, and links to additional resources.
8. How well does this project fit with your clinic’s overall goals for patient care? **Change valence**
9. How well do you think the family history tool will improve disease detection among screened patients? **Change valence**
10. What, if any, negative effects do you think could result from implementation of this tool? **Change valence**
11. Has your facility implemented something like this before? If so, what? How successful was it? **Task demands**
12. How confident are you that your clinic will be able to successfully use this tool? **ORC**

Let’s talk about some specific issues that might affect use of this tool.

13. Are there other initiatives, programs, projects, or activities underway or planned that would interfere with this project? How? **Situational factors**
14. Are there important time constraints, deadlines or events that might affect the time available to implement the family history tool? **Situational factors**
15. Are there other higher-priority needs, issues or events that will compete for clinic staff and physicians’ time and attention? If so, what? Is there anything that could be done to reduce the impact of these competing demands? **Situational factors**
16. What are the key factors that will make this implementation successful or unsuccessful? What could be done to [increase or decrease] these factors? **Situational factors**
17. What kind of support will you need to implement this tool in your practice? **Situational factors**

Is there anything else that you want to say about use of family health history at your clinic or this proposed tool? Thank you for your participation.