

Online Supplementary Material

Han PKJ, Kobrin S, Breen N, et al. National evidence on the use of shared decision making in prostate-specific antigen screening. *Ann Fam Med.* 2013;11(4):306-314.

<http://www.annfammed.org/content/11/4/306>

Factor	Low Intensity vs No Screening OR (95% CI)^a	High Intensity vs No Screening OR (95% CI)^a	P Value^b
Age, years			< .001
50-59	1.0	1.0	
60-69	1.92 (1.56-2.36)	4.12 (3.26-5.21)	
70-74	1.75 (1.21-2.53)	4.75 (3.27-6.89)	
Education			< .001
< High school graduate	1.0	1.0	
High school graduate	1.51 (1.16-1.96)	2.01 (1.34-3.04)	
Some college/technical school	1.88 (1.42-2.49)	3.48 (2.46-4.91)	
College graduate	2.98 (2.23-3.98)	6.37 (4.40-9.21)	
Usual source of medical care			< .001
Yes	1.0	1.0	
No	0.22 (0.15-0.32)	0.05 (0.02-0.10)	
Doctor recommendation			< .001
Yes	65.53 (48.55-88.44)	198.02 (136.14-288.04)	
No	1.0	1.0	
Extent of shared decision making ^c			< .001
No elements	1.0	1.0	
Partial (disadvantages only)	4.64 (2.34-9.22)	5.68 (2.96-10.89)	
Partial (advantages only)	8.87 (6.41-12.27)	13.80 (9.69-19.66)	
Partial (advantages + disadvantages/uncertainty)	12.16 (7.91-18.71)	13.49 (8.68-20.94)	
All elements	8.52 (5.37-13.52)	9.81 (6.04-15.95)	

PSA = prostate-specific antigen.
 Note: PSA screening intensity: no screening = no prior testing; low intensity = 1-3 tests in past 5 years; high intensity = 4-5 tests in past 5 years
^a From multivariable polytomous logistic regression model with PSA screening as the dependent variable (n = 3,209)
^b Wald χ^2 test for association.
^c No elements = no physician discussion of advantages, disadvantages, or uncertainty; partial (disadvantages only) = discussion of disadvantages only, disadvantages + uncertainty, or uncertainty only; partial (advantages only) = discussion of advantages only; partial (advantages + disadvantages/uncertainty) = discussion of advantages + disadvantages or advantages + uncertainty; all elements = discussion of advantages, disadvantages, and uncertainty.