

## **Online Supplementary Material**

Yawn BP, Dietrich AJ, Wollan P, et al. TRIPPD: a practice based network effectiveness study of postpartum depression screening and management. *Ann Fam Med*. 2012;10(4):320-329.

http://www.annfammed.org/content/10/4/320/suppl/DC1

Supplemental Table 1. Power Estimate Simulations			
Effect Size	1.0	1.3	1.5
30 practices, 40 patients			
Std = 0.5	.72	.93	.97
Std = 0.8	.54	.74	.87
30 practices, 32 patients			
Std = 0.5	.68	.88	.93
Std = 0.8	.51	.70	.84

Note: The power calculations for the random-effects model testing the screening intervention effect are based on 30 replications, with 4 additional practice-level factors (number of physicians, urban vs rural, residency, and single vs multispecialty), 4 additional patient-level factors (age, parity, previous history of depression, and income), and 4 physicians per practice (for the power estimate simulations. From preliminary data, we use a within-practice standard deviation of 4.5. "Std" is the between-practices standard deviation; conservatively, the same value is used for the between-physician standard deviation. We show results for 40 patients per practice (1,500 enrolled patients in 30 practices, with an 80% completion rate) and for 32 patients per practice. Effect size is the difference between control and the screening intervention means in units of the Edinburgh Postnatal Depression Scale. 1-3

## References

- 1. Wickberg B, Hwang CP. Screening for postnatal depression in a population-based Swedish sample. *Acta Psychiatr Scan.* 1997;95:62-66.
- 2. MacArthur C, Winter HR, Bick DE, Knowles H, Lilford R, Henderson C, et al. Effects of redesigned community postnatal care on womens' health 4 months after birth: a cluster randomised controlled trial. *Lancet* .2002;359:378-385.
- 3. Gunn J, Lumley J, Chondros P, Young D. Does an early postnatal check-up improve maternal health: results from a randomized trial in Australian general practice. *Br J Obstet Gynaecol*. 1998;105(9):991-997.