

**Supplemental File:**

**eTable 1: Overall Survey Questions & Responses and Characteristics**

Characteristic	Overall Survey Distribution <sup>a</sup>
	All Clinics (N=363)
<b>Age (Which age group do you fall in?)</b>	
18-30	63 (17.4)
30-50	115 (31.7)
50-70	151 (41.6)
70+	34 (9.4)
<b>Sex (Are you male or female?)</b>	
Male	115 ( 31.7)
Female	248 (68.3)
<b>Race (What is your Race or Ethnicity?)</b>	
Asian or Asian American	27 (7.4)
Black or African American	67 (18.5)
Hispanic or Latino	59 (16.3)
White	203 (55.9)
Other	7 (1.9)
<b>Skin Type (Under what category would you place your skin tone?)</b>	
Skin Type I or Very White	30 (8.3)
Skin Type II or White	125 (34.4)
Skin Type III or white to Olive	84 (23.1)
Skin Type IV or Olive	47 (12.9)
Skin Type V or Dark Brown	71 (16.9)
Skin Type VI or Black	6 (1.7)

<b>Presence of LM (Do you have any straight dark Lines that run across the length of your finger or toenail(s)? )</b>	
Yes	37 (10.2)
No	326 (89.8)
<b>Family History of LM (Has anyone in your family ever noticed a straight dark line that runs through the whole length of any of their nails?)</b>	
Yes	35 (9.6)
No	328 (90.4)
<b>Family History of SM (Have you or anyone in your immediate family (mother, father, brother/sister, grandparents) ever been diagnosed with a nail melanoma?)</b>	
Yes	3 (0.8)
No	360 (99.2)
<b>History of Skin Cancer (Have you ever had skin cancer such as squamous carcinoma/basal Cell Carcinoma/melanoma? )</b>	
Yes	39 (10.7)
No	324 (89.3)
<b>Family History of Skin Cancer (Has anyone in your immediate family (mother, father, brother/sister, grandparents) had skin cancer? )</b>	
Yes	86 (23.7)
No	277 (76.3)
<b>Number of nails with bands (How many nails had lines on them?)</b>	
Mean	1.94
Standard Deviation	3.26
Median	1.00
<b>Band associated with change in color or width (Did the line(s) on your nail(s) change in color (become lighter or darker) or in width (involve more of the nail)?</b>	
Yes	12 (32.4)
No	25 (67.6)
<b>Band associated with pain or bleeding of nail (Was the line associated with pain or bleeding of the nail? )</b>	
Yes	4 (10.8)
No	33 (89.2)
<b>Did you seek Medical Attention for the band? (Did you seek medical attention for the line?)</b>	
Yes	17 (45.9)

No	20 (54.1)
<b>Reason of seeking medical attention (If you did seek medical attention, why did you seek medical attention?)</b>	
I did not seek medical attention	0 (0.0)
It looked bad/ab normal	5 (29.4)
I was worried about cancer (i.e Melanoma)	5 (29.4)
It was Painful	2 (11.8)
Other	5 (29.4)
<b>Heard of the “ABCDEF” mnemonic for nail melanoma (Have you heard of the “ABCDEF” screening mnemonic for NAIL MELANOMA?)</b>	
Yes	18 (5.0)
No	345 (95.0)
<b>Choice of mnemonic representation (Please choose what each alphabet represents, to the best of your ability:)</b>	
Age/Asian/African American/Native American, Black/Brown/Breadth/Border, Change in band, Digit, Extension of pigment, Family history ***	9 (50.0)
American , Black/Blue band, Change in band, Digit, Extension of pigment, Family history	3 (16.7)
Age/Asian/African American, Breadth/Border, Change in band, Dark band, Elevation of nail, Failure to improve	5 (27.8)

American, Bleeding, Change in band, digit, Extension of pigment, Family history.	1 (5.6)
<b>How did you hear about the mnemonic (How did you hear about the “ABCDEF” screening method?)</b>	
My Dermatologist	7 (38.9)
A Magazine or TV	1 (5.6)
Facebook or Twitter	0 (0.0)
Other	10 (55.6)
<b>Does your doctor ask about nail changes (Does your doctor you ask about nail changes?)</b>	
Yes	43 (11.8)
No	320 (88.2)
<b>Did your doctor discuss this mnemonic with you (Has your doctor discussed this screening guideline method to evaluate the nail band?)</b>	
Yes	5 (1.4)
No	358 (98.6)
<b>Are you satisfied with your nail evaluation by your dermatologist (How satisfied are you with the evaluation of your nails by your dermatologist?)</b>	
Very Unsatisfied	128 (54.9)
Satisfied	85 (36.5)
Very Satisfied	20 (8.6)
<b>How often do you examine your nails for changes (How often do you evaluate your nails for color changes?)</b>	
Multiple times per day	23 (20.2)
Once a day	18 (15.8)
Once a week	30 (26.3)
Once a Month	43 (37.7)
Never	0 (0.0)
<b>Do you evaluate your nails for color changes (Do you evaluate your nails for color changes?)</b>	
Yes	114 (31.4)

No	249 (68.6)
<b>Heard of the “ABCD” Mnemonic for skin melanoma (Have you heard of the “ABCD” screening mnemonic for <u>SKIN MELANOMA</u> (Note: “ABCD” for skin melanoma is different from “ABCDEF” for nail melanoma)?)</b>	
Yes	36 (9.9)
No	327 (90.1)
<b>Choice of mnemonic representation (Please choose what each alphabet represents?)</b>	
Age, Blue/Black mole, Change, Diameter (more than 6 mm)	1 (2.8)
Age, Border, Change in mole, Diameter (more than 6 mm)	3 (8.3)
Asymmetry of mole, Border, Change in mole, Diameter (more than 6 mm)***	30 (83.3)
Asymmetry of mole, Black/Blue mole, Change in mole, Diameter (more than 6 mm)	2 (5.6)
<b>Choice of mnemonic representation (Please choose what each alphabet represents?)</b>	
Age, Blue/Black mole, Change, Diameter (more than 6 mm)	1 (2.8)
Age, Border, Change in mole, Diameter (more than 6 mm)	3 (8.3)
Asymmetry of mole, Border, Change in mole, Diameter (more than 6 mm)***	30 (83.3)
Asymmetry of mole, Black/Blue mole, Change in mole, Diameter (more than 6 mm)	2 (5.6)
<b>Do you get regular skin checks (Do you get regular skin checks?)</b>	
Yes	154 (42.4)
No	209 (57.6)
<b>Does your doctor discuss this mnemonic with you (Has your doctor discussed this screening guideline method to evaluate moles?)</b>	
Yes	50 (13.8)
No	313 (86.2)

<b>Do you use sunscreen or sun-protective clothing (Do you use sunscreen or sun-protective clothing?)</b>	
Yes	255 (70.2)
No	108 (29.8)
<sup>a</sup> Unless otherwise noted, data are reported as number (percentage) of respondents	
*** Correct representation of mnemonic	