

Supplementary File 1

Checklist for Nurse-Patient Interactions:
“Health-Related Quality of Life Assessment in Clinical Nephrology Nursing Practice”

This form will be used to record the number of issues related to the KDQOL-36 and ESAS-r: Renal discussed during the patient-nurse interaction. We are also interested in knowing who initiated the conversation (or mentioned the issue first). Please tick the appropriate box and write number one (1) by the tick for the person who mentioned the issue first.

Patient Participant #: _____ Nurse Participant #: _____ Date: _____ Location: _____
 1st or 2nd time patient participated in study: _____ Name of RA: _____

<u>ESAS</u>	Nurse	Patient	<u>KDQOL (con't)</u>	Nurse	Patient
Pain			Burden of Kidney Dx		
Tiredness			Dx interferes with life		
Drowsiness			Time spent dealing with dx		
Appetite			Frustration in dealing with dx		
Feeling of wellbeing			Burden to family		
Problems with sleeping					
			Symptoms		
<u>ESAS & KDQOL</u>			Muscle soreness		
Nausea / upset stomach			Chest pain		
Depression / downhearted or blue			Cramps		
Anxiety vs feeling calm / peaceful			Dry skin		
Itching			Faintness / dizziness		
Shortness of breath			Washed out / drained		
			Numbness in hands / feet		
			Problems with access site / PD catheter		
Physical and Mental Component Summary					
Overall health			Effects of Kidney Dx on Daily Life		
Moderate activities			Fluid restriction		
Climbing stairs			Dietary restriction		
Accomplishing less (due to physical)			Ability to work around house		
Limited in work/activities			Travel		
Accomplished less (due to emotions)			Dependence on healthcare professionals		
Didn't work as carefully			Stress / worries caused by dx		
Pain interfering with work			Sex life		
Energy			Personal Appearance		
Interference with social activities					
			Other		

1. ESAS	<input type="checkbox"/> Completed on iPad	<input type="checkbox"/> Completed on paper			
2. KDQOL	<input type="checkbox"/> Chart Report (iPad) prior to nurse visit	<input type="checkbox"/> Paper version prior to nurse visit	<input type="checkbox"/> Completed on iPad after nurse visit	<input type="checkbox"/> Completed on paper after nurse visit	<input type="checkbox"/> Did not complete

3. Level of looking at ESAS	<input type="checkbox"/> Not all	<input type="checkbox"/> Min.	<input type="checkbox"/> Scanned through	<input type="checkbox"/> Referenced throughout meeting	Notes:
4. Level of looking at KDQOL	<input type="checkbox"/> Not all	<input type="checkbox"/> Min.	<input type="checkbox"/> Scanned through	<input type="checkbox"/> Referenced throughout meeting	Notes: