Supplementary material BMJ Open

Additional File 1. Example Quotes of Knowledge Objects

Knowledge Objects		Example Quotes
Confirmation of Existing Knowledge		"Some of my providers are having a hard time getting a level 4. Our coding department says that just
		because you did spirometry, that does not change your coding I don't know if they're not
	Billing/Coding,	documenting enoughin their note." (Jan 2015)
	Reimbursement	"We have the same internal coding department and if we have questions even before we submit
		for billing, we can have them review our note and review the documentation and our level of billing."
		(Jan 2015)
	Decumentation	"We've incorporated the documentation that you sent out we've enhanced [it] for our own
	Documentation	practice, which I personally like because it's a quick reference tool." (June 2015)
	Patient	"The patients are very satisfied, I can tell you that." (Dec 2014)
	Satisfaction	
	Recruitment	"We used the posters that you provided for us. We have those in the [exam] rooms and out in the
		waiting area." (Dec 2014)
	Scheduling	"I think in the next quarter we're going try to expand to more providers having those types of days and
		[asthma] visits in the afternoon, that way it just becomes ingrained in everybody's mind." (Dec 2014)
	Sustainability	"[We] probably will start after the holidays and try to recruit some more for our other providers. X has
		trained PAs and physicians so we are ready to get them rolling just like she is." (Dec 2014)
		"We did some role playing, trying to get through the list of questions and get comfortable with them. X
	Turinina	has been doing our shared medical decision-making appointments and X has sat in with her several
	Training	times on those appointments trying to famaliarize herself and get a little more comfortable too." (Oct
		2015)
	Usefulness of	"I've been on for a little while and heard some good ideas that I can take back to them." (Dec 2014)
	Group Call	
	Usefulness of	"I think it's going better and better and I think there is value and the providers are starting to see
	SDM Clinic	value in it." (Dec 2014)
Generation of New Knowledge	Application of	"I was very proud or pleased with [what] we have done in this project to asthma. I think it could be
	SDM	done with diabetes and other conditions." (June 2015)
		"I've heard people talking about the [documentation] templates I actually typed mine up in
		conjunction with the health documentation information that you sent us maybe a couple months ago.
	Documentation	And I added [the] five essential components (of shared decision making) in what you sent me and I've
		copied and pasted that into smart phrases here, so that whenever I see an asthma patient I can just
		incorporate that entire document into my charting and delete what I don't need." (Nov 2014)
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	"She's working on maybe doing a little series with Fox News about asthma and what they're doing
Dissemination	here at the practice to help patients better deal with asthma." (Dec 2014)
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Health Coach	"Our nurse practitioner is set up for health coaching. She's going to be certified as a health coach
Certification	within the next couple months Our clinical coordinator CMA also wanted to get certified in health
	coaching so maybe that will happen next year." (Oct 2015)
	"We actually had an asthma class for our children, 6-10 (years old), and we had one night, it was an
Patient	hour and a half class. We had a quite a few people come in with their parents and then we used
Education	questions that they had brought up and had a clinical meeting and an asthma refresher." (June
	2015)
	If any of the groups are doing patient-centered medical home. I just finished doing mine and I actually
	used the ADAPT-NC [Study] There was one section on PCMH that asks if we had patient
РСМН	participation with any of our meetings and educational classes and of course we have with the
	asthma shared decision-making so I was able to use that on my PCMH. That was very nice." (Dec
	2014)
	"We have been able to have our care coordinators call before and in anticipation of their upcoming
	asthma visit and they're asking them beforehand and documenting in our EHR, how the things
Pre-Visit	are going, what the parents or the patients feel their goals for this year would be, and how their
Planning	medications are going and if they're having any difficulties or any adherence issues with their
	medications So they're having that conversation out front ahead of your visit so it's there when they
	come in for their asthma visit." (Aug 2015)
	"So [with the parallel scheduling there] may be zero impact on my day if patients were no-showing
Productivity	because we'll just move work-in [patients] into those positions." (Jan 2015)
	"We have [a] parallel schedule where I'll have basically standard afternoon schedule. We only do our
	asthma clinics in the afternoon Additionally, if a patient no-shows for the asthma visit, it doesn't
Scheduling	affect me. If I have a no-show on my regular schedule, it just may mean I spend more time with my
	asthma patients. We've found that works very, very well in a productivity model." (Jan 2015)
	"I'd also like to say a special thank you to X for her presentation for her 2nd year refresher because
Shared	my first one is next Thursday. I hope she doesn't mind me using and adding my own revisions
Resources	because it was just a great presentation." (April 2015)
	"I am getting ready to send out a campaign call. Within our system we can create our own
	campaigns. Asthma flares this time of year are pretty high so we're sending out a little asthma
Recruitment	reminder to folks that we are doing the shared decision-making clinic It's a group call. Like a
1.55.5	reminder call you can do. We can send it out to all our patients or a select group of patients. So I can
	send it out to all asthma coded patients." (Nov 2015)
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Spreading of New Knowledge	Team Based Care	"We have a case manager who will now come in with our meetings that we've identified as [an] asthma meeting and she'll be in there. And then she'll liaison from the family to the office." (Aug 2015)
	Training	"We already have a lot of students that come through and we're teaching them shared decision-making so that when they go out into the world, hopefully they'll use that." (Oct 2015)
	Application of	"Yes, diabetes and what are some more? Obesity. We're gonna use obesity and diabetes as our first
	SDM	focus." (Oct 2015)
		"I think others might be interested to know about that [health] coaching program I'd seen some
	Health Coach	things on the internet about that, but if there's a specific link in case other practices are interested in
	Certification	having some of their staff certified and more formally trained maybe we can share that with the
		group?" (Oct 2015)
	PCMH	"We are doing the PCMH recertification and I did see that this could qualify for part of that so I'm sure
		my managers are on that." (June 2015)
	Pre-Visit	"I love the idea of having the triage nurses call ahead and do the little pre-screening We were
	Planning	definitely taking notes about that." (Aug 2015)
0,	Recruitment	"I'm anxious to see the video that X did. I think that will be a great recruitment video to share with all
		when it's up and ready." (April 2015)
	Scheduling	"They are looking to, in this fall, start with the parallel scheduling that X has so successfully
		implemented." (June 2015)
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EHR = Electronic Health Record; PCMH = Patient Centered Medical Home; SDM = Shared Decision Making; X = deidentified names