ONLINE SUPPLEMENTARY MATERIAL

Racial and socioeconomic disparities in patient experience of clinician empathy: a protocol for systematic review and meta-analysis

Brian W. Roberts, MD, MSc; Christian J. Trzeciak; Nitin K. Puri, MD;
Anthony J. Mazzarelli, MD, JD, MBE; and Stephen Trzeciak, MD, MPH

From Cooper University Health Care and the Center for Humanism at Cooper Medical School of Rowan University, Camden, New Jersey, USA

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Address for correspondence:
Brian W. Roberts, MD, MSc
Cooper University Hospital
One Cooper Plaza, K152
Camden, New Jersey, USA 08103
roberts-brian-w@cooperhealth.edu

Online Supplementary Material 1: The Consultation and Relational Empathy (CARE) measure. Source: http://www.caremeasure.org/CAREEng.pdf

CARE Patient Feedback Measure for

*** Type name of Practitioner here ***

Please write today's date here:

D D / M M / Y Y

Please rate the following statements about today's consultation.

Please mark the box like this ☑ with a ball point pen. If you change your mind just cross out your old response and make your new choice. Please answer every statement.

How good was the practitioner at...	Poor	Fair	Good	Very Good	Excellent	Does not apply
1) **Making you feel at ease** (introducing him/herself, explaining his/her position, being friendly and warm towards you, treating you with respect; not cold or abrupt)	☐	☐	☐	☐	☐	☐
2) **Letting you tell your "story"** (giving you time to fully describe your condition in your own words; not interrupting, rushing or diverting you)	☐	☐	☐	☐	☐	☐
3) **Really listening** (paying close attention to what you were saying; not looking at the notes or computer as you were talking)	☐	☐	☐	☐	☐	☐
4) **Being interested in you as a whole person** (asking/knowing relevant details about your life, your situation; not treating you as "just a number")	☐	☐	☐	☐	☐	☐
5) **Fully understanding your concerns** (communicating that he/she had accurately understood your concerns and anxieties; not overlooking or dismissing anything)	☐	☐	☐	☐	☐	☐
6) **Showing care and compassion** (seeming genuinely concerned, connecting with you on a human level; not being indifferent or "detached")	☐	☐	☐	☐	☐	☐
7) **Being positive** (having a positive approach and a positive attitude; being honest but not negative about your problems)	☐	☐	☐	☐	☐	☐
8) **Explaining things clearly** (fully answering your questions; explaining clearly, giving you adequate information; not being vague)	☐	☐	☐	☐	☐	☐
9) **Helping you to take control** (exploring with you what you can do to improve you health yourself; encouraging rather than "lecturing" you)	☐	☐	☐	☐	☐	☐
10) **Making a plan of action with you** (discussing the options, involving you in decisions as much as you want to be involved; not ignoring your views)	☐	☐	☐	☐	☐	☐

Comments: If you would like to add further comments on this consultation, please do so here.

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Online Supplementary Material 2: The PRISMA-P checklist

PRISMA-P (Preferred Reporting Items for Systematic review and Meta-Analysis Protocols) 2015 checklist: recommended items to address in a systematic review protocol*

Section and topic	Item No	Checklist item	(Page No.#)
ADMINISTRATIVE INFORMATION			
Title:			
Identification	1a	Identify the report as a protocol of a systematic review	1
Update	1b	If the protocol is for an update of a previous systematic review, identify as such	7
Registration	2	If registered, provide the name of the registry (such as PROSPERO) and registration number	2
Authors:			
Contact	3a	Provide name, institutional affiliation, e-mail address of all protocol authors; provide physical mailing address of corresponding author	1
Contributions	3b	Describe contributions of protocol authors and identify the guarantor of the review	22
Amendments	4	If the protocol represents an amendment of a previously completed or published protocol, identify as such and list changes; otherwise, state plan for documenting important protocol amendments	11
Support:			
Sources	5a	Indicate sources of financial or other support for the review	22
Sponsor	5b	Provide name for the review funder and/or sponsor	
Role of sponsor or funder	5c	Describe roles of funder(s), sponsor(s), and/or institution(s), if any, in developing the protocol	
INTRODUCTION			
Rationale	6	Describe the rationale for the review in the context of what is already known	4-5
Objectives	7	Provide an explicit statement of the question(s) the review will address with reference to participants, interventions, comparators, and outcomes (PICO)	5
METHODS			
Eligibility criteria	8	Specify the study characteristics (such as PICO, study design, setting, time frame) and report characteristics (such as years considered, language, publication status) to be used as criteria for eligibility for the review	8
Information sources	9	Describe all intended information sources (such as electronic databases, contact with study authors, trial registers or other grey literature sources) with planned dates of coverage	7-8
Search strategy	10	Present draft of search strategy to be used for at least one electronic database, including planned limits, such that it could be repeated	23
Study records:			
Data management	11a	Describe the mechanism(s) that will be used to manage records and data throughout the review	9
Selection process	11b	State the process that will be used for selecting studies (such as two independent reviewers) through each phase of the review (that is, screening, eligibility and inclusion in meta-analysis)	9
Data collection process	11c	Describe planned method of extracting data from reports (such as piloting forms, done independently, in duplicate), any processes for obtaining and confirming data from investigators	9
Data items	12	List and define all variables for which data will be sought (such as PICO items, funding sources), any pre-planned data assumptions and simplifications	9-10
Outcomes and prioritization	13	List and define all outcomes for which data will be sought, including prioritization of main and additional outcomes, with rationale	5, 10
Risk of bias in individual studies	14	Describe anticipated methods for assessing risk of bias of individual studies, including whether this will be done at the outcome or study level, or both; state how this information will be used in data synthesis	9-10
Data synthesis	15a	Describe criteria under which study data will be quantitatively synthesised	10-11
	15b	If data are appropriate for quantitative synthesis, describe planned summary measures, methods of handling data and methods of combining data from studies, including any planned exploration of consistency (such as I^2, Kendall's τ)	
	15c	Describe any proposed additional analyses (such as sensitivity or subgroup analyses, meta-regression)	
	15d	If quantitative synthesis is not appropriate, describe the type of summary planned	
Meta-bias(es)	16	Specify any planned assessment of meta-bias(es) (such as publication bias across studies, selective reporting within studies)	11
Confidence in cumulative evidence	17	Describe how the strength of the body of evidence will be assessed (such as GRADE)	N/A – not testing intervention

*** It is strongly recommended that this checklist be read in conjunction with the PRISMA-P Explanation and Elaboration (cite when available) for important clarification on the items. Amendments to a review protocol should be tracked and dated. The copyright for PRISMA-P (including checklist) is held by the PRISMA-P Group and is distributed under a Creative Commons Attribution Licence 4.0.**

From: Shamseer L, Moher D, Clarke M, Ghersi D, Liberati A, Petticrew M, Shekelle P, Stewart L, PRISMA-P Group. Preferred reporting items for systematic review and meta-analysis protocols (PRISMA-P) 2015: elaboration and explanation. BMJ. 2015 Jan 2;349(jan02 1):g7647.