

Appendix. Interview Guides

Phase I Interview Guide

Overarching interview question: *How has your background influenced the way you care for dying children and their families?*

Question	Topic
Where did you do undergraduate, medical school, residency training?	Training/Experience
How have mentors shaped you?	Training/Experience
What kinds of training and experiences were helpful to you or would have been helpful to you in dealing with pediatric EOL patients and their families? What kind of training might be helpful to current medical students, residents, and fellows?	Training/Experience
Have you ever felt that the best interests of the EOL patient might be different than the best interests of the family? If yes, please elaborate.	Patient vs. parental best interests
How has your own role as a parent (if participant is a parent) shaped the way you deal with children and parents at the end of life?	Participant's role as parent
Have you noticed differences in the ways male and female physicians interact with EOL patients? If so, please describe the differences.	Gender Differences
Please describe an ethically difficult situation you've been involved in related to a pediatric patient at the end of life.	Ethics

Phase II Interview Guide

Question	Topic
Moral distress occurs when health care providers feel that they cannot act in accordance with their moral convictions (Andrew Jameton, 1984; A. Jameton, 1993). Please describe moral distress that you have	Moral Distress (moral convictions)

encountered specifically in your experiences with children who are at the EOL	
How does moral distress affect you personally and professionally?	Moral Distress (communication strategies)
How do you deal with moral distress?	Moral Distress (coping strategies)
What changes could be made to alleviate moral distress felt by physicians in your position?	Moral Distress (organizational support)
How could medical education and training be altered to help physicians deal more effectively with moral distress?	Moral Distress (education and training)
How do your patients' deaths affect you?	Emotional Distress (coping)
How do you deal with the effects of patient deaths?	Emotional Distress (job performance)
Please describe your communication style in EOL conversations with parents.	EOL Communication Comfort (reflexivity)
How comfortable do you feel discussing life-limiting conditions with parents?	EOL Communication Comfort
How comfortable do you feel discussing withholding and withdrawing treatment?	EOL Communication Comfort (information giving)
How comfortable do you feel addressing the emotions that emerge in patients and families in EOL situations?	EOL Communication Comfort (formal social support to caregivers)
Research indicates that parents expect physicians to deliver empathy, tend to social psychological issues, and to comfort torn emotions. Do you think these are reasonable expectations?	EOL Communication Comfort (expectations)
Can you describe any particularly bad or good situations that you've had in EOL communication with parents?	EOL Communication Comfort (experience)
Do you feel that you have had adequate education and training in EOL communication? Please explain.	EOL Communication Comfort (training)
What could have made that training better?	EOL Communication Comfort (training)
What do you think about the term <i>Allow Natural</i>	EOL Communication

Death (AND) as opposed to DNR?	Comfort (terminology)
How do you think your religious commitments or worldview affects your treatment of EOL patients and communication with their parents?	Religion
Do your spiritual/religious beliefs affect your willingness to discuss withholding or withdrawing treatment?	Religion
Do you feel that full disclosure of a patient's illness may take away hope from the family? If so, how does this affect your communication with families?	Religion
How were issues related to spirituality/religion addressed in your medical school, residency, or fellowship training, if at all?	Religion/Training/Education
Would you feel comfortable commenting on your own spiritual/religious background, such as explaining whether or not you are you affiliated with a particular tradition and if consider yourself a religious or spiritual person?	Religion
How many EOL pediatric patients have you treated (total or monthly)? How many of those included an EOL conversation?	Background information