

Implementation of Advance Care Planning in Dutch primary care. a pre- post evaluation study.**Supplementary File 1****Table A.1. Non response analyses with regard to the questionnaires (based on data from the ACP-Monitor)**

	Total (n=2292)	Filled in no questionnaire or filled in questionnaire but not the ACP- questions (n=1375)	Filled in pre questionnaire only (n=363)	Filled in post questionnaire only (n=96)	Filled in both questionnaires (n=458)	p-value ^a
Age, mean (SD)	81.6 (5.3)	81.6 (5.9)	82.6 (5.5)	81.9 (5.2)	80.6 (4.8)	<0.000
Sex, female	1352 (59.0)	789 (57.4)	218 (60.1)	55 (57.3)	291 (63.5)	0.129
At least one diagnosis, yes	2056 (89.7)	1223 (89.0)	336 (92.6)	88 (91.7)	409 (89.3)	0.208
Setting of inclusion is general practice	2168 (94.6)	1289 (93.8)	340 (93.7)	95 (99.0)	444 (96.9)	0.011
Offer of ACP- conversation, yes	597 (26.1)	267 (19.4)	132 (36.4)	27 (28.1)	171 (37.3)	<0.000
If yes, then conversation with:						0.240
- Unknown (GP or nurse)	102 (17.1)	45 (16.9)	22 (16.7)	4 (14.8)	31 (18.1)	
- Nurse only	128 (21.4)	70 (26.2)	24 (18.2)	4 (14.8)	30 (17.5)	
- GP only	241 (40.4)	100 (37.5)	55 (41.7)	9 (33.3)	77 (45.0)	
- Both	126 (21.1)	52 (19.5)	31 (23.5)	10 (37.0)	33 (19.3)	

^a For the non response analyses we used ANOVA for age, and for sex, diagnosis and ACP conversation (whether there was a conversation and who the conversation was with) a chi-square test was used.