## Additional file 4: Table 3. Data collection procedure

Table 3. Data collection (clinical cha Patient's awareness of dying*	0 closed	Closed: Patient avoided talking and/or asking
	1 open	questions about the prognosis or future perspectives
	? not assessed	Open: Patient talked frankly about the poor prognosis
		or used metaphors indicating an adequate
		understanding of the situation
Patient's preference for the place of care at the	0 Hospital	Did the patient talk about preferences with the care
end of life	1 Home	team?
	2 Nursing home	
	? Unknown	
Treatment	0 Treatment discontinued	
	1 Ongoing active treatment 0 None or low	X' 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Symptom burden	1 Medium	Visual analogue scale [VAS] 0-10 for symptoms such as pain, breathlessness, delirium, nausea, vomiting,
	2 Severe	as pain, oreatnessness, denrium, nausea, vomiting, constipation
	2 Severe	None-low = VAS 0-2
		Medium = VAS 0-2
		High = VAS 6-10
		Ingii = VIIS 0 10
		High for unstable clinical conditions: life-threatening
		infections, bleeding, bowel obstruction, epileptic
		attacks, relevant neurological sequelae, organ
		dysfunction
Karnofsky Performance Status **	Number	* See table
Family's awareness of dying*	0 closed	Closed: family caregivers avoided talking and/or
	1 open	asking questions about the patient's prognosis or
	? not assessed	future perspectives
		Open: talked frankly about the patient's poor
		prognosis or used metaphors indicating an adequate
		understanding of the situation
Family system's condition for home care	0 unsuitable condition	Unsuitable: No family caregiver available for home
	1 suitable condition	care or limited capacity for caregiving, not open to
		home visits and advice from home care services
		Suitable: at least one caregiver available, good
		caregiving attitude, open to home visits and advice from professionals
Family's preference for the place of care at the	0 Hospital	Did one of the primary family caregivers talk about
end of life	1 Home	preferences with anyone on the care team?
	2 Nursing home	preferences with anyone on the care team:
	? unknown	
Care team's prediction of the place of death	0 Hospital	Did the care team think the patient would die at home,
	1 Home	in a hospital or in a nursing home?

<sup>\*</sup> Adapted from the awareness of dying theory (Glaser and Strauss, 1965)

- 100 Normal, no complaints
- 90 Able to carry on normal activity, minor signs or symptoms of disease
- 80 Normal activity with effort
- 70 Cares for self. Unable to carry on normal activity or to do active work
- $\,\,$  Requires occasional assistance, but able to care for most of his or her needs
- 50 Requires considerable assistance and frequent medical care
- 40 Disabled, requires special care and assistance
- 30 Severely disabled, hospitalisation is indicated although death non imminent
- 20 Very sick, hospitalisation necessary, active supportive treatment necessary
- 10 Moribund
- 0 Dead

<sup>\*\*</sup> Karnofsky Performance Status. European Society for Medical Oncology [ESMO]