

## Additional file 2: Assessment form for the expert panel

The left column of the table shows drug-related actions which can be performed by a rheumatologist during an outpatient visit. This concern changing current drugs (start, stop and change the frequency or strength of a current drug) or discuss drug-related problems.

Could you indicate which information (listed in column 2) is required to perform each drug-related action? Cases which are exceptions of these general assessment, will be discussed later.

Drug-related action	Required information:
<b>Start a drug</b>	<ul style="list-style-type: none"> <li>○ Knowledge of all drugs used by the patient? Yes / No</li> </ul>
<b>Restart a drug</b>	<ul style="list-style-type: none"> <li>○ Knowledge that the drug was stopped? Yes / No</li> <li>○ Knowledge of all drugs used by the patient, if:               <ul style="list-style-type: none"> <li>○ Duration unknown or &gt; ..... weeks → Yes</li> <li>○ Duration &lt; ..... weeks → No</li> </ul> </li> </ul>
<b>Stop a drug</b>	<ul style="list-style-type: none"> <li>○ Usage of the concerning drug? Yes / No</li> </ul>
<b>Increase the strength of a drug</b>	<ul style="list-style-type: none"> <li>○ Usage of the concerning drug? Yes / No</li> <li>○ The strength of the concerning drug? Yes / No</li> <li>○ The frequency of the concerning drug? Yes / No</li> </ul>
<b>Decrease the strength of a drug</b>	<ul style="list-style-type: none"> <li>○ Usage of the concerning drug? Yes / No</li> <li>○ The strength of the concerning drug? Yes / No</li> <li>○ The frequency of the concerning drug? Yes / No</li> </ul>
<b>Increase the frequency of a drug</b>	<ul style="list-style-type: none"> <li>○ Usage of the concerning drug? Yes / No</li> <li>○ The strength of the concerning drug? Yes / No</li> <li>○ The frequency of the concerning drug? Yes / No</li> </ul>
<b>Decrease the frequency of a drug</b>	<ul style="list-style-type: none"> <li>○ Usage of the concerning drug? Yes / No</li> <li>○ The strength of the concerning drug? Yes / No</li> <li>○ The frequency of the concerning drug? Yes / No</li> </ul>
<b>Drug-related problem: the patient decided to stop using a drug</b>	<ul style="list-style-type: none"> <li>○ Information that the drug was stopped (by the patient)? Yes / No</li> </ul>
<b>Drug-related problem: the patient uses a drug other than prescribed</b>	<ul style="list-style-type: none"> <li>○ Usage of the concerning drug? Yes / No</li> <li>○ The strength of the concerning drug? Yes / No</li> <li>○ The frequency of the concerning drug? Yes / No</li> </ul>
<b>Drug-related problem: the patient has a problem with intake or</b>	<ul style="list-style-type: none"> <li>○ Usage of the concerning drug? Yes / No</li> <li>○ The strength of the concerning drug? Yes / No</li> </ul>

<b>administration of a drug</b>	<ul style="list-style-type: none"> <li>○ The frequency of the concerning drug? Yes / No</li> </ul>
<b>Drug-related problem: the patient worried about a specific drug</b>	<ul style="list-style-type: none"> <li>○ Usage of the concerning drug? Yes / No</li> </ul>
<b>Drug-related problem: the patient worried about his/her drug or adverse drug reactions of their drugs in general</b>	<ul style="list-style-type: none"> <li>○ Usage of all drugs used by the patient? Yes / No</li> </ul>
<b>Drug-related problem: the used drug is not effective</b>	<ul style="list-style-type: none"> <li>○ Usage of the concerning drug? Yes / No</li> <li>○ The strength of the concerning drug? Yes / No</li> <li>○ The frequency of the concerning drug? Yes / No</li> </ul>
<b>Injection administrated during the outpatient visit</b>	<ul style="list-style-type: none"> <li>○ Usage of the concerning drug? Yes / No</li> </ul>