Additional File 4.

Performance of the PAP Model across the five behaviours.

Taking Dental Radiographs	Groups at different stages did not differ in the number of radiographs
	actually taken ($F(5, 162) = 0.76$, $p = 0.578$), behavioural simulation score
	(F(6, 207) = 2.26, p < .05) or intention $(F(6, 206) = 2.03, p = 0.063)$.
Performing Dental Restorations	The PAP model did not predict the number of restorations performed
	(F(2,111) = 0.66, p = 0.521); it did predict both behavioural simulation
	score (F(4, 123) = 3.585 , p 0.008, adjusted R2 = 0.073) and intention (F(4,
	122) = 5.637, p<0.001 adjusted R2 = 0.130).
Placing Fissure Sealants	The PAP model did not predict the decision to place a fissure sealant in the
	behavioural scenarios ($F(3,116) = 0.90$, $p = 0.44$) but did predict intention
	to place a fissure sealant ($F(3, 119) = 5.66 p = 0.001$).
Managing Upper Respiratory Tract Infections without prescribing	GPs who endorsed that they had 'already changed my management of
antibiotics	URTIs to try to avoid the use of antibiotics' issued a mean (95%CI) of
	11.8 (21.1 to 2.5, $p = 0.014$) fewer prescriptions than GPs who endorsed
	any other response. Similarly for scenario scores these GPs made a mean
	(95%CI) of 1.0 (1.2 to -0.7 , p < 0.001) fewer decision to prescribe and
	their intention scores were significantly more positive ($p < 0.001$).
Managing Low Back Pain without ordering Lumbar Spine X-rays	Comparing GPs who endorsed 'I have decided that I will request less
	lumbar X-rays I request' or 'I have already done something about
	decreasing the number of lumbar X-rays I request' the stage model did not
	predict behaviour or behavioural simulation but did predict intention
	(p<0.001).