

Supplement Table 1. PED/UC Survey Item Descriptions

Measures	Number of Items	Item Description	Recoded Response Options Used in the Present Study
Current Practices of Performing the “5 A’s” of Tobacco Counseling	13 items	<p>In the past 30 days, during healthcare visits, how often have you done the following?</p> <p><i>Ask</i></p> <ol style="list-style-type: none"> 1. Asked if parents use tobacco 2. Documented that patients live with a smoker in Epic 3. Asked if patients are exposed to secondhand smoke 4. Documented whether patients were exposed to secondhand smoke in Epic <p><i>Advise</i></p> <ol style="list-style-type: none"> 5. Advised parental smokers to quit smoking 6. Advised parental smokers to not smoke around the patient (e.g., at home and in car) <p><i>Assess</i></p> <ol style="list-style-type: none"> 7. Assessed parental smokers’ interest in quitting smoking <p><i>Assist/Arrange</i></p> <ol style="list-style-type: none"> 8. Talked to parental smokers about smoking cessation techniques and tactics 9. Made a quit plan with parental smokers 10. Recommended nicotine replacement medications to parental smokers 11. Prescribed nicotine replacement medications to parental smokers 12. Provided quitting materials to parental smokers 13. Referred/enrolled parental smokers to the Quitline or to a smoking cessation program 	<p>No = never (0%)</p> <p>Yes = rarely, sometimes (50%), often, and always (100%)</p>
Perceived Level of Confidence in Tobacco Counseling	8 items	<p>Please rate your level of confidence in your ability to do the following for parental smokers of pediatric patients that you take care of:</p> <ol style="list-style-type: none"> 1. Providing guidance on the harmful effects of smoking on their children 2. Advising parental smokers to stop smoking 3. Assessing barriers to quitting 4. Assisting parental smokers by discussing smoking cessation 5. Providing quitting materials 6. Enrolling or referring to the Quitline 7. Recommending nicotine replacement medications 8. Prescribing nicotine replacement medications 	<p>Somewhat confident or less = 1: not at all confident, 2, 3: somewhat confident</p> <p>At least moderately confident = 4, 5: moderately confident, 6, and 7: very confident</p>
Perceived Level of Ease, Effectiveness, Optimism, and Preparedness in Tobacco Counseling	4 items	<ol style="list-style-type: none"> 1. I find it easy to identify patients exposed to secondhand smoke and to counsel parental smokers to reduce their children’s exposure. 2. I am effective in: identifying patients exposed to secondhand smoke and counseling parental smokers to reduce their exposure using current practices. 3. I am optimistic that: offering standardized efforts to routinely identify patients exposed to secondhand smoke and counseling parental smokers will reduce patients’ exposure. 4. I am prepared to assist parental smokers to quit smoking (e.g., discussing quitting). 	<p>Somewhat easy/effective/optimistic/prepared or less = 1: not at all, 2, and 3: somewhat</p> <p>At least moderately easy/effective/optimistic/prepared = 4, 5: moderately, 6, and 7: very</p>

Perceived Level of Importance in Tobacco Counseling	3 items	How important is screening for parental tobacco use and providing counseling to reduce pediatric patients' secondhand smoke exposure to: 1. Patients' physical health? 2. Patients' future healthcare visits? 3. Parental smokers' physical health?	Moderately important or less = 1: not at all important, 2, 3: somewhat important, 4, and 5: moderately important Important = 6 and 7: very important
Perceived Barriers to Tobacco Counseling	8 items	How strongly do you agree counseling to parental smokers? 1. Inadequate reimbursement for the time it takes to counsel on cessation 2. Lack of professional training in the area of cessation counseling 3. Time limitations 4. Parental smokers' lack of interest in being counseled 5. Parental smokers' anger 6. Fear that counseling parental smokers isn't effective 7. Lack of easily accessible information (e.g., self-help materials) to give to parents 8. Hard to make systems level policy changes	Disagree = strongly disagree, agree, and neutral Agree = agree and strongly agree
Clinical and Hospital Environmental Factors related to Tobacco Counseling	5 items	1. Do you have a system for routinely screening patients' exposure to secondhand smoke? 2. Does Children's have Epic reminders to advise parental smokers to quit smoking? 3. Should Children's have a tobacco cessation plan or counseling service referral for parental smokers? 4. Are you aware of the Clinical Practice Guidelines for Treating Tobacco Use and Dependence, which discuss the 5A's (i.e., Ask, Advise, Assess, Assist, Arrange)? 5. Have you received any training on tobacco prevention/exposure counseling in the past 12 months?	No Yes Don't know
Perceived Patient Tobacco Smoke Exposure Levels	1 item	About what percent of pediatric patients who receive treatment in your department do you think are exposed to secondhand smoke?	0% to 100%