

Supplementary Materials

Table S1. Results of the pilot test

Characteristic	Value
Participants	
Patient	6 (40.0)
Caregiver	9 (60.0)
Sex	
Male	6 (40.0)
Female	9 (60.0)
Age (yr)	12.07 ± 11.29 (1–29)
0–10	7 (46.7)
11–20	2 (13.3)
21–30	6 (40.0)
Information they want to be included in Open-CHA service (multiple responses)	
Main progress status	15 (100)
Surgical procedure	13 (86.7)
Present main health problem	10 (66.7)
Reservation	9 (60.0)
Examinations	8 (53.3)
Others	4 (26.6)
Subjective health knowledge	4.15 ± 0.55
Communication between patients and physician	
Perceived efficacy in patient-physician interaction	3.67 ± 0.55
Trust in physician	4.41 ± 0.64
Mobile health literacy	5.00 ± 0.00
Awareness of OpenNotes	
Participants who know OpenNotes	
Yes	7 (8.3)
No	77 (91.7)
OpenNotes is evaluated as a good method	
Yes	15 (100)
No	0 (0)
Reasons for evaluating OpenNotes positively	
Accessibility to medical records at any time	13 (86.7)
Increasing comprehension of physician instructions	12 (80.0)
Enhancing comprehension of prescription details	9 (60.0)
Viewing access to medical records as a fundamental right	8 (53.3)
The possibility of medical error by physicians	3 (20.0)
Reasons for evaluating OpenNotes negatively	
The possibility that physicians may not document honestly if patients access their records	4 (26.7)
The possibility of increased workload for physicians	3 (20.0)
Increased patient confusion	1 (6.7)
Incomprehensibility of medical records	0 (0)
Not helpful for health management	0 (0)
Experience using medical records	
Simplicity of procedure for receiving mandatory records	4.00 ± 0.91
Understanding of medical records	3.69 ± 0.63

Request for correction of medical records	
Burden of requesting medical records	2.47 ± 1.19
Intention of requesting record verification	4.27 ± 1.10
Reasons for feeling burdened to request medical records	
Because the authority over medical records lies with hospitals and physicians	9 (60.0)
Because it may be perceived as questioning the physician's competence	5 (33.3)
Because it may give the impression of being a difficult patient	4 (26.7)
Because physicians may misconstrue as preparing for litigation or medical disputes	1 (6.7)
Because it may cause discomfort to the physician	0 (0)
Medical record reliability	3.64 ± 0.27
Means for health management and acquiring health information (multiple responses)	
Mobile devices	12 (80.0)
Computer	11 (73.3)
TV	2 (13.3)
Print media (newspaper, etc.)	1 (6.7)
Family/acquaintances	1 (6.7)
Healthcare professionals	0 (0)

Values are presented as number (%) mean ± standard deviation (min–max).

Open-CHA means a short message service developed in this study that sends patients an overview of outpatient medical records.