Supplementary material has been published as submitted. It has not been copyedited, typeset or checked for scientific content by Acta Dermato-Venereologica

#### **Appendix S1**

If you have questions, contact Alexandra Sjöholm, reg. nurse +4631 342 37 21.

Thank you for your participation!

# Diary with experiences after my Photodynamic therapy (PDT)

Date for treatment:	day	/	20
5			
Dear		-	

Your thoughts, experiences and opinions are important to us.

The patient perspective on the treatment and your recovery time is relatively unknown to us so far, but important for improving the quality of care.

The diary can be of help to facilitate the conversation in the planned interview in four weeks. Focus on the content and not on your spelling and calligraphy. This diary should not be handed in.



Simulated daylight -PDT



**Conventional PDT** 





Day 1 (24 h)	day	/ 20	My own notes:
Below you can write you your treatments.	r reflections and thoughts, re	elated to	
Suggested topics:	e healing process. hat strategies do you use? lar happened in the aftermanent?		
Has anything happened Your feelings, fears, wo			
	now? (put a cross on the line	where you think it fits best)	
Really bad	Okay	Really good	
		· · · · · · · · · · · · · · · · · · ·	
		<del></del>	
		<del></del>	

1/10

If the lines are not enough, please use pages 9-10.

My	own	notes:
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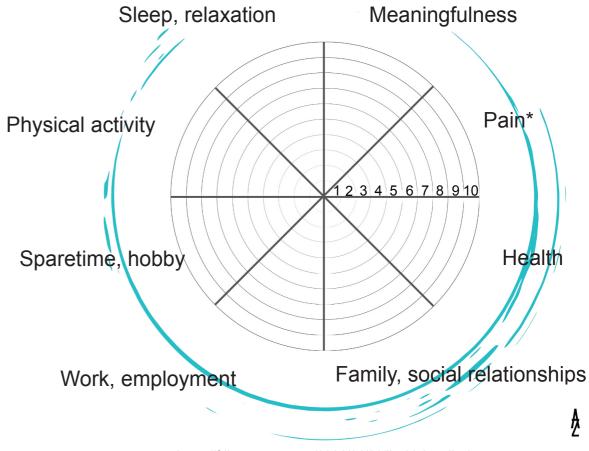

## Day 2 (24 h)

# Wheel of Life

Describe how different aspects of your life are working right now. You will also be able to fill in your wheel of life on day 28.

Fill in the markings you feel right now.

In the center of the figure = 0 which represents nothing at all, while 10 is the most imaginable of something.



https://frihetsresan.com/2021/01/22/livshjul-mallar/

\*At the treatment area

Day 2 (48 h) 20 \_\_\_\_ day

Below you can write your reflections and thoughts, related to your tréatments.

Suggested topics:

Your expectations of the healing process.

Any pain experience, what strategies do you use? Has anything in particular happened in the aftermath that you can relate to the treatment?

Has anything happened in general life?

our feelings, fears, wo	rries.	
How am I feeling right	now? (put a cross on the line	where you think it fits bes
Really bad	Okay	Really good
	<del></del>	
	<del>-</del>	
	If the lines are not enough	gh, please use pages 9-10.

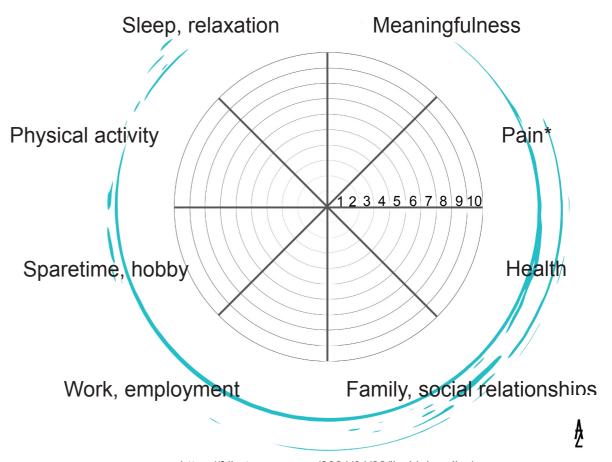
#### Day 28

# Wheel of Life

Describe how different aspects of your life are working right now.

Fill in the markings you feel right now.

In the center of the figure = 0 which represents nothing at all, while 10 is the most imaginable of something.



https://frihetsresan.com/2021/01/22/livshjul-mallar/

<sup>\*</sup>At the treatment area

Day 28	day _	/20	Day 7	day	/20
Below you can write you your treatments.	r reflections and thoughts, re	elated to	Below you can write you your treatments.	ur reflections and thoughts, re	lated to
Suggested topics: Your expectations of the Any pain experience, where the anything in particular can relate to the treatment.	hat strategies do you use? lar happened in the aftermanent?	ath that you	Suggested topics: Your expectations of th Any pain experience, v Has anything in particu can relate to the treatr	e healing process.  what strategies do you use?  ular happened in the afterma  ment?	th that you
Has anything happened Your feelings, fears, wo	d in general life? orries.		Has anything happene Your feelings, fears, w	d in general life?	
How am I feeling right r	now? (put a cross on the line v	where you think it fits best)	How am I feeling right	now? (put a cross on the line w	here you think it fits best)
Really bad	Okay	Really good	Really bad	Okay	Really good

If the lines are not enough, please use pages 9-10.

7/10 4/10

If the lines are not enough, please use pages 9-10.

Day 14	day	/20	Day 21	day	/ 20
Below you can write you your treatments.	ur reflections and thoughts, re	elated to	Below you can write you your treatments.	ır reflections and thoughts, r	elated to
Suggested topics:			Suggested topics:		
	e healing process. vhat strategies do you use?		Your expectations of th	<b>.</b>	
Any pain experience, w Has anything in particu can relate to the treatr	vhat strategies do you use? llar happened in the afterma nent?	ath that you	Any pain experience, v Has anything in particu can relate to the treatr	vhat strategies do you use? llar happened in the afterm nent?	ath that you
Has anything happened Your feelings, fears, wo	d in general life? orries.		Has anything happene Your feelings, fears, w	d in general life?	
How am I feeling right	now? (put a cross on the line	where you think it fits best)	How am I feeling right	now? (put a cross on the line	where you think it fits best)
Really bad	Okay	Really good	Really bad	Okay	Really good

5/10

If the lines are not enough, please use pages 9-10.

If the lines are not enough, please use pages 9-10.

# Interview guide

### 1 Before the interview

Intervju no:

Name of the interviewer:	Date:
Participant (Study ID):	Time:
Start:	End:
The purpose of the study is: To explore patients'	experiences of C-PDT and SDL-PDT.
2 Introduction to the interview	
☐ Welcome interview participants	
$\square$ Introduction interviewer	
$\square$ Explanation of the interview structure (how does i	t work?)
$\square$ Informed consent (verbal confirmation of previous	s written consent)
$\square$ Voluntary, can end study participation at any time	without having to give reasons
$\Box$ Time frame individual interview (30-60 minutes)	
3 Questions	
$\hfill\Box$ "Can you tell us a little about when you got your diface?)	iagnosis?" (what is the history with e.g. the
$\hfill\square$ "How is your relationship with the sun?" (life situa	tion)
$\hfill\square$ "Can you tell us about your experiences with the two	wo different treatment methods?"
After the first question, the interviews will be overarching questions such as	e open, but the interview will focus on
$\square$ "What were your expectations before the treatme	nts?"
$\hfill\square$ "What were your expectations of the pain experien	nce?"
$\square$ "Which methods do/did you have to manage any p	pain in connection with the treatment?"
☐ "How did you manage your pain?" (During treatme	ent, after treatment. What helped you?)

diary)
$\hfill\Box$ "How do you experience treatment and care in connection with diagnosis and treatment methods?"
$\square$ "What did you wish the doctor and/or nursing staff had done differently for you in connection with the treatment?" (What do you think I could have done differently?)
$\square$ "Which treatment do you prefer and why?" (Do you prefer one of the different treatments?)
$\square$ "What is your experience?" of the healing period?" (difference between the two different methods?)
4 Rounding  ☐ Ask the participant to summarize thoughts, statements or questions that were most important.  (Please also summarize what you have perceived in the interview. Ex: Did I understand correctly Is there something missing?)
☐ Thank the participant for the cooperation
☐ Inform about the possibility to get a summary of results (available on the project website)
5 After the interview: notes and reflections: (Eg. How did it go? What was the atmosphere like? Did all the questions work? Are there new aspects that should be explored further?)