

S4 Table. Clinicians perceived barriers to the uptake of a new POCT in primary care

Area of potential barrier	Examples of comments (Number of comments)
<p>Time</p> <p>(time to obtaining the result, to take the test, and in relation to the clinical setting)</p>	<p>(10)</p> <p><i>'time constraints of primary care consultations particularly with multimorbidity'</i></p> <p><i>'Time consuming'</i></p> <p><i>'Workload'</i></p>
<p>Cost</p> <p>(cost of test and instrumentation, and in terms of cost effectiveness)</p>	<p>(19)</p> <p><i>'High cost of a POCT'</i></p> <p><i>'Cost/benefit ratio = not convincing'</i></p>
<p>Clinical benefit</p>	<p>(5)</p> <p><i>'..confidence that test would have a significant impact on management of a condition'</i></p> <p><i>'scientific proof of benefit'</i></p> <p><i>'limited added value'</i></p>
<p>Test complexity and ease of use</p>	<p>(11)</p> <p><i>'Complexity of the rapid test'</i></p> <p><i>'Difficult to use and/or interpret'</i></p> <p><i>'Frequency of use. It has to be quite high, or we will never get used to it'</i></p> <p><i>'Numbers for a complex test to be performed reliably'</i></p> <p><i>'Difficulty of use'</i></p>
<p>Technical requirements of instrumentation and test</p>	<p>(8)</p> <p><i>'Robustness'</i></p> <p><i>'Not having next to patient'</i></p> <p><i>'personnel training'</i></p> <p><i>'quality control'</i></p>
<p>Performance and accuracy</p>	<p>(7)</p> <p><i>'Reliability of the test results'</i></p> <p><i>'Sensitivity / specificity'</i></p>
<p>Clinical samples and clinical pathway considerations</p>	<p>(3)</p> <p><i>'Patient acceptability (if test is invasive)'</i></p> <p><i>'Difficulty of getting sample(s) to practice'</i></p> <p><i>'Sticking children'</i></p>
<p>Other</p>	<p>(1)</p> <p><i>'Generally lack of widespread use of results in internal practice..... peer pressure to stick to traditional methods and abandon innovation'</i></p>

