

Supplementary Materials

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Supplementary Table S1. Self-Reported Reasons for Receiving HBV Vaccination Among Vaccinated Participants (n = 33*)

Reason	n (%)
Received as part of the childhood, or school vaccination program	22 (66.7)
Recommended by attending doctor	7 (21.2)
Recommended by family members	4 (12.1)
Recommended by friends	2 (6.1)
Attended a health talk or event	1 (3.0)
To protect oneself from HBV	1 (3.0)

**Note: Multiple responses allowed; percentages do not total 100%.*

Supplementary Table S2. Self-Reported Time Since Receiving HBV Vaccination Among Vaccinated Participants (n = 33)

Time Since Vaccination	n (%)
Within 1 year	0 (0.0)
1–5 years ago	3 (9.1)
5–10 years ago	4 (12.1)
10–20 years ago	11 (33.3)
More than 20 years ago	15 (45.5)

Supplementary Table S3. Self-Reported Reasons for Not Receiving or Being Unsure About HBV Vaccination (n = 45[#])

Reason	n (%)
Did not know where to get vaccinated	16 (36.4)
Did not understand the benefits of vaccination	11 (25.0)
Felt healthy and did not believe vaccination was necessary	10 (22.7)
Believed there were no risk factors for HBV	10 (22.7)
Concerned about vaccine side effects	5 (11.4)
Could not afford the vaccine	2 (4.5)
Doctor advised that vaccination was not necessary	1 (1.5)
Did not have time to get vaccinated	0 (0.0)

#Note: *Multiple responses allowed; percentages do not total 100%.*

Supplementary Table S4. Summary of Participant Responses to CHB-Related Knowledge Questions, Including Disease Transmission, Disease Management, and Disease Progression

Questions	Answer	% of Correct Responses
Disease Transmission Domain		
HBV can be transmitted through sexual contact.	True	55.0%
HBV can be transmitted from mother to child during delivery.	True	84.4%
HBV can be transmitted through genetic inheritance.	False	46.8%
HBV can be transmitted through blood transfusion.	True	83.5%
HBV can be transmitted through sharing needles.	True	88.1%
HBV can be transmitted through sharing razors or toothbrushes.	True	66.8%
HBV can be transmitted through sharing food or utensils (such as bowls, chopsticks, or spoons).	False	55.0%
HBV can be transmitted through shaking hands.	False	97.2%
HBV can be transmitted by eating raw shellfish.	False	27.5%
Average of Disease Transmission Domain		67.4%
Disease Management Domain		
CHB can be prevented.	True	91.7%
CHB is curable.	False	41.3%
HBV can be killed through handwashing.	False	74.3%
HBV vaccine exists.	True	94.5%
Average of Disease Management Domain		75.5%
Disease Progression Domain		
You may be infected with CHB without showing symptoms.	True	76.1%
CHB can cause liver cirrhosis (scarring caused by liver damage).	True	98.2%
CHB can cause liver cancer.	True	91.7%
Average of Disease Progression Domain		88.7%
Overall Average		73.4%

Supplementary Table S5. Multiple Linear Regression Predicting CHB Disease Transmission Knowledge Score

Predictor	β	95% CI	p-value
(Intercept)	5.68	(2.34, 9.02)	0.001 ***
Age	-0.011	(-0.05, 0.03)	0.576
Sex	0.17	(-0.40, 0.74)	0.572
Lives alone	0.85	(-0.23, 1.94)	0.123
Married	0.19	(-0.69, 1.07)	0.675
Education level	0.10	(-0.33, 0.53)	0.640
Employed	-0.05	(-0.70, 0.59)	0.869
Born in Hong Kong	0.65	(-0.08, 1.38)	0.081 †
Chronic disease	0.20	(-0.53, 0.93)	0.589
Knows someone with CHB	0.53	(-0.08, 1.14)	0.095 †
Insured	-0.28	(-0.89, 0.28)	0.355
Has family doctor	-0.52	(-1.09, 0.05)	0.071 †
Recent doctor visit (< 1 year)	-0.06	(-0.85, 0.74)	0.885
Doctor discussed HBV testing	0.81	(-0.28, 1.90)	0.143
Vaccinated	0.58	(-0.09, 1.25)	0.083 †
Stigma present (≥ 1)	0.06	(-0.53, 0.65)	0.843

Model summary: $R^2 = 0.215$, Adjusted $R^2 = 0.089$, $F(15, 93) = 1.70$, $p = 0.064$

Note. β represents the unstandardized regression coefficient. CI = confidence interval. A positive β indicates a higher CHB transmission knowledge score relative to the reference category. Reference categories: female (sex), not married (marital status), not employed (employment), not born in Hong Kong (birthplace), no chronic disease, not insured, no family doctor, no recent doctor visit (> 1 year), did not discuss hepatitis B testing with doctor, not vaccinated, does not live alone, does not know someone with CHB, and no stigma (score = 0). $p < 0.05$ (*) was considered statistically significant. $p < 0.10$ (†) was considered borderline significance and interpreted as a trend.

Supplementary Table S6. Multiple Linear Regression Predicting CHB Disease Progression Knowledge Score

Predictor	β	95% CI	p-value
(Intercept)	1.76	(0.21, 3.31)	0.026 *
Age	0.008	(-0.01, 0.03)	0.375
Sex	-0.10	(-0.38, 0.18)	0.471
Lives alone	-0.06	(-0.55, 0.42)	0.807
Married	0.02	(-0.48, 0.52)	0.914
Education level	0.09	(-0.10, 0.29)	0.347
Employed	0.13	(-0.16, 0.43)	0.382
Born in Hong Kong	0.05	(-0.27, 0.37)	0.761
Chronic disease	-0.11	(-0.45, 0.23)	0.525
Knows someone with CHB	0.10	(-0.18, 0.38)	0.492
Insured	-0.10	(-0.37, 0.17)	0.462
Has family doctor	-0.08	(-0.34, 0.19)	0.559
Recent doctor visit (< 1 year)	0.16	(-0.21, 0.52)	0.400
Doctor discussed HBV testing	0.16	(-0.33, 0.66)	0.516
Vaccinated	-0.04	(-0.34, 0.26)	0.804
Stigma present (≥ 1)	-0.04	(-0.32, 0.24)	0.784

Model summary: $R^2 = 0.051$, Adjusted $R^2 = -0.102$, $F(15, 93) = 0.34$, $p = 0.990$

Note. β represents the unstandardized regression coefficient. CI = confidence interval. A positive β indicates a higher CHB progression knowledge score relative to the reference category. Reference categories: female (sex), not married (marital status), not employed (employment), not born in Hong Kong (birthplace), no chronic disease, not insured, no family doctor, no recent doctor visit (> 1 year), did not discuss hepatitis B testing with doctor, not vaccinated, does not live alone, does not know someone with CHB, and no stigma (score = 0). $p < 0.05$ (*) was considered statistically significant. $p < 0.10$ (†) was considered borderline significance and interpreted as a trend.

Supplementary File 1. Study Questionnaire (separate file attached)

This is an English translation of the original Chinese questionnaire administered to participants.
Provided for reference only; not used for data collection.

Role of Point-of-care Screening of Chronic Hepatitis B in Primary HealthCare Setting in Hong Kong – A Pilot Feasibility Study

Questionnaire

Date of Completion: _____ (dd/mm/yyyy) **Case ID/Questionnaire ID:** _____

Thank you for participating in this questionnaire! We sincerely invite you to share your knowledge and views on chronic hepatitis B. Your opinions are very important to us. Please answer as fully as possible. All your information will be kept confidential and used only for academic research.

Part 1: Demographic Information

This section collects participants' basic background information.

1. Name : _____

2. Age : _____

3. Gender : Male / Female

4. Who do you currently live with?

- Alone
- With children
- With spouse/partner
- Other : _____

5. Marital status?

- Single
- Married
- Divorced
- Widowed

6. Education level:

- Below primary education
- Primary education
- Secondary education
- Tertiary education or above

7. Employment status:

- Full-time employment (including self-employed)
- Part-time employment (including self-employed)
- Student
- Unable to work due to illness
- Homemaker
- Retired
- Currently job-seeking
- Unemployed
- Other

8. District of residence:

Hong Kong Island

- Central & Western
- Eastern
- Southern
- Wan Chai

Kowloon

- Kowloon City
- Kwun Tong
- Sham Shui Po
- Wong Tai Sin

Yau Tsim Mong

New Territories

- Sha Tin
- Tai Po
- North
- Yuen Long

- Tuen Mun
- Sai Kung
- Islands
- Tsuen Wan

Kwai Ching

9. Country/region of birth: _____

10. If you were born outside Hong Kong, when did you come to Hong Kong? (Skip if born in Hong Kong)

- Within 1 year
- 1–5 years ago
- 5–10 years ago
- 10–20 years ago
- More than 20 years ago

11. Do you have any chronic diseases?

- None
- One
- Two
- Three
- Four or above

Part 2: History of Hepatitis B Screening

This section is to understand and collect information about your history of hepatitis B testing.

12. Do any of your family or friends have hepatitis B?

- Yes
- No
- Not sure

13. Do you have medical insurance? (Select all that apply)

- Personal/voluntary medical insurance
- Employer-provided insurance
- None

14. Do you have a regular family doctor/GP?

- Yes
- No

15. When was your last doctor visit?

- Within 1 year
- 1–5 years ago
- 5–10 years ago
- 10–20 years ago
- More than 20 years ago

16. Has your doctor ever mentioned hepatitis B testing to you?

- Yes
- No
- Not sure

17. Free hepatitis B testing is available in some places. If offered, would you take the test?

- Willing
- Not willing
- Not sure

18. Some people choose not to take hepatitis B testing. Which of the following reasons apply to you? (Select all that apply)

- I have been vaccinated
- I don't know where to test
- I don't understand the benefits of testing
- I cannot afford the cost
- I don't want to know the result
- I feel healthy and don't think I have liver problems
- I don't need testing because I have no risk factors
- My family doctor/GP said I don't need testing
- Other: _____

19. Which is the main reason you would not test for hepatitis B? (Select one)

- I have been vaccinated
- I don't know where to test
- I don't understand the benefits of testing
- I cannot afford the cost
- I don't want to know the result
- I feel healthy and don't think I have liver problems
- I don't need testing because I have no risk factors
- My family doctor/GP said I don't need testing
- Other: _____

20. Have you received hepatitis B vaccination?

- Yes
- No
- Not sure

If you have received the hepatitis B vaccine, please answer Questions 21–23

If you have not received the hepatitis B vaccine, please answer Question 24.

If you are unsure whether you have received the hepatitis B vaccine, please skip to Part III.

21. If you have received the hepatitis B vaccine, when was it?

- Within 1 year
- 1–5 years ago
- 5–10 years ago
- 10–20 years ago
- More than 20 years ago

22. If you have received the hepatitis B vaccine, where was it given?

- Hong Kong
- Outside Hong Kong – in my place of birth
- Outside Hong Kong – not in my place of birth

23. If you have received the hepatitis B vaccine, what were the reasons? (Select all that apply)

- Recommended by family
- Recommended by friends
- Recommended by my doctor
- Attended a health talk or activity
- Part of infant, childhood, or school vaccination programme
- To protect myself from hepatitis B
- Other: _____

24. If you have not received the hepatitis B vaccine, why not? (Select all that apply)

- I don't know where to get the vaccine
- I don't understand the benefits of vaccination
- I am worried about side effects
- I cannot afford the vaccination cost
- I don't have time to get vaccinated
- I feel healthy and don't think I need it
- I don't need it because I have no risk factors for hepatitis B
- My family doctor/GP said I don't need it

Part 3: Knowledge of Hepatitis B

This part assesses your understanding regarding transmission mode and disease knowledge about hepatitis B. Please indicate whether the following statements are True or False:

	True	False
25. Hepatitis B can be transmitted through sexual contact.		
26. Hepatitis B can be transmitted from mother to child during delivery.		
27. Hepatitis B can be transmitted through genetic inheritance.		
28. Hepatitis B can be transmitted through blood transfusion.		
29. Hepatitis B can be transmitted through sharing needles.		
30. Hepatitis B can be transmitted through sharing razors or toothbrushes.		
31. Hepatitis B can be transmitted through sharing food or utensils (such as bowls, chopsticks, or spoons).		
32. Hepatitis B can be transmitted through shaking hands.		
33. Hepatitis B can be transmitted by eating raw shellfish.		
34. Hepatitis B can be prevented.		
35. Hepatitis B is curable.		
36. Hepatitis B virus can be killed through handwashing.		
37. Hepatitis B vaccine exists.		
38. You may be infected with chronic hepatitis B without showing symptoms.		
39. Chronic hepatitis B can cause liver cirrhosis (scarring caused by liver damage).		
40. Chronic hepatitis B can cause liver cancer.		

Part 4: Attitudes towards Hepatitis B

This section is to assess your attitudes towards the diagnosis and treatment of hepatitis B. Please answer truthfully. For each question, please choose '**Yes**' or '**No**'.

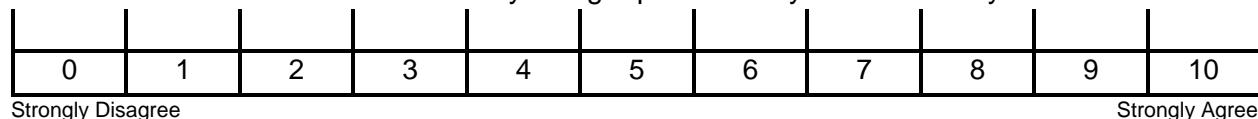
	Yes	No
41. If my doctor recommends hepatitis B testing, I will do it.		
42. If I know a family member or friend has hepatitis B, I am more likely to get tested.		
43. If I have hepatitis B, I will avoid close contact with others.		
44. If I have hepatitis B, I will feel ashamed for my family.		
45. If I have hepatitis B, I will feel embarrassed.		
46. If I have hepatitis B, I will not have children.		
47. If I have hepatitis B, I may lose my job.		
48. If I test positive, I will seek treatment.		
49. If free treatment is available, I will be more willing to test.		
50. If free vaccination is available, I will be more willing to test.		

Part 5: Satisfaction with Hepatitis B Point-of-Care Testing

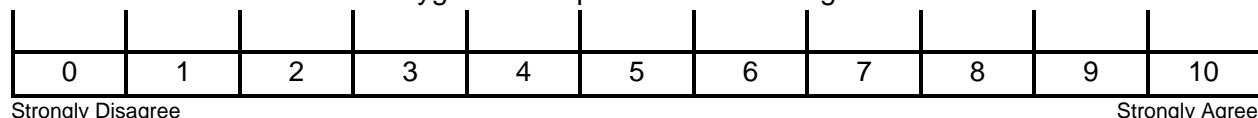
This section assesses your satisfaction with hepatitis B point-of-care testing. Please answer truthfully.

Please rate your agreement with the following statements (0 = strongly disagree, 10 = strongly agree).

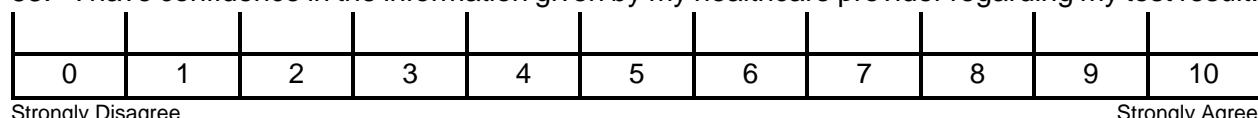
51. I would rather have blood taken by a finger prick than by a needle in my arm.



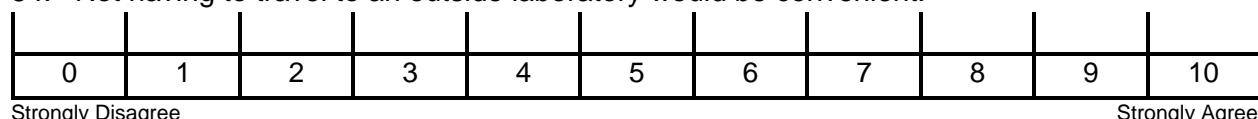
52. Laboratories have better hygiene than point-of-care testing.



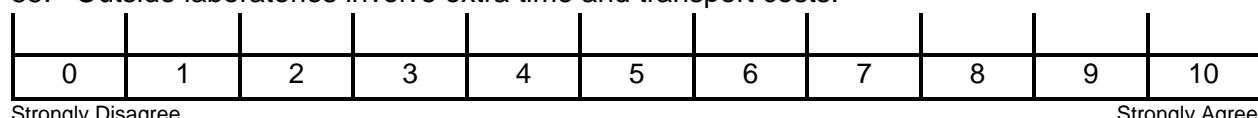
53. I have confidence in the information given by my healthcare provider regarding my test result.



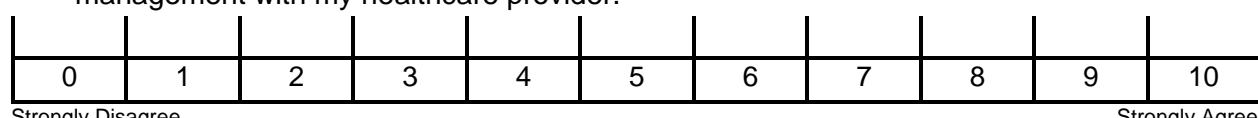
54. Not having to travel to an outside laboratory would be convenient.



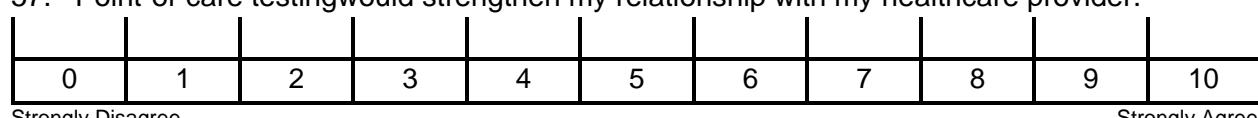
55. Outside laboratories involve extra time and transport costs.



56. Having immediate feedback of the test result is important as it allows me to discuss management with my healthcare provider.



57. Point-of-care testing would strengthen my relationship with my healthcare provider.



--- End of Questionnaire ---

Thank you!