**Supplemental Table S3. Conditional willingness of using PharmFITTM**

|  |  |  |
| --- | --- | --- |
|  | *n*=288  | (%) |
| *I would be willing to get a FIT kit from my pharmacy for my regular colon cancer screening, only if* … |  |  |
| My doctor or healthcare provider recommended going to the pharmacy | 163 | 57% |
| The FIT results are reported back to my doctor or healthcare provider | 146 | 51% |
| My insurance would pay for the FIT or it would be low-cost for me | 144 | 50% |
| I do not have to make an appointment in advance | 65 | 23% |
| The pharmacy is easier to get to than my doctor's office | 53 | 18% |
| The pharmacist is trained on how to communicate FIT results to me | 48 | 17% |
| The pharmacist has a semi-private or private place to discuss the FIT with me | 48 | 17% |
| The pharmacist is trained to teach me how to use a FIT kit | 43 | 15% |
| I know the pharmacist giving me the FIT kit | 29 | 10% |
| The pharmacy gives FIT kits during extended hours, such as evenings and weekends | 18 | 6% |
| I can try out the service at the pharmacy before committing to using it for my regular colon cancer screening | 15 | 5% |
| None of these | 31 | 11% |

Note. Survey responders were allowed to check as many response options as applicable.