

Appendix S1.

## MATERIALS AND METHODS

*Sampling.* The database of dialysis units used in this study was generated using an independent online database (<http://www.dialyse-online.de>) provided by a patient initiative comprising all existing dialysis units in Germany. This database was then compared with the database of the German federal kidney association (Bundesverband Niere e.V.) and a database of HD units we had used in a previous study (5) to assure completeness.

To manage the distribution of dialysis units in Germany and ensure a representative, comprehensive study design, Germany was divided into 4 quadrants (north, east, south and west). These units were assigned to the quadrants using the units' postcodes. Large cities (at least 100,000 inhabitants) and towns were distinguished within each quadrant. To consider the geographical distribution of dialysis units in Germany, the required number of study sample's dialysis units was calculated for each quadrant. Therefore the number of existing dialysis units within the respective quadrants was divided by the total number of dialysis units in Germany and multiplied by 25 (the previously fixed number of dialysis units needed to investigate). The resulting decimal numbers set the number of dialysis units needed to include within each quadrant after Cox controlled rounding (37), e.g. 2 units in a north-German town (Fig. S1). A cluster sample of 25 dialysis units was randomly selected by computer using Microsoft Excel 10. To identify the study samples dialysis units, a random number generator determined the order of the quadrants' listed units, e.g. within the list of all units in the quadrant north (towns), the first 2 listed units were selected.

All selected units were sent an information letter explaining the study's background/details and asking for permission to serve as a study centre. All selected units were contacted by phone 2 weeks later to obtain permission and to fix the date for the study visits. Non-responders were replaced by the list's subsequent dialysis unit. Sampling was conducted until 25 dialysis units, based on calculated distribution (Fig. S1), agreed to participate.