Supplementary Document 1: Simulation Action List and Action Timing Comparison

The table below describes a series of possible learner actions (probes and proposed interventions) and what information the SP reveals in response to each probe. It also provides a comparison of what actions physicians chose compared to non-physicians, and when in the sequence of actions each one was chosen. For example, physicians chose the action "psychosis" significantly earlier than non-physicians in the simulation.

Simulation Content			Mean order of Physician vs. Non-physician Actions				
Line of Inquiry	Learner Action/ Probe	Information Revealed	Physician	Non-Physician	F	p value	
Assess Symptoms	Anxiety	Pt feels very anxious, onset during past few weeks	5.06	4.68	.077	.781	
	Hopelessness	Pt feels hopeless	5.8	5.37	4.528	.034	
	Homicidal ideation/intent	Pt is angry at ex-wife, thoughts of hurting her but no plan	4.44	4.49	10.895	.001	**
	Irritability	Pt feels irritable	7.1	8.58	1.117	.291	
	Mania	Pt is not experiencing manic symptoms	9.03	9.12	1.471	.226	
	Neurovegetative symptoms	Pt is experiencing anhedonia, low concentration, early morning awakening	8.13	9.23	.004	.951	
	Psychosis	Pt experienced auditory hallucinations during deployment but no longer	7.52	10.2	14.311	.000	**
	Pain	Pt is experiencing joint pain	11.71	10.96	.019	.891	
	Sadness	Pt does not endorse sadness	9.29	9.6	.851	.357	
	Suicidal ideation/intent	Pt is having thoughts of suicide, has a plan and the means to carry out this plan. Does not plan to do so	4.85	5.39	4.507	.034	*

		"today"					
	Substance use	Pt drinks 4-5 days/week, <5	7.55	7.83	.085	.771	
Assess History	Family history	Pt brother was depressed, committed suicide	13.51	12.94	3.866	.05	*
	Legal history	Pt doesn't "get caught", describes speeding	13.14	14.66	3.881	.05	*
	Medical history	Possible mild TBI during high school football	14.47	14.06	1.401	.237	
	Psychiatric history	Previous episode of depression in 30s, untreated	10.77	9.75	8.002	.005	*
	Suicide attempts	Pt has never attempted suicide	10.19	9.19	3.108	.079	
	Trauma history		13.65	12.15	1.485	.224	
Assess Environment	Access to firearms	Pt has firearm in garage, no bullets	12.60	10.68	3.097	.224	
	Current employment	Pt is currently employed but is having difficulties at work; was called in last week to discuss low productivity	16.96	15.72	3.788	.053	
	Current relationships	Recently divorced, ex-wife is dating friend. Pt is concerned that she cheated on him	15.86	14.49	7.658	.006	*
	Religious beliefs	Pt identifies as Catholic, does not practice regularly	17.97	16.26	.001	.976	
	Review hobbies	Pt plays poker and golf	23.05	20.56	4.046	.05	*
	Review childhood	Pt grew up with brother, three sisters, and mother. Father was in the Navy and absent, mother was nurse. Enjoyed high school	21.24	20.43	.086	.77	
	Self-identified support	Pt identifies buddies as support	15.86	14.92	.107	.744	

Discuss willingness for hospitalization	Pt reacts negatively	19.44	19.27	.201	.654	
Contract for safety	Pt agrees to sign contract indicating that he will not act on any urges to hurt himself, and that he will call clinician or 911 if he is having unsafe thoughts	19.80	18.14	.303	.583	
Discuss willingness to secure firearm	Pt agrees to lock gun and store it outside of house	19.56	18.90	.201	.654	
Refer for couples therapy	Clinician offers referral to couples therapy for pt and exwife. Pt reacts negatively	21.60	22.00	1.065	.324	
Refer to psychiatry specialty clinic	Clinician offers referral to psychiatry clinic for tx for depression. Pt agrees	21.60	20.65	.004	.953	
Call security	Clinician informs pt that he is safety risk and that he is calling security, pt becomes angry	20.34	19.92	.185	.669	
Escort to emergency department	Clinician informs pt that he is safety risk and must go to ER, pt becomes angry	21.3	20.29	1.879	.172	
	Discuss willingness to secure firearm Refer for couples therapy Refer to psychiatry specialty clinic Call security Escort to emergency	for hospitalization Contract for safety Pt agrees to sign contract indicating that he will not act on any urges to hurt himself, and that he will call clinician or 911 if he is having unsafe thoughts Discuss willingness to secure firearm Refer for couples therapy Refer to psychiatry specialty clinic Call security Clinician informs pt that he is safety risk and that he is calling security, pt becomes angry Escort to emergency Contract for sign contract indicating contract Indicating that he will not act on any urges to hurt himself, and that he will not act on any urges to hurt himself, and that he will not act on any urges to hurt himself, and that he will not act on any urges to hurt himself, and that he will not act on any urges to hurt himself, and that he will not act on any urges to hurt himself, and that he will not act on any urges to hurt himself, and that he will not act on any urges to lock gun and store it outside of house Clinician offers referral to psychiatry clinic for tx for depression. Pt agrees Call security Clinician informs pt that he is safety risk and must go to ER,	for hospitalization Contract for safety Pt agrees to sign contract indicating that he will not act on any urges to hurt himself, and that he will call clinician or 911 if he is having unsafe thoughts Discuss willingness to secure firearm Refer for couples therapy for pt and exwife. Pt reacts negatively Refer to psychiatry specialty clinic Call security Clinician informs pt that he is calling security, pt becomes angry Escort to emergency Pt agrees to lock gun and store it outside of house Clinician offers referral to couples therapy for pt and exwife. Pt reacts negatively Clinician informs referral to psychiatry clinic for tx for depression. Pt agrees Call security Clinician informs pt that he is calling security, pt becomes angry Escort to clinician informs pt that he is safety risk and must go to ER,	for hospitalization Contract for safety Pt agrees to sign contract indicating that he will not act on any urges to hurt himself, and that he will call clinician or 911 if he is having unsafe thoughts Discuss willingness to secure firearm Refer for couples therapy Clinician offers referral to couples therapy for pt and exwife. Pt reacts negatively Refer to psychiatry specialty clinic Refer to psychiatry clinic for tx for depression. Pt agrees Call security Clinician informs pt that he is calling security, pt becomes angry Escort to control couples to safety risk and must go to ER, Pt agrees to sign contract 19.80 18.14 19.80 18.14 19.80 18.14 19.80 19.56 18.90 21.60 22.00 22.00 22.00 20.65	for hospitalization Contract for safety Pt agrees to sign contract indicating that he will not act on any urges to hurt himself, and that he will call clinician or 911 if he is having unsafe thoughts Discuss willingness to secure firearm Refer for couples therapy Clinician offers referral to couples therapy Refer to psychiatry specialty clinic psychiatry clinic for tx for depression. Pt agrees Call security Clinician informs pt that he is calling security, pt becomes angry Escort to emergency Contract for sign contract 19.80 19.80 18.14 .303 18.14 .303 19.80 18.14 .303 18.14 .303 19.80 18.14 .303 .303 .3	for hospitalization Contract for safety Pt agrees to sign contract indicating that he will not act on any urges to hurt himself, and that he will call clinician or 911 if he is having unsafe thoughts Discuss willingness to secure firearm Refer for couples therapy or pt and exwife. Pt reacts negatively Refer to psychiatry specialty clinic or by safety risk and that he is calling security, pt becomes angry Escort to emergency Pt agrees to lock gun and 19.56 18.90 .201 .654 21.60 22.00 1.065 .324 22.00 1.065 .324 22.00 20.65 .004 .953 22.00 .004 .953 22.00 .004 .953