

Data Supplement S1. Interview Questions

Psychosocial Dimension - Personal Component

1. Can you briefly describe what you did clinically on an average day?
2. I want to understand your perception of the practice environment while deployed and how it was different than your work environment stateside. Can you describe the difference for me? (You may need to define practice environment as the attributes of what makes your setting a good place to work)
 - a. Prompts:
 - i. Time focused on patient care
 - ii. Community of peers
 - iii. Quality of life
 - iv. High levels of resilience vs exhaustion
 - v. Well-being vs moral distress
 - vi. Working and learning in a “meaningful” practice
 - vii. Trust in a regulated system to support you
 - viii. Worries about future endurance and capacity
 - ix. Depersonalization
3. Which, if any, of these differences affected your ability to care for patients?
4. What kind of injury patterns did you see while deployed? Were there any injury patterns that were significantly different from those you saw while practicing stateside?
5. How was the medical management of patients different in the combat setting compared to stateside? Did you learn about that ahead of time, or did you learn it in-country?

Psychosocial Dimension - Social Component

6. Was there any transition time or turnover with the outgoing team when you arrived? If so, what did this involve? What did you learn during this time that proved to be most useful?
7. I want to understand the quality of interactions you had with other people while deployed and how these compared with what you experienced stateside. Can you describe that for me?
 - a. Prompts:
 - i. Peer-to-peer
 1. Competition, cooperation, shared values and learner culture
 - ii. With team members
 - iii. Trust, feedback, clarity of expectations, communication, debriefing, instructional strategies, mentoring
 - iv. Members, structure, functioning, communication
 - v. With patients
 1. Responsibility, acceptance, trust
8. Can you think of a case where there was conflict amongst the care team? How was it handled? Was this any different from the way it would be handled at home?

- . Conflict between medical specialties
- a. Rank
- b. Joint teams
- c. Defining team leader
- 9. How did these social interactions affect your ability to care for patients? (ask if not addressed)

Psychosocial Dimension - Organizational Component

10. So we talked about your personal interactions with the environment and your interactions with other people. Now I want to think at the organizational level. How did you navigate interactions with the larger organizational structure? How did these interactions differ from those you had stateside? Are there any areas that were challenging and affected your ability to provide effective patient care?

- a. Prompts:
 - b. Leadership (within the medical unit or on the base)
 - c. Policies
 - d. Performance measures
 - e. Organizational culture
 - f. Access to medical references or records
 - g. Duty hours and fatigue management
 - h. Professionalism
 - i. Interactions with the community
 - j. Patient safety
 - k. Language barriers
 - l. Cultural barriers
 - m. Inter-changeability of medical elements
11. How did patient transport work while deployed? Were you prepared to work with that system of patient movement? (within facility and interfacility)

Material Dimension - Physical Space

12. How was the physical space in which you worked different from your stateside workplace? By this I mean the size of your medical unit, and the supplies and equipment that you had available?

- a. Prompts:
- b. Physical structure where care was rendered
- c. XR, labs, blood products, resuscitation equipment, ventilators
- d. MEDEVAC capability
- e. Health records
- f. Communication with other medical units
- g. Consultant services available? Locally? Via phone?

Material Dimension - Virtual Space

13. Can you describe your ability to access medical references such as UpToDate, clinical practice guidelines, etc.? Was accessibility different from what you had stateside?

Conclusion (if time allows)

14. Were there any cases that could have gone better while deployed? What could have better prepared you?

15. Are there any things that you wish you'd known about to better prepare you for practicing medicine in a combat setting?

16. If you had the opportunity to give advice to a person about to deploy, what would you share with them to help them prepare?

17. Are there any other differences between your deployed setting and your stateside training that you think impacted patient care?