Supplemental Digital Appendix 1

Example of Discussion When the Live Simulation was Paused by a Facilitator Participating in This Study, University of Toronto, 2014

During this simulation (Case 3), the standardized patient who played the father of the child with autism became angry and upset with the resident as the diagnosis was being shared. The simulation facilitator paused the simulation to open a discussion.

Simulation facilitator: How do you think it’s going? What’s working for you right now?

Resident in simulation: Well, I think dad has issues with eye contact and communication [intimating that he may have autism]… I don’t want to ostracize his opinions but I agree with mom. My first step was to try to tone down the situation, but it’s making it worse…

Simulation facilitator: I think what you’re doing is effective – listening, letting them talk – but I’m just wondering if he’s not there yet. What do you do with someone who’s not there yet? He’s so upset that he can’t understand…

Intern: I don’t think that dad has a full understanding of autism. He talked about YouTube videos of children with severe autism, but he doesn’t know the milder form.

Parent observing simulation: I think he came in defensive and when he heard the word, autism, he reacted more negatively.

Resident 1: I think that he sees a lot of himself in his son… So, your criticism and comments about his son are also criticisms and comments about himself which adds another layer of difficulty.

Simulation facilitator: So, what can you do to open up dad up a bit?

Resident in simulation: Mom was saying, well, “Wouldn’t it have been nice for you to have friends growing up?” and dad was saying “yes”… so maybe going there…

Intern: But can’t that potentially backfire? [by focusing on dad] I also think he sort of started acknowledging things when the label was put aside.

Resident 2: Or you can say, “Can you tell me some areas where he [the son] has difficulty?”