## Online Appendix. The simulated patient scenario, recruitment, and training

### Step 1: Simulated patient scenario design

| A symptom based request | A product based request |
|-------------------------|-------------------------|
| To start the conversation, the simulated patient said: “I want to buy medicines for cough, what do you recommend?” | To start the conversation, the simulated patient said: “I want to buy Woods merah” |

Only upon questioning, the following information was provided:

The patient is the one who has cough.

The cough is dry, on and off for about a month. Recently the patient feels that the cough is worsening in which it makes the patient wakes up at night. The patient also has chest tightness and shortness of breath. Other than the symptoms mentioned above, the patient does not have any other accompanying symptoms.

The patient has not tried anything for the cough.

The patient has mild asthma since childhood; it usually flares up when the patient exercises strenuously. For the asthma, the patient only uses a reliever (salbutamol/albuterol inhaler 1 to 2 puff prn). Recently, the patient feels that the asthma symptoms is getting worse and the frequency in using his/her reliever has increased to 2 to 3 times a day. Other than the reliever, the patient does not use any other medicines. The patient also does not have any medical conditions other than asthma.

The patient does not smoke and does not have allergies.

**Appropriate recommendation: direct medical referral**

prn=pro renata (if required)

#(woods merah is an Indonesian brand of cough medicines that contain dextromethorphan HBr and diphenhydramine HCl)

### Step 2: Selection and recruitment of simulated patients

The criteria used to select simulated patients are: (1) a pharmacist and (2) have additional experience in the area of pharmaceutical consultations for minor ailments.

Characteristics of simulated patients performing the two scenarios:

- **The principle researcher:** one female pharmacist, aged around 40 years old. She has previously conducted simulated patient training at the University of Western Australia and also has conducted and published studies in the area of simulated patients. She acted as the principal researcher who conducted training and evaluated other simulated patients.
- **Experienced tutors:** Two male PhD students aged 30 and 35 years old and one female drug information centre pharmacists, aged around 40 years old. They are all tutors for
Pharmacy students in the area of managing minor ailments (in the class or in the national student competitions).

- Recent pharmacist graduates: Two males and one female recent pharmacist graduates, aged around 23 to 25 years old. Aside from their training in managing minor ailments during the BPharm and apothecary programme, all of them also had experience in joining national simulated patient competitions in managing minor ailments. Prior to joining competitions, all of them had extra trainings in which they were required to act as simulated patients for their friends.

Step 3: Training and evaluation

The training:
The training consisted of 2 sessions:
- Session 1:
The principal researcher explained the objectives of the study, the scenarios, and how to complete the data collection form to all simulated patients. All simulated patients were asked to read the scenarios and data collection form one day prior to the training day. Session 1 lasted for 2 hours.
- Session 2:
Each simulated patient conducted role plays with the principal researcher for training and assessment. The role plays were repeated 2 to 4 times for each simulated patient depending on their ability to enact the scenarios accurately. The simulated patients with more experience as tutors in consultations for minor ailments only required 2 roleplays, whereas the less experienced simulated patients required greater repetition in the role plays until accuracy was achieved (up to 4 times). In total, the principal researcher required 5 hours to complete the role plays training and assessment.

The evaluation:
After each simulation, the principle researcher provided feedback to the simulated patients. The simulated patients were asked to repeat the simulation until they were deemed able to enact the scenarios accurately by the principal researcher.