Supplementary file 1. the demographical questionnaire filled out by participating GPs

GP characteristics

1. What is your gender?
   a. Male
   b. Female
   c. Other

2. What is your age?
   *Your answer has to be between 18 and 90*
   *Integer only*
   ......... years

3. How long have you been practicing as a general practitioner?
   *Your answer has to be between 0 and 90*
   *Integer only*
   ......... year(s)

4. What is your additional expertise?
   I have a specialization / additional training in the field of:
   *Multiple answers possible*
   a. Care for older people
   b. Palliative care
   c. Chronic illness (e.g. COPD, cardiovascular disease, Diabetes)
   d. No additional expertise

5. Other, i.e. ....

Practice characteristics

1. What type of practice do you work at?
   a. Solo practice
   b. Solo practice within a primary care facility
   c. Duo practice
   d. Duo practice within a primary care facility
   e. Group practice
   f. Group practice within a primary care facility

2. What applies to you?
   a. I am employed (salaried service)
   b. I am self-employed (independent)
   c. Other, i.e. ....

3. How is your practice situated?
   a. Rural
   b. Semirural/suburban
c. Urban

4. What is the size of the practice?
   *Your answer has to be a minimal of 0*
   *Integer only*
   The practice serves ... patients