

Thank you for your participation in the study. Your time spent is much appreciated. Please retain the thumb drive as a token of our appreciation.

IDENTITY						
		Please drag the dark grey slider to the level of difficulty for TME.		Please fill the boxes.		
VIDEO	EASY	LEVEL OF DIFFICULTY		DIFFICULT		WHAT DO YOU THINK THE PATIENT HAD?
A	<				>	Upfront
B	<				>	Long Course
C	<				>	
D	<				>	
E	<				>	
F	<				>	RAPIDO
G	<				>	
H	<				>	
I	<				>	
J	<				>	
K	<				>	
L	<				>	

Supplementary Fig. 1. Assessor form.