

## Supplementary Material

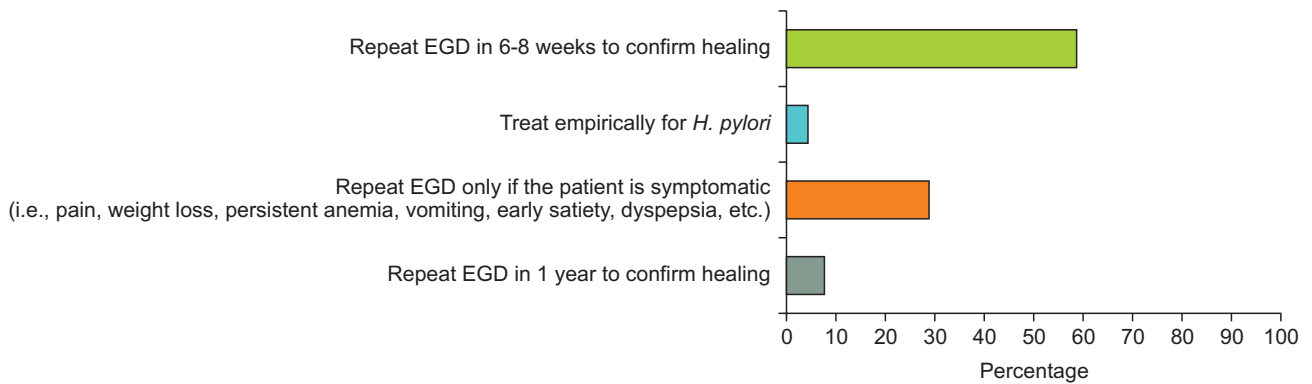
### Non-vignette based questions and answer choices

1. Screening for gastric cancer should be recommended in the United States
  - a. Yes, I agree. Screening should be recommended in the United States
  - b. No, I disagree. Screening should not be recommended in the United States
  - c. Screening should be recommended in some selected populations
  - d. I'm not sure
  - e. Other (please specify):
  
2. True or false: *Helicobacter pylori* (*H. pylori*) is considered a carcinogen.
  - a. True
  - b. False
  
3. Which of the following are risk factors for gastric cancer (please select all that apply)?
  - a. Older age
  - b. Female gender
  - c. Smoking tobacco
  - d. Lack of sleep
  - e. Lack of exercise
  - f. Drinking excess alcohol
  - g. Stress
  - h. Obesity
  - i. *H. pylori* infection
  - j. Family member with stomach cancer
  - k. Previous stomach surgery
  - l. Eating excess salt
  - m. Eating pickled/preserved or smoked foods
  - n. Type A blood type
  - o. Black race
  - p. Hispanic/Latino ethnicity
  - q. Pernicious anemia
  
4. Which of the following is considered an "endemic area" for *H. pylori* (check all that apply)?
  - Africa
  - United States
  - South America
  - Asia
  - Eastern Europe
  - Australia
  
5. Which of the following are considered high-risk races and/or ethnicities (check all that apply)?
  - Black American
  - Non-Hispanic White
  - Native American
  - Southeast Asian (from Indian subcontinent)
  - Japanese
  - Korean
  - Taiwanese
  - Russian

6. Which of the following are appropriate screening modalities for gastric cancer (check all that apply)?
- Iron deficiency anemia screen
  - Upper endoscopy (EGD)
  - H. pylori* testing
  - Contrast imaging
  - Serum pepsinogen
  - None of the above
7. Which of the following are considered pre-cancerous lesions of the stomach (check all that apply)?
- Inactive gastritis
  - Atrophic gastritis
  - Intestinal metaplasia
  - Dysplasia
  - None of the above
8. True or false: I routinely screen for gastric cancer or pre-cancerous lesions in patients whom I consider high-risk for gastric cancer.
- a. True
  - b. False
9. True or false: I routinely test and treat patients from an endemic area for *H. pylori* regardless of symptoms.
- a. True
  - b. False
10. Which of the following is an appropriate screening test for *H. pylori* infection in someone who has never been treated (check all that apply)?
- H. pylori* fecal antigen (off of proton pump inhibitor [PPI] therapy)
  - H. pylori* serum antibody
  - Biopsies for *H. pylori* during upper endoscopy
  - Serum pepsinogen
  - None of the above
11. Which of the following is an appropriate test for clearance/eradication of *H. pylori* infection (check all that apply)?
- H. pylori* fecal antigen (off of PPI therapy)
  - H. pylori* serum antibody
  - Biopsies for *H. pylori* during upper endoscopy
  - Urease breath test
  - None of the above

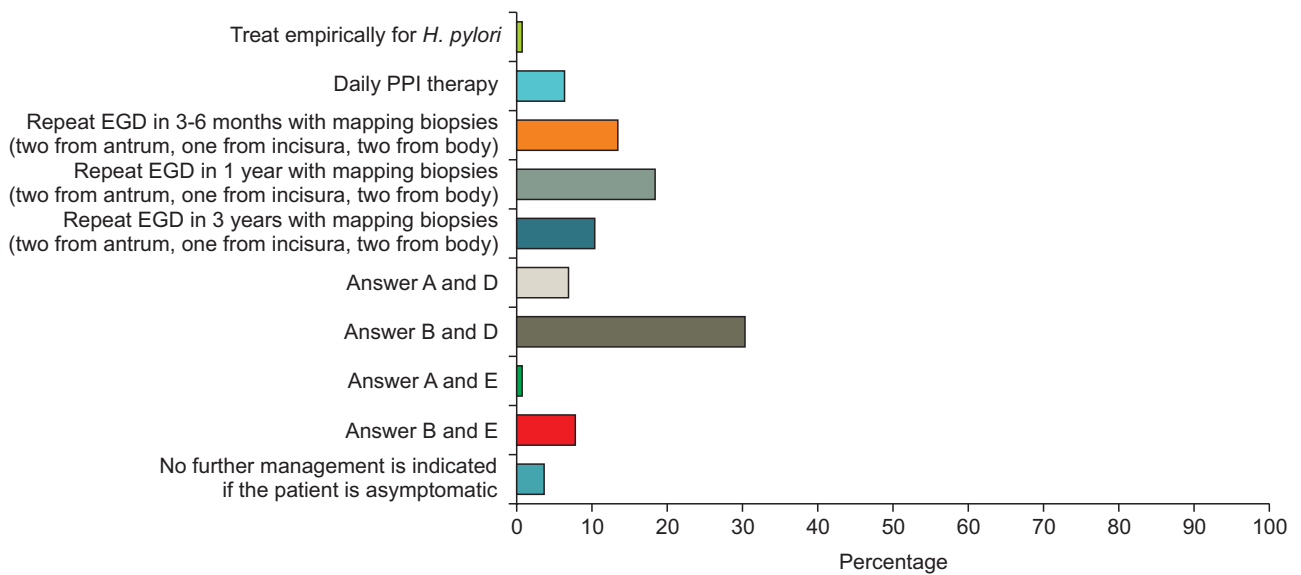
**Vignette-based questions and responses**

**Case 1:** Respondents' answers for follow-up for a 47-year-old White man with acute gastrointestinal bleeding due to a gastric ulcer on the incisura, which was treated endoscopically and medically



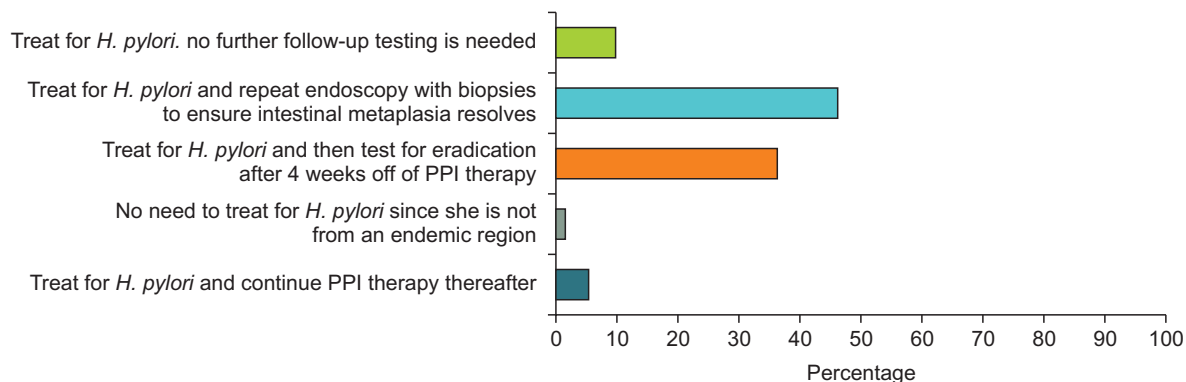
	Correct response (answer A)	Incorrect response (answer B, C, or D)
Gastroenterologist	94.6% (35/37)	5.4% (2/37)
Primary care	44% (40/91)	56% (51/91)

**Case 2:** Respondents' answers for the best next step in management of a 50-year-old Russian man with incomplete intestinal metaplasia (*H. pylori* negative) and no dysplasia on random biopsies during an EGD performed for non-ulcer dyspepsia, but no other gastric cancer risk factors



	Correct responses	Incorrect responses
Gastroenterologist	27% (10/37)	73% (27/37)
Primary care	5.7% (5/87)	94.3% (82/87)

**Case 3:** Respondents' answers for the best next step in management of 60-year-old white woman born and raised in New York City who is found on EGD indicated for anemia work up to have complete intestinal metaplasia, *H. pylori* positive, but otherwise asymptomatic with no other gastric cancer risk factors



	Treat <i>H. pylori</i> infection, but no follow-up EGD	Treat <i>H. pylori</i> infection and repeat EGD	No need for treatment of <i>H. pylori</i> infection
Gastroenterologist	54.1% (20/37)	40.5% (15/37)	5.4% (2/37)
Primary care	51.2% (44/86)	27.9% (42/86)	0% (0/86)