

Supplemental Digital Appendix 1

Emotions in NMLs: Illustrative Examples From a Qualitative Study About Memorable Learning in Palliative Care and Professional Identity Formation, University of Ottawa, Department of Family Medicine, 2014

Emotion in NML	Illustrative example
Evoked in self about doing the work	“... I just felt very frustrated because I got called ... then I had to leave. And I felt like that family was just left... in the dust and... and I felt as though, like, how is that okay?’ ... I was never ... able to go back and to see that family ...again... because it was just so crazy... I felt quite conflicted inside.” P13
Evoked in self about death and dying	“So if you make that experience good for the patient and for the family members ... it can be a really positive experience for everyone involved. It doesn't have to be ... sad... although it is quite sad.” P1
Observed in others	“... this patient was a bit of a curmudgeon she was a little bit... cranky, she wasn’t charming ... but she was very firm and clear about what she wanted. And she was becoming ornery probably because ... she’s at the end of her life and she wants to be at home.” P8
Coping or managing strong emotions in self or within interaction	“... and this woman called me and she’s yelling at me and I couldn’t help myself feel anxious... afterwards I reflected and I thought... whenever I feel ... [my] blood ... rising... [I] just stop and just relax and we’ll figure out what’s going on here ... it was good for me that way.” P5

Abbreviations: NML indicates narrative of memorable learning; P, participant number.

Supplemental Digital Appendix 2

Clinical Workplace Learning in NMLs: Illustrative Examples From a Qualitative Study About Memorable Learning in Palliative Care and Professional Identity Formation, University of Ottawa, Department of Family Medicine, 2014

Workplace learning	Illustrative example
Learning through supervised clinical care	“... being able to ... work through that with [the sister] ... do it in a way that was respectful ... being able to see... [Attending physician] ...work with her and ... knowing it was a good goodbye ... that was a really good learning experience for me just being able to... see how that was done.” P10
Learning from interprofessional colleagues	“... we had meetings with nurses, with the pharmacist, ... with the rest of the palliative care physicians. Sometimes we would meet with the patients ... themselves with this big team ... I never felt ... alone. It also made me appreciate... when ... you’re working as a team ... you can support each other...”P13
Learning by doing	“... I really liked that independence and ... the guidance that [Attending physician] gave me... I spent several hours... coming up with the plan, talking with the nurses, making sure the orders were correct ... I felt proud of myself that I had made it through that experience and had a good rapport with the patient and was able to call [Attending physician] and talk about my plan, and tweak it a little bit and felt like ... I ‘ve definitely learned something here today.” P5
Learning patients and families	“... [the patient] ... said, “How... are you doing? “He almost felt like we were trying to do too many things and he was ... checking in to see ... how we were feeling ... a senior medical resident and then we wanted to ‘RACE’ him potentially but he didn’t want any of that. He ... started telling me about his life as a pilot and ... things about his life ...” P4

Abbreviations: NML indicates narrative of memorable learning; P, participant number.