**Appendix 1.**

1. What is your gender?

2. What is your age?

3. What is your highest level of education?

4. Have you ever felt worried about seeking medical care because it may impact your career and/or hobby?

5. Do you have a pilot’s license?

6. You begin to experience ***chest pressure only when you exercise/walk up the stairs***. If the symptoms continued for the listed duration, how likely would you seek professional medical care? Please answer ‘would not seek care,’ ‘probably would not,’ ‘probably would,’ or ‘would seek care’ for each.
 a. Less than 1 week
 b. 2 weeks
 c. 1 month
 d. 3 months
 e. 6 months

 f. 1 year
7. You suddenly experience constant ***chest pressure while sitting and watching TV***. If the symptoms continued for the listed duration, how likely would you seek professional medical care? Please answer ‘would not seek care,’ ‘probably would not,’ ‘probably would,’ or ‘would seek care’ for each.
 a. Less than 15 minutes
 b. 30 minutes
 c. 45 minutes
 d. 1 hour
 e. 2 hours
 f. Longer than 2 hours
(Pilots only)
8. What is you highest level of pilot training?
9. How many flight hours do you have logged?
10. Have you ever withheld information from a physician due to concern for your medical status as a pilot?
11. Have you ever not sought or delayed medical care for a symptom due to concern for your medical status as a pilot?