Supplementary Material

Survey Questions

1. Which of the following best describes the practice setting where you spend the majority of your time treating patients?
   () Solo office-based private practice
   () Office-based private practice (single-specialty)
   () Office-based private practice (multispecialty)
   () Nonacademic hospital
   () Academic teaching hospital
   () Academic research institute
   () Other - Write In (Required): ______________________________

2. How many physicians work at the practice location where you spend the majority of your time treating patients?
   _________________________________________________________

3. How many patients are in your patient panel?
   __________________________________________________________

4. On a typical day, how many patients do you see at the practice location where you spend the majority of your time treating
   patients?
   __________________________________________________________

5. On average, how much time do you spend with an individual patient during an office visit?
   () Less than 10 minutes
   () 11–15 minutes
   () 16–20 minutes
   () 21–25 minutes
   () 26–30 minutes
   () 30 minutes or more

6. Thinking about the practice location where you spend the majority of your time treating patients, please give your best
   estimate of the percentage of patients who are Medicaid recipients or who do not have insurance coverage.
   __________________________________________________________

7. Thinking about the practice location where you spend the majority of your time treating patients, please give your best
   estimate of the percentage of patients whose parents have completed the following level of school or received one of the
   following degrees.
   Less than high school, no degree: ______________________________
   High school graduate, diploma, or the equivalent (GED): __________________
   Trade/technical/vocation training: ________________________________
   Associate degree: ____________________________________________
   Bachelor’s degree or above: ____________________________________

8. In each of the following settings, do you consider yourself a heavy, moderate, light, or nonuser of technology?

<table>
<thead>
<tr>
<th></th>
<th>Heavy user</th>
<th>Moderate user</th>
<th>Light user</th>
<th>Nonuser</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home</td>
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<td>()</td>
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<tr>
<td>Office</td>
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</tbody>
</table>

9. How likely are you to be the one recommending new technologies in your workplace?
   () Very unlikely
   () Unlikely
   () Likely
   () Very likely
10. Do you use any dictation technologies in your clinical practice? (i.e., Dragon, PowerMic)
   () Yes
   () No

11. What dictation technology do you use? ________________________________

12. Are you familiar with or have used any of the following commercial voice technologies?

<table>
<thead>
<tr>
<th>Technology</th>
<th>Heard of</th>
<th>Used once or twice but do not own</th>
<th>Used frequency but do not own</th>
<th>Own and rarely use</th>
<th>Own and often use</th>
<th>Never heard of</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amazon Alexa</td>
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<tr>
<td>Google Assistant (Google Home)</td>
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<td>Apple’s Siri</td>
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<tr>
<td>Microsoft Cortana</td>
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</tbody>
</table>

13. If you have used a voice assistant, where did you use it?
   () Home
   () Office
   () Both
   () Other - Write In (Required): ________________________________

14. Are there particular skills or situations where you enjoy using a voice assistant?___________

15. How confident are you about the reliability of answers from a voice assistant?
   () Not confident at all
   () Not particularly confident
   () Somewhat confident
   () Very confident

16. Would you be willing to try using a voice assistant in a clinical setting?
   () Yes
   () No
   () I’m not sure

17. What are your concerns with using a voice assistant in a clinical setting? ________________

18. Is there a specific disease state (diabetes, asthma, etc.) or patient population that you think would be well-suited for a voice assistant? Or is there a specific use case where you could imagine using a voice assistant in a clinical setting? ________________________________

19. What is your primary practice focus?
   () Pediatrics
   () Other - Write In (Required): ________________________________

20. What is your secondary practice focus or area of specialty? ________________________________

21. What is your age? ________________________________