**Supplementary File 1.** Ten representative cognitive biases shared with participants.

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| **Cognitive biases** | **Explanation** |
| Availability bias | Instinctively thinking of things that come to mind easily and believing that these are the best explanation or diagnosis. This may also be affected by one’s recent experiences. |
| Overconfidence bias | Easily believing overconfident people’s judgments about oneself and others. |
| Anchoring bias | Clinging on to the first piece of information presented or your first thought and not considering other possibilities. |
| Confirmation bias | Disregarding information that is inconsistent with one’s assumptions. |
| Hassle bias | Choosing options that we physically and mentally process with ease. |
| Rule bias | You blindly follow general rules that are not always correct. |
| Base rate neglect  | Ignoring the frequency of a disease; sometimes, diagnosing a rare disease accelerates this even further. |
| Visceral bias | Decisions being influences by one’s positive or negative feelings about the patient. |
| Premature closure | Ceasing to think about an issue further after making a diagnosis. This is a strong bias that may contribute most to errors. |
| Maslow’s hammer  | Preferring to use the most familiar tool or technique available rather than the most effective one (e.g., endoscopy and cardiac catheterization). |