

Layer of modified SEM	Sub-theme	Quote
Individual Impression of work as a junior doctor	Perceived role as a junior doctor	"I think my role was largely to make sure all the changes were done. [...] Keep patients alive as much as we could. Keep relatives happy and the patients happy." – Participant M7, middle cohort
		"The way I thought about it is that we are the workhorse and we are the buffers. Anything, we will try to, you know, take as much as possible, and just let a few things get escalated." – Participant M8, middle cohort
Interpersonal Impact of relationships on self	Navigating hierarchy	"The thing about [being a] junior doctor is that you're constrained by being junior. So a lot of times, plans from seniors, you don't really agree [...] it's not best practice; but a lot of times [we just] sort it out, just do it because the senior says so. Then there is a feeling of powerlessness, I guess, because you're still beholden to the powers above you." – Participant J8, junior cohort
		"Just because, you know, 'I'm a registrar or consultant, I say this, therefore, just shut up and do it.' I think that was one of the hardest for me to deal with because they can be wrong, right?" – Participant M3, middle cohort
		"Housemanship is a very arbitrary construct. You were at the bottom of the food chain." – Participant S5, senior cohort
Individual Impression of work as a junior doctor	Steep learning curve	"On call, sometimes the MO (medical officer) is busy, the reg (registrar) is away, you can't possibly call the consultant [...] you are really alone to make a decision. And you do not know enough, you do not know if this is within your role, is this really expected of you. Sometimes that's really tough." – Participant M4, Middle Cohort
		"One of the first realisations as a houseman is that you realise a lot of stuff that you learned in medical school didn't really equip you for the day to day working as a doctor." – Participant S6, senior cohort
		"[As a medical officer], I felt at least I needed to be a little bit more independent in decision-making, which would be different from being a house officer, where there was always a medical officer to turn to and say, 'I don't know what to do.'" – Participant S7, senior cohort
Individual Impression of work as a junior doctor	High stakes; reckoning with mistakes and limitations	"I guess the first low point was my first patient [who] died. That was really quite a terrible experience after up till now it's still in my mind; I still have his name in my mind, I still know exactly what happened I know which ward, which bed [...] the first death is what you will never forget." – Participant S3, senior cohort
		"Well, I think the main thing that made it traumatic was first of all [...] you actually were dealing with medicine. You are dealing with people in pain, you're dealing [with] people who are, you know, who are frightened and they were worried. You're dealing with some children who, you knew were terminal, and you know, the pain and, and it's really there in front of you." – Participant S6, senior cohort
		"There's also difficulty when, when you make certain mistakes and the consequences [...] hopefully they don't have lasting impact, but some of them do. And trying to learn from that and move on is sometimes can be, can be a struggle. Yeah, because it can potentially be like something that comes back to haunt you, you know, if a similar situation comes up." – Participant J7, junior cohort
Individual–institutional Physical and mental demands of being a junior doctor	Fatigue and stress	"[Things feel] a bit futile at times. [...] When a patient [accumulates] a certain cluster of comorbidities, or they have a certain social circumstance tied in with those comorbidities, no matter what you do for them—and you can give them the correct treatment... y'all do everything correctly, evidence-based, and you get them well and out the hospital... but within a few weeks [or] a month or so, you probably see them back in the hospital again." – Participant J7, junior cohort
		"Ahhh, the mental stress, I suppose, and the physical stress. I have friends who are on calls they get migraines and vomiting in the toilets. [...] You're so tired, you haven't eaten, you haven't peed, you haven't showered, you haven't brushed your teeth. But you just have to keep going because there's this whole list of things that needs to be done." – Participant M6, middle cohort

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		I think by the time you get to about 12[pm] to 2[pm], 12[pm] to 3[pm], that's the time when it's like a big struggle to stay awake. And that's when a lot of mistakes happen [...] But there're pharmacists also counter checking your work. So that's a bit of a safeguard. And of course, the nurses will also look through the meds and make sure that it makes sense for the plan. – Participant J7, junior cohort
Individual–institutional Physical and mental demands of being a junior doctor	Impact on patient care	"If you're rushed, you're just thinking about the next thing that needs to be done, the next thing that's waiting for you are the next call that's going to come and all that [...] Whereas if you really have that time to sit and talk, [and] just spend that time interacting [with that] patient or that family member, then yeah, it makes a big difference. Yeah." – Participant M11, middle cohort The whole year I was just on survival mode. [...] It's a shame because I feel that your housemanship year [is] actually a very good opportunity for you to learn to relearn a lot of basics, [because in medical school, you never] really fully grasp all these concepts [like] clerking a patient and doing all the procedures until you are forced to do it, especially at night, but it's a pity because the schedule was back then it was so packed that I didn't feel like I had time to really sit down and reflect on my cases to learn." – Participant M9, middle cohort
Individual–institutional Relationships outside of work	Sacrifice and compromise	"Hardly ever saw anybody because we were doing 1 in 3 [calls]. So as I used to say, no social life for the duration of the traineeship." – Participant S4, senior cohort "Family? I think I'm non-existent to them." – Participant M4, middle cohort "I mean, in that period of time, I got married as well. So it's like that. I remember what my boss told me at that time, 'Okay, you're great, you got a 1-week honeymoon, take any more time and I'll have to cancel your posting.' He was kidding of course, but that having been said, it was a rule that in a posting the most you can get off is 1 week." – Participant S2, senior cohort