

SUPPLEMENTARY FILE 3. LIST OF EXCLUDED STUDIES

Excluded studies

Study	Reason for exclusion
1 Arnold, J.; Tango, J.; Walker, I.; Waranch, C.; McKamie, J.; Poonja, Z.; Messman, A. An Evidence-based, Longitudinal Curriculum for Resident Physician Wellness: The 2017 Resident Wellness Consensus Summit. <i>West J Emerg Med.</i> 2018 Mar; <i>19</i> :337–341.	Mismatch with inclusion criteria
2 Baker, R.G. Governance, policy and system-level efforts to support safer healthcare. <i>Healthc. Q.</i> 2014 , <i>17</i> , 21–6.	Wrong focus
3 Baylor Scott and White Medical Center—Temple. House Staff Handbook [PDF]. January 2018. Available online: https://www.bswhealth.med/education/Documents/temple/house-staff-handbook.pdf	Mismatch with inclusion criteria
4 Bell, S.K.; Moorman, D.W.; Delbanco, T. Improving the patient, family, and clinician experience after harmful events: the "when things go wrong" curriculum. <i>Acad. Med.</i> 2010 , <i>85</i> , 1010–1017.	Mismatch with inclusion criteria
5 Berman, L.; Rialon, K.L.; Mueller, C.M.; Ottosen, M.; Weintraub, A.; Coakley, B.; Brandt, M.L.; Heiss, K. Supporting recovery after adverse events: An essential component of surgeon well-being. <i>J. Pediatr. Surg.</i> 2021 , doi: 10.1016/j.jpedsurg.2020.12.031.	Mismatch with inclusion criteria
6 Biggs, S.; Waggett, H.B.; Shabbir, J. Impact of surgical complications on the operating surgeon. <i>Colorectal. Dis.</i> 2020 , <i>22</i> , 1169–1174.	Mismatch with inclusion criteria
7 Brunelli, M.V.; Estrada, S.; Celano, C. Cross-Cultural Adaptation and Psychometric Evaluation of a Second Victim Experience and Support Tool (SVEST). <i>J. Patient. Saf.</i> 2018 , doi: 10.1097/PTS.0000000000000497.	Wrong focus
8 Bueno Domínguez, M.; Briansó Florencio, M.; Colomé Figuera, L., et al. Experiencia de unidad de soporte a las segundas víctimas (USVIC). <i>Rev. Calid. Asis.</i> 2016 , <i>31</i> , 49–52.	Mismatch with inclusion criteria
9 Butt, T.F.; Cox, A.R.; Lewis, H.; Ferner, R.E. Patient experiences of serious adverse drug reactions and their attitudes to medicines: a qualitative study of survivors of Stevens-Johnson syndrome and toxic epidermal necrolysis in the UK. <i>Drug. Safety.</i> 2011 , <i>34</i> , 319–328.	Mismatch with inclusion criteria
10 Chen, C.C.; Chen, K.; Hsu, C.Y.; Li, Y.C. Developing guideline-based decision support systems using protégé and jess. <i>Comput. Methods. Programs. Biomed.</i> 2011 , <i>102</i> , 288–94.	Mismatch with inclusion criteria
11 Cheng, S.T.; Tsui, P.K.; Lam, J.H. Improving mental health in health care practitioners: randomized controlled trial of a gratitude intervention. <i>J. Consult. Clin. Psychol.</i> 2015 , <i>83</i> , 177–186.	Wrong focus
12 Christoffersen, L.; Teigen, J.; Rønningstad, C. Following-up midwives after adverse incidents: How front-line management practices help second victims. <i>Midwifery.</i> 2020 , <i>85</i> , 102669.	Wrong focus
13 Clancy, C.M. Alleviating "second victim" syndrome: how we should handle patient harm. <i>J. Nurs. Care. Qual.</i> 2012 <i>27</i> , 1–5.	Mismatch with the inclusion criteria

14	Choi, N.; McGoldrick, J.; Borgetti, S. Creating debriefing sessions for perceived medical errors in residency: a step towards wellness. <i>J. Gen. Intern. Med.</i> 2017 , <i>32</i> , 83–808.	Full-text not available
15	Christoffersen, L.; Teigen, J.; Rønningstad, C. Following-up midwives after adverse incidents: How front-line management practices help second victims. <i>Midwifery</i> . 2020 , <i>85</i> , 102669.	Wrong focus
16	Chung AS, Smart J, Zdradzinski M, Roth S, Gende A, Conroy K, Battaglioli N. Educator Toolkits on Second Victim Syndrome, Mindfulness and Meditation, and Positive Psychology: The 2017 Resident Wellness Consensus Summit. <i>West. J. Emerg. Med.</i> 2018 , <i>19</i> , 327–331.	Mismatch with inclusion criteria
17	Daniels, R.G.; McCorkle, R. Design of an evidence-based “second victim” curriculum for nurse anesthetists. <i>AANA. J.</i> 2016 , <i>84</i> , 107–113.	Full-text not available
18	Devencenzi, T., O’Keefe, J. To err is human: supporting the patient care provider in the aftermath of an unanticipated adverse clinical outcome. <i>Int. J. Emerg. Ment. Health.</i> 2006 , <i>8</i> , 131–135.	Full-text not available
19	de Wit, M.E.; Marks, C.M.; Natterman, J.P.; Wu AW. Supporting second victims of patient safety events: shouldn't these communications be covered by legal privilege? <i>J. Law. Med. Ethics.</i> 2013 , <i>41</i> , 852–8.	Wrong focus
20	Edrees H.; Brock, D.M.; Wu, A.W.; McCotter, P.I.; Hofeldt, R.; Shannon, S.E.; Gallagher, T.H.; White, A.A. The experiences of risk managers in providing emotional support for health care workers after adverse events. <i>J. Healthc. Risk. Manag.</i> 2016 , <i>35</i> , 14–21.	Wrong focus
21	Edrees, H.H.; Morlock, L.; Wu, A.W. Do Hospitals Support Second Victims? Collective Insights From Patient Safety Leaders in Maryland. <i>Jt. Comm. J. Qual. Patient. Saf.</i> 2017 , <i>43</i> , 471–483.	Wrong focus
22	Edrees, H.H.; Wu, A.W. Does One Size Fit All? Assessing the Need for Organizational Second Victim Support Programs. <i>J. Patient. Saf.</i> 2017 , doi: 10.1097/PTS.0000000000000321.	Wrong focus
23	Egger, E. It pays for hospitals to support programs that help control physician stress. <i>Health. Care. Strateg. Manage.</i> 2000 , <i>18</i> , 18–9.	Mismatch with inclusion criteria
24	Epstein, R.M.; Krasner, M.S. Physician resilience: what it means, why it matters, and how to promote it. <i>Acad. Med.</i> 2013 , <i>3</i> , 301–303.	Mismatch with inclusion criteria
25	Finney, R.E.; Torbenson, V.E.; Riggan, K.A.; Weaver, A.L.; Long, M.E.; Allyse, M.A.; Rivera-Chiauszi, E.Y. Second victim experiences of nurses in obstetrics and gynaecology: A Second Victim Experience and Support Tool Survey. <i>J. Nurs. Manag.</i> 2020 , doi: 10.1111/jonm.13198.	Mismatch with inclusion criteria
26	Gamble, B.; Gamble, K.J. A systems approach to address the impact of second victim phenomenon. <i>Health. Serv. Manage. Res.</i> 2020 , doi: 10.1177/0951484820971455.	Mismatch with inclusion criteria
27	Gatzert, M.; Wobbe, A.; York, L. <i>We Care Team: Caring for the Care Giver</i> . Barnes-Jewish Hospital: St. Louis, MO, USA, 2015.	Full-text not available
28	Gomes, C.A. Practitioner application: RISE: Exploring Volunteer Retention and Sustainability of a Second Victim Support Program. <i>J. Healthc. Manag.</i> 2021 , <i>66</i> , 31–32.	Mismatch with inclusion criteria
29	Graham, P.; Zerbi, G.; Norcross, W.; Montross-Thomas, L.; Lobbetael, L.; Davidson, J. Testing of A Caregiver Support Team. <i>Explore. (NY)</i> . 2019 , <i>15</i> , 19–26.	Mismatch with inclusion criteria

30	Hall, L.W.; Scott, S.D. The second victim of adverse health care events. <i>Nurs. Clin. North. Am.</i> 2012 , <i>47</i> , 383–93.	Wrong focus
31	Han, K.; Bohnen, J.D.; Peponis, T.; Martinez, M.; Nandan, A.; Yeh, D.D.; Lee, J.; Demoya, M.; Velmahos, G.; Kaafarani, H.M.A. The Surgeon as the Second Victim? Results of the Boston Intraoperative Adverse Events Surgeons' Attitude (BISA) Study. <i>J. Am. Coll. Surg.</i> 2017 , <i>224</i> , 1048–1056.	Wrong focus
32	Harrison, R.; Wu, A. Critical incident stress debriefing after adverse patient safety events. <i>Am. J. Manag. Care.</i> 2017 , <i>23</i> , 310–312.	Mismatch with inclusion criteria
33	Hauk L. Support strategies for health care professionals who are second victims. <i>AORN. J.</i> 2018 , <i>107</i> , P7–P9.	Wrong focus
34	Health PEI. Critical Incident Staff Support (CISS) Managers' Toolkit. Version December 2014. Available online: http://www.gov.pe.ca/photos/original/src_ciss_tkit.pdf	Mismatch with inclusion criteria
35	Huang, H.; Chen, J.; Xiao, M.; Cao, S.; Zhao, Q. Experiences and responses of nursing students as second victims of patient safety incidents in a clinical setting: a mixed methods study. <i>J. Nurs. Manag.</i> 2020 , doi: 10.1111/jonm.13085.	Mismatch with inclusion criteria
36	Heard, G.C.; Thomas, R.D.; Sanderson, P.M. In the Aftermath: Attitudes of Anesthesiologists to Supportive Strategies After an Unexpected Intraoperative Patient Death. <i>Anesth. Analg.</i> 2016 , <i>122</i> , 1614–1624.	Wrong focus
37	Hoysted, C.; Jobson, L.; Alisic, E. A pilot randomized controlled trial evaluating a web-based training program on pediatric medical traumatic stress and trauma-informed care for emergency department staff. <i>Psychol. Serv.</i> 2019 , <i>16</i> , 38–47.	Wrong focus
38	Joesten, L.; Cipparrone, N.; Okuno-Jones, S.; DuBose, E.R. Assessing the perceived level of institutional support for the second victim after a patient safety event. <i>J Patient Saf.</i> 2015 , <i>11</i> , 73–78.	Mismatch with inclusion criteria
39	Johnson, B. Code Lavender: initiating holistic rapid response at the Cleveland Clinic. <i>Beginnings.</i> 2014 , <i>34</i> , 10–11.	Full-text not available
40	Kable, A.K.; Spigelman, A.D. Why clinicians involved with adverse events need much better support. <i>IJHG.</i> 2018 , <i>23</i> , 312–315.	Wrong focus
41	Kerkman, T.; Dijkman, L.M.; Baas, M.A.M.; Evers, R.; van Pampus, M.G.; Stramrood, C.A.I. Traumatic Experiences and the Midwifery Profession: A Cross-Sectional Study Among Dutch Midwives. <i>J. Midwifery. Womens. Health.</i> 2019 , <i>64</i> , 435–442.	Wrong focus
42	Khan, A.; Vinson, A.E. Physician Well-Being in Practice. <i>Anesth. Analg.</i> 2020 , <i>131</i> , 1359–1369.	Mismatch with inclusion criteria
43	Kim, E.M.; Kim, S.A.; Lee, J.R.; Burlison, J.D.; Oh, E.G. Psychometric Properties of Korean Version of the Second Victim Experience and Support Tool (K-SVEST). <i>J. Patient. Saf.</i> 2020 , <i>16</i> , 179–186.	Mismatch with inclusion criteria
44	Kruper, A.; Domeyer-Klenske, A.; Treat, R.; Pilarski, A.; Kaljo, K. Secondary Traumatic Stress in Ob-Gyn: A Mixed Methods Analysis Assessing Physician Impact and Needs. <i>J Surg Educ.</i> 2020 , doi: 10.1016/j.jsurg.2020.08.038.	Mismatch with inclusion criteria
45	Lazarus, A. Traumatized by practice: PTSD in physicians. <i>J. Med. Pract. Manage.</i> 2014 , <i>30</i> , 131–134.	Mismatch with inclusion criteria

46	Langham, M.R. Commentary on supporting recovery after adverse events: An essential component of surgeon well-being. <i>J. Pediatr. Surg.</i> 2021 , doi: 10.1016/j.jpedsurg.2021.01.006.	Mismatch with inclusion criteria
47	Loren, D.J.; Garbutt, J.; Dunagan, W.C.; Bommarito, K.M.; Ebers, A.G.; Levinson, W.; Waterman, A.D.; Fraser, V.J.; Summy, E.A.; Gallagher, T.H. Risk managers, physicians, and disclosure of harmful medical errors. <i>Jt. Comm. J. Qual. Patient. Saf.</i> 2010 , <i>36</i> , 101–108.	Wrong focus
48	Lynch, G. <i>Operational Report of the Critical Incident Stress Management Program of First Nations and Inuit Health Branch</i> . Wingate Consulting: Kanata, Ontario, Canada, 2004.	Full-text not available
49	Margulies, S.L.; Benham, J.; Liebermann, J.; Amdur, R.; Gaba, N.; Keller, J. Adverse Events in Obstetrics: Impacts on Providers and Staff of Maternity Care. <i>Cureus.</i> 2020 , <i>12</i> , e6732.	Mismatch with inclusion criteria
50	Manser, T. Managing the aftermath of critical incidents: meeting the needs of health-care providers and patients. <i>Best. Pract. Res. Clin. Anaesthesiol.</i> 2011 , <i>25</i> , 169–179.	Wrong focus
51	Marmon, L.M.; Heiss, K. Improving surgeon wellness: The second victim syndrome and quality of care. <i>Semin. Pediatr. Surg.</i> 2015 , <i>24</i> , 315–318.	Wrong focus
52	McDaniel, L.R.; Morris, C. The Second Victim Phenomenon: How Are Midwives Affected?. <i>J. Midwifery. Womens. Health.</i> 2020 , <i>65</i> , 503–511.	Mismatch with inclusion criteria
53	McGinley, P. MITSS: Supporting Patients and Families for More Than a Decade [Internet]. 2013. Available online: https://www.psgh.com/analysis/mitss-supporting-patients-and-families-for-more-than-a-decade/ (accessed April 24, 2020)	Wrong focus
54	McNeely, E. The consequences of job stress for nurses' health: time for a check-up. <i>Nurs. Outlook.</i> 2005 , <i>53</i> , 291–299.	Wrong focus
55	Millenson, M.L. The silence. <i>Health. Affairs.</i> 2003 , <i>22</i> , 103–112.	Wrong focus
56	Mira, J.J.; Lorenzo, S.; Carrillo, I.; Ferrús, L.; Pérez-Pérez, P.; Iglesias, F.; Silvestre, C.; Olivera, G.; Zavala, E.; Nuño-Solinís, R.; et al.; Research Group on Second and Third Victims. Interventions in health organisations to reduce the impact of adverse events in second and third victims. <i>BMC. Health. Serv. Res.</i> 2015 , <i>15</i> , 341.	Wrong focus
57	Moffatt-Bruce, S.D.; Nguyen, M.C.; Steinberg, B.; Holliday, S.; Klatt, M. Interventions to Reduce Burnout and Improve Resilience: Impact on a Health System's Outcomes. <i>Clin. Obstet. Gynecol.</i> 2019 , <i>62</i> , 432–443.	Mismatch with inclusion criteria
58	Mok, W.Q.; Chin, G.F.; Yap, S.F.; Wang W. A cross-sectional survey on nurses' second victim experience and quality of support resources in Singapore. <i>J Nurs Manag.</i> 2020 , <i>28</i> , 286–293.	Wrong focus
59	Monteverde S. [Affrontare le "secondo vittime" come compito etico organizzativo]. 2017	Wrong focus
60	Nicol, N. Support for "second victims". <i>Am. J. Health. Syst. Pharm.</i> 2015 , <i>72</i> , 523.	Mismatch with inclusion criteria
61	Olson, K.; Marchalik, D.; Farley, H.; Dean, S.M.; Lawrence, E.C.; Hamidi, M.S.; Rowe, S.; McCool, J.M.; O'Donovan, C.A.; Micek, M.A.; Stewart, M.T. Organizational strategies to reduce physician burnout and improve	Wrong focus

professional fulfillment. <i>Curr. Probl. Pediatr. Adolesc. Health. Care.</i> 2019 , <i>49</i> , 100664.	
62 Paparella, S. Caring for the caregiver: moving beyond the finger pointing after an adverse event. <i>J. Emerg. Nurs.</i> 2011 , <i>37</i> , 263–265.	Wrong focus
63 Plews-Ogan, M.; May, N.; Owens, J. Ardelt, M.; Shapiro, J.; Bell, S.K. Wisdom in Medicine: What Helps Physicians After a Medical Error? <i>Acad. Med.</i> 2016 , <i>91</i> , 233–241.	Wrong focus
64 Pratt, S.D.; Jachna, B.R. Care of the clinician after an adverse event. <i>Int. J. Obstet. Anesth.</i> 2015 , <i>24</i> , 54–63.	Wrong focus
65 Quillivan, R.R.; Burlison, J.D.; Browne, E.K.; Scott, S.D.; Hoffman, J.M. Patient Safety Culture and the Second Victim Phenomenon: Connecting Culture to Staff Distress in Nurses. <i>Jt. Comm. J. Qual. Patient. Saf.</i> 2016 , <i>42</i> , 377–386.	Wrong focus
66 Reiser Crelieu, F.; Schwappach, D.; Schwendimann, R. Supporting health professionals after an adverse event in Swiss hospitals: a cross-sectional study. <i>Swiss. Med. Wkly.</i> 2020 , <i>150</i> , w20278.	Wrong focus
67 Rivera-Chiauzzi, E.Y.; Smith, H.A.; Moore-Murray, T.; Lee, C.; Goffman, D.; Bernstein, P.S.; Chazotte, C. Healing Our Own: A Randomized Trial to Assess Benefits of Peer Support. <i>J. Patient. Saf.</i> 2020 , doi: 10.1097/PTS.0000000000000771.	Full-text not available
68 Rowe M. Doctors' responses to medical errors. <i>Crit. Rev. Oncol. Hematol.</i> 2004 , <i>52</i> , 147–163.	Mismatch with inclusion criteria
69 Russ, M.J. Correlates of the Third Victim Phenomenon. <i>Psychiatr. Q.</i> 2017 , <i>88</i> , 917–920.	Wrong focus
70 Santomauro, C.M.; Kalkman C.J.; Dekker, S.W.A. Second victims, organizational resilience and the role of hospital administration. <i>Journal of Hospital Administration</i> 2014 , <i>3</i> , 95–103.	Mismatch with inclusion criteria
71 Schiechl, B.; Hunger, M.S.; Schwappach, D.L.; Schmidt, C.E.; Padosch, S.A. "Second victim": "Critical incident stress management" in der klinischen Medizin [Second victim : Critical incident stress management in clinical medicine]. <i>Anaesthesist.</i> 2013 , <i>62</i> , 734–741.	Wrong focus
72 Schröder, K.; Janssens, A.; Hvidt, E.A. Adverse events as transitional markers - Using liminality to understand experiences of second victims. <i>Soc. Sci. Med.</i> 2021 , <i>268</i> , 113598.	Mismatch with inclusion criteria
73 Schwappach, D.L.B. [Nach dem Behandlungsfehler Umgang mit Patienten, Angehörigen und dem involvierten Personal]. 2014 Schwappach DL. Nach dem Behandlungsfehler : Umgang mit Patienten, Angehörigen und dem involvierten Personal [In the aftermath of medical error: caring for patients, family, and the healthcare workers involved]. <i>Bundesgesundheitsblatt Gesundheitsforschung Gesundheitsschutz.</i> 2015 , <i>58</i> , 80–86.	Wrong focus
74 Seys, D.; Scott, S.; Wu, A.; Van Gerven, E.; Vleugels, A.; Euwema, M.; Panella, M.; Conway, J.; Sermeus, W.; Vanhaecht, K. Supporting involved health care professionals (second victims) following an adverse health event: a literature review. <i>Int. J. Nurs. Stud.</i> 2013 , <i>50</i> , 678–87.	Wrong focus
75 Shanafelt, T.D.; Lightner, D.J.; Conley, C.R.; Petrou, S.P.; Richardson, J.W.; Schroeder, P.J.; Brown, W.A. An Organization Model to Assist Individual	Wrong focus

Physicians, Scientists, and Senior Health Care Administrators With Personal and Professional Needs. <i>Mayo Clin Proc.</i> 2017 , <i>92</i> , 1688–1696.	
76 Shanafelt, T.D.; Bradley, K.A.; Wipf, J.E.; Back, A.L. Burnout and self-reported patient care in an internal medicine residency program. <i>Ann Intern Med.</i> 2002 , <i>136</i> , 358–67.	Wrong focus
77 Shapiro, J.; Whittemore, A.; Tsen, L.C. Instituting a culture of professionalism: the establishment of a center for professionalism and peer support. <i>Jt Comm J Qual Patient Saf.</i> 2014 , <i>40</i> , 168–177.	Wrong focus
78 Shapiro, J.; Galowitz, P. Peer Support for Clinicians: A Programmatic Approach. <i>Acad. Med.</i> 2016 , <i>91</i> , 1200–1204.	Mismatch with inclusion criteria
79 Shor, S.; Tal, O.; Maymon, R. [The second victim: treating the health care providers]. <i>Harefuah.</i> 2017 , <i>156</i> , 38–40.	Full-text not available
80 Sirriyeh, R. Coping with medical error: the case of the health professional. Available online: https://www.academia.edu/1723799/Coping_with_medical_error_the_case_of_the_health_professional	Mismatch with inclusion criteria
81 Stewart, K.; Lawton, R.; Harrison, R. Supporting "second victims" is a system-wide responsibility. <i>BMJ.</i> 2015 , <i>350</i> , h2341.	Mismatch with inclusion criteria
82 Stone M. Second victim support programs for healthcare organizations. <i>Nurs Manage.</i> 2020 , <i>51</i> , 38–45.	Full-text not available
83 Stone M. Second Victim Support: Nurses' Perspectives of Organizational Support After an Adverse Event. <i>J. Nurs. Adm.</i> 2020 , <i>50</i> , 521–525.	Mismatch with inclusion criteria
84 Stone, R.S.B. Code Lavender: A tool for staff support. <i>Nursing.</i> 2018 , <i>48</i> , 15–17.	Wrong focus
85 Strametz, R.; Raspe, M.; Ettl, B.; Huf, W.; Pitz, A. Handlungsempfehlung: Stärkung der Resilienz von Behandelnden und Umgang mit Second Victims im Rahmen der COVID-19-Pandemie zur Sicherung der Leistungsfähigkeit des Gesundheitswesens [Recommended actions: Reinforcing clinicians' resilience and supporting second victims during the COVID-19 pandemic to maintain capacity in the healthcare system]. <i>Zentralbl. Arbeitsmed. Arbeitsschutz. Ergon.</i> 2020 , doi: 10.1007/s40664-020-00405-7.	Wrong focus
86 Taifoori, L.; Valiee, S. Understanding or nurses' reactions to errors and using this understanding to improve patient safety. <i>Ornac. J.</i> 2015 , <i>33</i> , 13–22, 32–42.	Wrong focus
87 Tan, R.; Luo, K.; Hu, D.; Zhao, Y.; Han, Y.; Xu, K. Inpatient Suicide Second Victim Experience and Support Tool: Psychometric properties of a scale for nurses who experienced inpatient suicide at Chinese general hospitals. <i>Nurs. Health. Sci.</i> 2020 , <i>22</i> , 1111–1120.	Mismatch with inclusion criteria
88 Tanabe K, Janosy N, Vogeli J, Brainard A, Whitney G. Caring for the caregiver following an adverse event. <i>Paediatr. Anaesth.</i> 2021 , <i>31</i> , 61–67.	Mismatch with inclusion criteria
89 The AHSN Network. Second Victim Support Unit Scoping Project. Available online: https://www.ahsnnetwork.com/case-study/second-victim-support-unit	Wrong focus

90 Tobin, W.N. MITSSL Supporting patients and families for more than a decade. 2013. Available online: https://www.psqh.com/analysis/mitss-supporting-patients-and-families-for-more-than-a-decade/	Wrong focus
91 Vaithilingam, N.; Jain, S.; Davies, D. Helping the helpers: debriefing following an adverse incident. <i>Obstet. Gynaecol.</i> 2008 , <i>10</i> , 251–256.	Wrong focus
92 van Buschbach, S.; van der Meer, C.A.I.; Dijkman, L.; Olf, M.; Bakker, A. Web-Based Peer Support Education Program for Health Care Professionals. <i>Jt. Comm. J. Qual. Patient. Saf.</i> 2020 , <i>46</i> , 227–231.	Wrong focus
93 Van Gerven, E.; Seys, D.; Panella, M.; Sermeus, W.; Euwema, M.; Federico, F.; Kenney, L.; Vanhaecht, K. Involvement of health-care professionals in an adverse event: the role of management in supporting their workforce. <i>Pol. Arch. Med. Wewn.</i> 2014 , <i>124</i> , 313–320.	Wrong focus
94 Van Gerven, E.; Bruyneel, L.; Panella, M.; Euwema, M.; Sermeus, W.; Vanhaecht, K. Psychological impact and recovery after involvement in a patient safety incident: a repeated measures analysis. <i>BMJ. Open.</i> 2016 , <i>6</i> , e011403.	Wrong focus
95 van Steijn, M.E.; Scheepstra, K.W.F.; Yasar, G.; Olf, M.; de Vries, M.C.; van Pampus, M.G. Occupational well-being in pediatricians—a survey about work-related posttraumatic stress, depression, and anxiety. <i>Eur. J. Pediatr.</i> 2019 , <i>178</i> , 681–693.	Wrong focus
96 Vinson, A.E.; Randel, G. Peer support in anesthesia: turning war stories into wellness. <i>Curr. Opin. Anaesthesiol.</i> 2018 , <i>31</i> , 382–387.	Mismatch with inclusion criteria
97 Wahlberg, Å.; Högberg, U.; Emmelin, M. Left alone with the emotional surge - A qualitative study of midwives' and obstetricians' experiences of severe events on the labour ward. <i>Sex. Reprod. Healthc.</i> 2020 , <i>23</i> , 100483.	Mismatch with inclusion criteria
98 Washington Patient Safety Coalition (WPSC). Northwest Second Victim Programs. Foundation for Health Care Quality: Seattle, WA, USA, 2013.	Full-text not available
99 West, C.P.; Dyrbye, L.N.; Rabatin, J.T.; Call, T.G.; Davidson, J.H.; Multari, A.; Romanski, S.A.; Hellyer, J.M.; Sloan, J.A.; Shanafelt, T.D. Intervention to promote physician well-being, job satisfaction, and professionalism: a randomized clinical trial. <i>JAMA. Intern. Med.</i> 2014 , <i>174</i> , 527–533.	Wrong focus
100 White, A.A.; Brock, D.M.; McCotter, P.I.; Hofeldt, R.; Edrees, H.H.; Wu, A.W.; Shannon, S.; Gallagher, T.H. Risk managers' descriptions of programs to support second victims after adverse events. <i>J. Healthc. Risk. Manag.</i> 2015 , <i>34</i> , 30–40.	Wrong focus
101 White, A.; Waterman, A.; McCotter P.I.; Boyle, D.; Gallagher, T. Supporting health care workers after medical error: considerations for health care leaders. <i>J. Clin. Outcomes. Manag.</i> 2008 , <i>15</i> , 240–247.	Wrong focus
102 Whittle, S.N.; Horton-Deutsch, S. Reducing the Second Victim Phenomenon: Healing Our Healers With Caritas Coaching. <i>Holist. Nurs. Pract.</i> 2019 , <i>33</i> , 360–365.	Mismatch with inclusion criteria
103 Winning, A.M.; Merandi, J.; Rausch, J.R.; Liao, N.; Hoffman, J.M.; Burlison, J.D.; Gerhardt, C.A. Validation of the Second Victim Experience and Support Tool-Revised In the Neonatal Intensive Care Unit. <i>J. Patient. Saf.</i> 2020 , doi: 10.1097/PTS.0000000000000659.	Wrong focus

104 Zhang, X.; Chen, J.; Lee, S.Y. Psychometric Testing of the Chinese Version of Second Victim Experience and Support Tool. <i>J. Patient. Saf.</i> 2020 , doi: 10.1097/PTS.0000000000000674.	Wrong focus
105 No authors listed. Study Identifies Opportunities to Improve Support Programs for Clinicians Involved in Adverse Events. <i>Home. Healthc. Now.</i> 2016 , <i>34</i> , 7.	Mismatch with inclusion criteria