

## **Appendix 1: List of search terms**

Within cumulative patient profile, progress notes, consults, diagnostic tests, and referrals:

“Mya(e)sthenia”, “mya(e)sthenic”, “gravis”, “neuromuscular junction/jxn”, “NM junction/jxn”, “thymoma”, “thymus tumor”, “thymectomy”, “single fibre (er)”, “repetitive nerve stimulation”, “rep stim”, “RNS”, “AchRAb”, “acetylcholine (Ach) receptor antibodies”, “anti-MuSK (muscle specific kinase) antibodies”, “mestinon”, “pyridostigmine”, “tensilon”, “fatig(u)ability”, “fatig(u)able”

Cumulative Patient Profile Only:

“Fatig(u)ability”, “fatig(u)able”, “diplopia”, “ptosis”

## **Appendix 2: Method for case determination by chart abstractors**

“Definite” MG: Cases where an unequivocal diagnosis of MG was made by the family physician or a specialist, or unequivocal report of positive acetylcholine receptor or anti-MuSK antibodies.

“Possible” MG: Scored if patients under investigation for MG, due to unexplained symptoms including (but not limited to) diplopia, ptosis, bulbar weakness or dyspnea, or fatiguable muscle weakness. Those with isolated abnormal single-fibre EMG (SFEMG), repetitive nerve stimulation, or thymoma were also labelled as “possible”.

“No” MG: Scored if myasthenia gravis was excluded or an alternative explanation for symptoms was documented.

“Unclassified”: If there was no mention of MG in the patient’s chart.