# CONSORT-EHEALTH (V 1.6.1) -Submission/Publication Form

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating web-based and Internet-based applications/interventions, including mobile interventions, electronic games (incl multiplayer games), social media, certain telehealth applications, and other interactive and/or networked electronic applications. Some of the items (e.g. all subitems under item 5 - description of the intervention) may also be applicable for other study designs.

The goal of the CONSORT EHEALTH checklist and guideline is to be

- a) a guide for reporting for authors of RCTs,
- b) to form a basis for appraisal of an ehealth trial (in terms of validity)

CONSORT-EHEALTH items/subitems are MANDATORY reporting items for studies published in the Journal of Medical Internet Research and other journals / scientific societies endorsing the checklist.

Items numbered 1., 2., 3., 4a., 4b etc are original CONSORT or CONSORT-NPT (nonpharmacologic treatment) items.

Items with Roman numerals (i., ii, iii, iv etc.) are CONSORT-EHEALTH extensions/clarifications.

As the CONSORT-EHEALTH checklist is still considered in a formative stage, we would ask that you also RATE ON A SCALE OF 1-5 how important/useful you feel each item is FOR THE PURPOSE OF THE CHECKLIST and reporting guideline (optional).

Mandatory reporting items are marked with a red \*.

In the textboxes, either copy & paste the relevant sections from your manuscript into this form - please include any quotes from your manuscript in QUOTATION MARKS, or answer directly by providing additional information not in the manuscript, or elaborating on why the item was not relevant for this study.

YOUR ANSWERS WILL BE PUBLISHED AS A SUPPLEMENTARY FILE TO YOUR PUBLICATION IN JMIR AND ARE CONSIDERED PART OF YOUR PUBLICATION (IF ACCEPTED). Please fill in these questions diligently. Information will not be copyedited, so please use proper spelling and grammar, use correct capitalization, and avoid abbreviations.

DO NOT FORGET TO SAVE AS PDF\_AND\_ CLICK THE SUBMIT BUTTON SO YOUR ANSWERS ARE IN OUR DATABASE !!!

Citation Suggestion (if you append the pdf as Appendix we suggest to cite this paper in the caption):

Eysenbach G, CONSORT-EHEALTH Group

CONSORT-EHEALTH: Improving and Standardizing Evaluation Reports of Web-based and

Mobile Health Interventions

J Med Internet Res 2011;13(4):e126 URL: http://www.jmir.org/2011/4/e126/

doi: 10.2196/jmir.1923

PMID: 22209829

\* Required

Your name \*

First Last

Liaw Sok Ying

Primary Affiliation (short), City, Country \*

University of Toronto, Toronto, Canada

National University of Singapore, Singapore

Your e-mail address \*

abc@gmail.com

nurliaw@nus.edu.sg

Title of your manuscript \*

Provide the (draft) title of your manuscript.

Nurse-Physician Communication Team Training in Virtual Reality Versus Live Simulations: Randomized Controlled Study

# Name of your App/Software/Intervention \*

If there is a short and a long/alternate name, write the short name first and add the long name in brackets.

CREATIVE (Create Real-time Experience And To

# **Evaluated Version (if any)**

e.g. "V1", "Release 2017-03-01", "Version 2.0.27913"

Your answer

# Language(s) \*

What language is the intervention/app in? If multiple languages are available, separate by comma (e.g. "English, French")

English

# URL of your Intervention Website or App

e.g. a direct link to the mobile app on app in appstore (itunes, Google Play), or URL of the website. If the intervention is a DVD or hardware, you can also link to an Amazon page.

Your answer

URL of an image/screenshot (optional)

Your answer

Accessibility * Can an enduser access the intervention presently?
access is free and open
access only for special usergroups, not open
access is open to everyone, but requires payment/subscription/in-app purchases
app/intervention no longer accessible
Other:
Primary Medical Indication/Disease/Condition * e.g. "Stress", "Diabetes", or define the target group in brackets after the condition, e.g. "Autism (Parents of children with)", "Alzheimers (Informal Caregivers of)"
Not applicable
Not applicable
Not applicable  Primary Outcomes measured in trial *
Primary Outcomes measured in trial *
Primary Outcomes measured in trial * comma-separated list of primary outcomes reported in the trial
Primary Outcomes measured in trial * comma-separated list of primary outcomes reported in the trial
Primary Outcomes measured in trial * comma-separated list of primary outcomes reported in the trial  Nurse-physician communication skills perform

Recommended "Dose" *  What do the instructions for users say on how often the app should be used?  Approximately Daily  Approximately Weekly  Approximately Monthly  Approximately Yearly  "as needed"  Other: Once off simulation  Approx. Percentage of Users (starters) still using the app as recommended a months *  unknown / not evaluated  0-10%  11-20%	
<ul> <li>Approximately Daily</li> <li>Approximately Weekly</li> <li>Approximately Monthly</li> <li>Approximately Yearly</li> <li>"as needed"</li> <li>Other: Once off simulation</li> </ul> Approx. Percentage of Users (starters) still using the app as recommended a months * <ul> <li>unknown / not evaluated</li> <li>0-10%</li> <li>11-20%</li> </ul>	
Approximately Weekly Approximately Monthly Approximately Yearly "as needed" Other: Once off simulation  Approx. Percentage of Users (starters) still using the app as recommended 3 months *  unknown / not evaluated  0-10% 11-20%	
Approximately Monthly Approximately Yearly "as needed" Other: Once off simulation  Approx. Percentage of Users (starters) still using the app as recommended 3 months *  unknown / not evaluated  0-10% 11-20%	
<ul> <li>Approximately Yearly</li> <li>"as needed"</li> <li>Other: Once off simulation</li> </ul> Approx. Percentage of Users (starters) still using the app as recommended 3 months * <ul> <li>unknown / not evaluated</li> <li>0-10%</li> <li>11-20%</li> </ul>	
<ul> <li>"as needed"</li> <li>Other: Once off simulation</li> </ul> Approx. Percentage of Users (starters) still using the app as recommended 3 months * <ul> <li>unknown / not evaluated</li> <li>0-10%</li> <li>11-20%</li> </ul>	
<ul> <li>Other: Once off simulation</li> <li>Approx. Percentage of Users (starters) still using the app as recommended 3 months *</li> <li>unknown / not evaluated</li> <li>0-10%</li> <li>11-20%</li> </ul>	
Approx. Percentage of Users (starters) still using the app as recommended 3 months *  unknown / not evaluated  0-10%  11-20%	
3 months *  unknown / not evaluated  0-10%  11-20%	
3 months *  unknown / not evaluated  0-10%  11-20%	
3 months *  unknown / not evaluated  0-10%  11-20%	
<ul><li>0-10%</li><li>11-20%</li></ul>	ed after
O 11-20%	
21-30%	
31-40%	
41-50%	
51-60%	
61-70%	
71%-80%	
81-90%	
91-100%	
Other:	

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Overall, was the app/intervention effective? *							
yes: all primary outcomes were significantly better in intervention group vs control							
partly: SOME primary outcomes were significantly better in intervention group vs control							
o no statistically significant difference between control and intervention							
outcomes potentially harmful: control was significantly better than intervention in one or more							
inconclusive: more research is needed							
Other:							
Article Preparation Status/Stage *							
Article Preparation Status/Stage *  At which stage in your article preparation are you currently (at the time you fill in this form)							
At which stage in your article preparation are you currently (at the time you fill in this form)							
At which stage in your article preparation are you currently (at the time you fill in this form)  not submitted yet - in early draft status							
At which stage in your article preparation are you currently (at the time you fill in this form)  not submitted yet - in early draft status  not submitted yet - in late draft status, just before submission							
At which stage in your article preparation are you currently (at the time you fill in this form)  not submitted yet - in early draft status  not submitted yet - in late draft status, just before submission  submitted to a journal but not reviewed yet							
At which stage in your article preparation are you currently (at the time you fill in this form)  not submitted yet - in early draft status  not submitted yet - in late draft status, just before submission  submitted to a journal but not reviewed yet  submitted to a journal and after receiving initial reviewer comments							
At which stage in your article preparation are you currently (at the time you fill in this form)  onot submitted yet - in early draft status  not submitted yet - in late draft status, just before submission  submitted to a journal but not reviewed yet  submitted to a journal and after receiving initial reviewer comments  submitted to a journal and accepted, but not published yet							

Journal *  If you already know where you will submit this paper (or if it is already submitted), please provide the journal name (if it is not JMIR, provide the journal name under "other")						
not submitted yet / unclear where I will submit this						
Journal of Medical Internet Research (JMIR)						
JMIR mHealth and UHealth						
JMIR Serious Games						
JMIR Mental Health						
JMIR Public Health						
JMIR Formative Research						
Other JMIR sister journal						
Other:						
Is this a full powered effectiveness trial or a pilot/feasibility trial? *						
Is this a full powered effectiveness trial or a pilot/feasibility trial? *  Pilot/feasibility						
Pilot/feasibility  Fully powered						
O Pilot/feasibility						
Pilot/feasibility  Fully powered  Manuscript tracking number *  If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at						

#### TITLE AND ABSTRACT

### 1a) TITLE: Identification as a randomized trial in the title

### 1a) Does your paper address CONSORT item 1a? \*

I.e does the title contain the phrase "Randomized Controlled Trial"? (if not, explain the reason under "other")

yes

Other:

# 1a-i) Identify the mode of delivery in the title

Identify the mode of delivery. Preferably use "web-based" and/or "mobile" and/or "electronic game" in the title. Avoid ambiguous terms like "online", "virtual", "interactive". Use "Internet-based" only if Intervention includes non-web-based Internet components (e.g. email), use "computer-based" or "electronic" only if offline products are used. Use "virtual" only in the context of "virtual reality" (3-D worlds). Use "online" only in the context of "online support groups". Complement or substitute product names with broader terms for the class of products (such as "mobile" or "smart phone" instead of "iphone"), especially if the application runs on different platforms.

subitem not at all important

essential

# Does your paper address subitem 1a-i? \*

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Team Training in Virtual Reality Versus Live Simulations"

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ำล-แ	) Non-web-base	d components	s or impo	ortant c	O-Interv	entions	in title
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Mention non-web-based components or important co-interventions in title, if any (e.g., "with telephone support").

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# Does your paper address subitem 1a-ii?

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Team Training in Virtual Reality Versus Live Simulations"

# 1a-iii) Primary condition or target group in the title

Mention primary condition or target group in the title, if any (e.g., "for children with Type I Diabetes") Example: A Web-based and Mobile Intervention with Telephone Support for Children with Type I Diabetes: Randomized Controlled Trial

subitem not at all important

# Does your paper address subitem 1a-iii? \*

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Nurse-Physician

# 1b) ABSTRACT: Structured summary of trial design, methods, results, and conclusions

NPT extension: Description of experimental treatment, comparator, care providers, centers, and blinding status.

# 1b-i) Key features/functionalities/components of the intervention and comparator in the METHODS section of the ABSTRACT

Mention key features/functionalities/components of the intervention and comparator in the abstract. If possible, also mention theories and principles used for designing the site. Keep in mind the needs of systematic reviewers and indexers by including important synonyms. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

subitem not at all important OOOO essential

# Does your paper address subitem 1b-i? \*

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Undergraduate medical and nursing students who were randomly assigned to undertake team training using virtual reality or live simulations."

#### 1b-ii) Level of human involvement in the METHODS section of the ABSTRACT

Clarify the level of human involvement in the abstract, e.g., use phrases like "fully automated" vs. "therapist/nurse/care provider/physician-assisted" (mention number and expertise of providers involved, if any). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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### Does your paper address subitem 1b-ii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

# 1b-iii) Open vs. closed, web-based (self-assessment) vs. face-to-face assessments in the METHODS section of the ABSTRACT

Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic or a closed online user group (closed usergroup trial), and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment). Clearly say if outcomes were self-assessed through questionnaires (as common in web-based trials). Note: In traditional offline trials, an open trial (open-label trial) is a type of clinical trial in which both the researchers and participants know which treatment is being administered. To avoid confusion, use "blinded" or "unblinded" to indicated the level of blinding instead of "open", as "open" in web-based trials usually refers to "open access" (i.e. participants can self-enrol). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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### Does your paper address subitem 1b-iii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Participants from both groups were tested on their communication performances through team-based simulation assessments. Their teamwork attitudes were evaluated using interprofessional attitude surveys

essential

### 1b-iv) RESULTS section in abstract must contain use data

Report number of participants enrolled/assessed in each group, the use/uptake of the intervention (e.g., attrition/adherence metrics, use over time, number of logins etc.), in addition to primary/secondary outcomes. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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# Does your paper address subitem 1b-iv?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Controlled trial study was conducted with 120 undergraduate medical and nursing students"

# 1b-v) CONCLUSIONS/DISCUSSION in abstract for negative trials

Conclusions/Discussions in abstract for negative trials: Discuss the primary outcome - if the trial is negative (primary outcome not changed), and the intervention was not used, discuss whether negative results are attributable to lack of uptake and discuss reasons. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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## Does your paper address subitem 1b-v?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Our study outcomes did not show an inferiority of team training using virtual reality when compared with live simulations, which supports the potential use of virtual reality to substitute conventional simulations for communication team training.

#### INTRODUCTION

# 2a) In INTRODUCTION: Scientific background and explanation of rationale

# 2a-i) Problem and the type of system/solution

Describe the problem and the type of system/solution that is object of the study: intended as stand-alone intervention vs. incorporated in broader health care program? Intended for a particular patient population? Goals of the intervention, e.g., being more cost-effective to other interventions, replace or complement other solutions? (Note: Details about the intervention are provided in "Methods" under 5)

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# Does your paper address subitem 2a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Effective communication remains a challenge between nurses and physicians due to training differences and embedded workplace cultures." "Simulation, which is commonly used as a teaching method for health care team training, provides experiential opportunities in patient-care situations for teams to work together, practice their roles, and develop a shared understanding of a team and its associated tasks." " In addition, such teaching has been primarily within uni-professional groups of medical and nursing students as there were challenges in bringing them together to learn structured communication interprofessionally" "Simulations in a virtual environment can overcome time and space constraints and are gaining popularity among health care educators. Being accessible anytime and anywhere, virtual simulations provide the flexibility to be integrated into curricula and have the scalability to train large numbers of learners."

# 2a-ii) Scientific background, rationale: What is known about the (type of) system

Scientific background, rationale: What is known about the (type of) system that is the object of the study (be sure to discuss the use of similar systems for other conditions/diagnoses, if appropriate), motivation for the study, i.e. what are the reasons for and what is the context for this specific study, from which stakeholder viewpoint is the study performed, potential impact of findings [2]. Briefly justify the choice of the comparator.

subitem not at all important

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# Does your paper address subitem 2a-ii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"With advances in computer learning technology, virtual reality provides a viable platform for team-based simulation training that can address logistical challenges implicit in traditional simulation, such as physical location availability and scheduling for different groups of students"

# 2b) In INTRODUCTION: Specific objectives or hypotheses

# Does your paper address CONSORT subitem 2b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

we aimed to evaluate the effectiveness of virtual reality in comparison with live simulations. on medical and nursing students' communication skill performances and teamwork attitudes."

#### **METHODS**

# 3a) Description of trial design (such as parallel, factorial) including allocation ratio

## Does your paper address CONSORT subitem 3a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"We conducted a prospective RCT with a pretest-posttest study design". "the participants were randomly assigned to a virtual or simulation group. They were grouped into interprofessional teams of 2 medical students and 2 nursing students to undertake the study intervention".

# 3b) Important changes to methods after trial commencement (such as eligibility criteria), with reasons

# Does your paper address CONSORT subitem 3b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

There are no changes to the methods after trial commencement.

# 3b-i) Bug fixes, Downtimes, Content Changes

Bug fixes, Downtimes, Content Changes: ehealth systems are often dynamic systems. A description of changes to methods therefore also includes important changes made on the intervention or comparator during the trial (e.g., major bug fixes or changes in the functionality or content) (5-iii) and other "unexpected events" that may have influenced study design such as staff changes, system failures/downtimes, etc. [2].

subitem not at all important

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### Does your paper address subitem 3b-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No bug fixes, down time and content changes after commencement.

# 4a) Eligibility criteria for participants

# Does your paper address CONSORT subitem 4a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"We used social media to recruit volunteers who were undertaking their third or fourth year of medicine or nursing courses in a local university. This group of students was targeted as they had undertaken acute care management in their respective courses."

### 4a-i) Computer / Internet literacy

Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified.

subitem not at all important essential

# Does your paper address subitem 4a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

essential

### 4a-ii) Open vs. closed, web-based vs. face-to-face assessments:

Open vs. closed, web-based vs. face-to-face assessments: Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic, and clarify if this was a purely webbased trial, or there were face-to-face components (as part of the intervention or for assessment), i.e., to what degree got the study team to know the participant. In online-only trials, clarify if participants were quasi-anonymous and whether having multiple identities was possible or whether technical or logistical measures (e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.

5 subitem not at all important

# Does your paper address subitem 4a-ii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"We used social media to recruit volunteers who were undertaking their third or fourth year of medicine or nursing courses in a local university." "The participants in the virtual and live simulation groups underwent 3 hours of team training on nurse-physician communication conducted in the university's center for health care simulation. After obtaining written informed consent from participants, they were directed to a 20-minute computer-based lesson on communication skill strategies." "The participants in the virtual group remained in the computer laboratory to undertake the virtual reality simulation. Together with their teammate, a facilitator, and a simulated patient, they logged into the 3D virtual environment using their avatar roles."

# 4a-iii) Information giving during recruitment

Information given during recruitment. Specify how participants were briefed for recruitment and in the informed consent procedures (e.g., publish the informed consent documentation as appendix, see also item X26), as this information may have an effect on user self-selection, user expectation and may also bias results.

essential subitem not at all important

# Does your paper address subitem 4a-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Information regarding the study conduct, procedures and participant's rights were provided in accordance to the institutional review board requirements.

# 4b) Settings and locations where the data were collected

### Does your paper address CONSORT subitem 4b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

" conducted in the university's center for health care simulation"

# 4b-i) Report if outcomes were (self-)assessed through online questionnaires

Clearly report if outcomes were (self-)assessed through online questionnaires (as common in web-based trials) or otherwise.

subitem not at all important essential

### Does your paper address subitem 4b-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"We administered the Attitudes Toward Interprofessional Health Care Team (ATHCT) and Interprofessional Socialization and Valuing Scale (ISVS) questionnaires before (baseline), immediately after (posttest), and 2 months after (follow-up) the simulation training to measure teamwork attitudes." "After the study intervention, the participants from both groups were brought to a room for team-based simulation assessments." " The assessors rated the team communication performances independently using a validated team communication scale"

### 4b-ii) Report how institutional affiliations are displayed

Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer rates, use, and reactions with regards to an intervention.(Not a required item - describe only if this may bias results)

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subitem not at all important

essential

## Does your paper address subitem 4b-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

All participants and assessor are affiliated to the university, the avatar uniforms are the same as the university's uniform therefore with this familiarity no unexpected reaction is expected.

5) The interventions for each group with sufficient details to allow replication, including how and when they were actually administered

# 5-i) Mention names, credential, affiliations of the developers, sponsors, and owners

Mention names, credential, affiliations of the developers, sponsors, and owners [6] (if authors/evaluators are owners or developer of the software, this needs to be declared in a "Conflict of interest" section or mentioned elsewhere in the manuscript).

subitem not at all important

# essential

essential

# Does your paper address subitem 5-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The authors would like to thank the health care students for their participation in this study. We also thank the staff of the Centre for Healthcare Simulation for supporting this study. Lastly, we would like to thank the National University Health System, Research Support Unit, for providing editing services to this manuscript. This study was supported by the Singapore Millennium Foundation Research Grant. Ethical approval has been granted by NUS-IRB, Ref No: S-17107."

# 5-ii) Describe the history/development process

Describe the history/development process of the application and previous formative evaluations (e.g., focus groups, usability testing), as these will have an impact on adoption/use rates and help with interpreting results.

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subitem not at all important

### Does your paper address subitem 5-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A pilot study was performed that showed the usability and feasibility of CREATIVE in supporting social interactions and collaborative practices among diverse groups of health care students [13]. Another study was conducted on CREATIVE that supported the integration of cognitive tools and virtual simulations to develop shared mental models for the delivery of optimal clinical teamwork [14]."

### 5-iii) Revisions and updating

Revisions and updating. Clearly mention the date and/or version number of the application/intervention (and comparator, if applicable) evaluated, or describe whether the intervention underwent major changes during the evaluation process, or whether the development and/or content was "frozen" during the trial. Describe dynamic components such as news feeds or changing content which may have an impact on the replicability of the intervention (for unexpected events see item 3b).

subitem not at all important essential

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# Does your paper address subitem 5-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No major changes were made during the evaluation process.

#### 5-iv) Quality assurance methods

Provide information on quality assurance methods to ensure accuracy and quality of information provided [1], if applicable.

subitem not at all important essential

### Does your paper address subitem 5-iv?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not Applicable

# 5-v) Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used

Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used. Replicability (i.e., other researchers should in principle be able to replicate the study) is a hallmark of scientific reporting.

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subitem not at all important

essential

# Does your paper address subitem 5-v?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

screenshots were provided

# 5-vi) Digital preservation

Digital preservation: Provide the URL of the application, but as the intervention is likely to change or disappear over the course of the years; also make sure the intervention is archived (Internet Archive, webcitation.org, and/or publishing the source code or screenshots/videos alongside the article). As pages behind login screens cannot be archived, consider creating demo pages which are accessible without login.

subitem not at all important

essential

# Does your paper address subitem 5-vi?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

# 5-vii) Access

Access: Describe how participants accessed the application, in what setting/context, if they had to pay (or were paid) or not, whether they had to be a member of specific group. If known, describe how participants obtained "access to the platform and Internet" [1]. To ensure access for editors/reviewers/readers, consider to provide a "backdoor" login account or demo mode for reviewers/readers to explore the application (also important for archiving purposes, see vi).

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subitem not at all important







essential

# Does your paper address subitem 5-vii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Application is provided by the researcher at no cost.

# 5-viii) Mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework

Describe mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework [6] used to design them (instructional strategy [1], behaviour change techniques, persuasive features, etc., see e.g., [7, 8] for terminology). This includes an in-depth description of the content (including where it is coming from and who developed it) [1]," whether [and how] it is tailored to individual circumstances and allows users to track their progress and receive feedback" [6]. This also includes a description of communication delivery channels and - if computermediated communication is a component - whether communication was synchronous or asynchronous [6]. It also includes information on presentation strategies [1], including page design principles, average amount of text on pages, presence of hyperlinks to other resources, etc. [1].

subitem not at all important essential

# Does your paper address subitem 5-viii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Table 1 describes the tasks performed by the participants in virtual reality and live simulations"

# 5-ix) Describe use parameters

Describe use parameters (e.g., intended "doses" and optimal timing for use). Clarify what instructions or recommendations were given to the user, e.g., regarding timing, frequency, heaviness of use, if any, or was the intervention used ad libitum.

subitem not at all important essential

### Does your paper address subitem 5-ix?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Both virtual and live simulation are once off

# 5-x) Clarify the level of human involvement

Clarify the level of human involvement (care providers or health professionals, also technical assistance) in the e-intervention or as co-intervention (detail number and expertise of professionals involved, if any, as well as "type of assistance offered, the timing and frequency of the support, how it is initiated, and the medium by which the assistance is delivered". It may be necessary to distinguish between the level of human involvement required for the trial, and the level of human involvement required for a routine application outside of a RCT setting (discuss under item 21 - generalizability).

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subitem not at all important

essential

### Does your paper address subitem 5-x?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Each scenario lasted about

15 to 20 minutes and was followed up by a 30-minute debriefing. The debriefing was led by a facilitator using a facilitator guide that focused on the application of communication strategies"

### 5-xi) Report any prompts/reminders used

Report any prompts/reminders used: Clarify if there were prompts (letters, emails, phone calls, SMS) to use the application, what triggered them, frequency etc. It may be necessary to distinguish between the level of prompts/reminders required for the trial, and the level of prompts/reminders for a routine application outside of a RCT setting (discuss under item 21 - generalizability).

> 1 3 5

subitem not at all important

essential

# Does your paper address subitem 5-xi? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

# 5-xii) Describe any co-interventions (incl. training/support)

Describe any co-interventions (incl. training/support): Clearly state any interventions that are provided in addition to the targeted eHealth intervention, as ehealth intervention may not be designed as stand-alone intervention. This includes training sessions and support [1]. It may be necessary to distinguish between the level of training required for the trial, and the level of training for a routine application outside of a RCT setting (discuss under item 21 – generalizability.

> 3 5

subitem not at all important

essential

# Does your paper address subitem 5-xii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

# 6a) Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed

## Does your paper address CONSORT subitem 6a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

" In this study, by incorporating communication tools into a team training program, we aimed to evaluate the effectiveness of virtual reality in comparison with live simulations on medical and nursing students' communication skill performances and teamwork attitudes."

6a-i) Online questionnaires: describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed

If outcomes were obtained through online questionnaires, describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed [9].

subitem not at all important essential

Does your paper address subitem 6a-i?

Copy and paste relevant sections from manuscript text

not applicable

# 6a-ii) Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored

Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored (logins, logfile analysis, etc.). Use/adoption metrics are important process outcomes that should be reported in any ehealth trial.

subitem not at all important







|--|

essential

# Does your paper address subitem 6a-ii?

Copy and paste relevant sections from manuscript text

not applicable

# 6a-iii) Describe whether, how, and when qualitative feedback from participants was obtained

Describe whether, how, and when qualitative feedback from participants was obtained (e.g., through emails, feedback forms, interviews, focus groups).

subitem not at all important









essential

# Does your paper address subitem 6a-iii?

Copy and paste relevant sections from manuscript text

Not applicable

6b) Any changes to trial outcomes after the trial commenced, with reasons

# Does your paper address CONSORT subitem 6b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

There were no changes to trial outcomes

# 7a) How sample size was determined

NPT: When applicable, details of whether and how the clustering by care provides or centers was addressed

# 7a-i) Describe whether and how expected attrition was taken into account when calculating the sample size

Describe whether and how expected attrition was taken into account when calculating the sample size.

1 5

subitem not at all important

essential

# Does your paper address subitem 7a-i?

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"We calculated the sample size based on a medium effect size of 0.50 for an independent sample t test [15]. Cohen's (1992) [15] sample size table reported that a sample size of 64 participants per group (total participants=128) would be sufficient to achieve a predefined power of 0.80 at a 5% level of significance (2-sided) in detecting a medium effect size." A 20% attrition rate was taken into account.

# 7b) When applicable, explanation of any interim analyses and stopping guidelines

### Does your paper address CONSORT subitem 7b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

### 8a) Method used to generate the random allocation sequence

NPT: When applicable, how care providers were allocated to each trial group

### Does your paper address CONSORT subitem 8a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Divided by health care courses taken and year of study, the participants were randomly assigned to a virtual or simulation group." Each student is tag to a number according to course and year of study and randomly assigned by computer generated numbers.

# 8b) Type of randomisation; details of any restriction (such as blocking and block size)

### Does your paper address CONSORT subitem 8b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Divided by health care courses taken and year of study, the participants were randomly assigned to a virtual or simulation group." Each student is tag to a number according to course and year of study and randomly assigned by computer generated numbers.

9) Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned

Does your paper address CONSORT subitem 9? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

10) Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions

Does your paper address CONSORT subitem 10? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

1 main research coordinator enrolled and assigned the participants accordingly.

11a) If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how

NPT: Whether or not administering co-interventions were blinded to group assignment

# 11a-i) Specify who was blinded, and who wasn't

Specify who was blinded, and who wasn't. Usually, in web-based trials it is not possible to blind the participants [1, 3] (this should be clearly acknowledged), but it may be possible to blind outcome assessors, those doing data analysis or those administering co-interventions (if any).

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subitem not at all important

essential

# Does your paper address subitem 11a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

#### "We sent the

recorded videos for rating to a clinician and an academic staff member whom were blinded to the groupings. " Facilitators could not be blinded to the groupings while students were blinded until the point of intervention.

# 11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator"

Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator".

subitem not at all important essential

# Does your paper address subitem 11a-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Students do not know which was the intervention of interest or comparator.

### 11b) If relevant, description of the similarity of interventions

(this item is usually not relevant for ehealth trials as it refers to similarity of a placebo or sham intervention to a active medication/intervention)

### Does your paper address CONSORT subitem 11b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Table 1 describes the tasks performed by the participants in virtual reality and live simulations. After an orientation, the participants and facilitators gathered in a physical or virtual tutorial room for a briefing on the learning objectives and activities. In both groups, the participants in each team were randomly paired up (1 medicine student and 1 nursing student) and took turns role-playing and observing to participate in two simulation scenarios"

# 12a) Statistical methods used to compare groups for primary and secondary outcomes

NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

# Does your paper address CONSORT subitem 12a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"We applied descriptive statistics, chi-square tests, and t tests to analyze the demographic characteristics of the study population. We computed a paired sample t test to examine significant changes between the baseline and posttest performance scores and an independent sample t test to determine differences in the posttest scores between the groups. We performed a repeated measures analysis of variance (ANOVA) for the ATHCT and ISVS scores."

# 12a-i) Imputation techniques to deal with attrition / missing values

Imputation techniques to deal with attrition / missing values: Not all participants will use the intervention/comparator as intended and attrition is typically high in ehealth trials. Specify how participants who did not use the application or dropped out from the trial were treated in the statistical analysis (a complete case analysis is strongly discouraged, and simple imputation techniques such as LOCF may also be problematic [4]).

subitem not at all important

essential

# Does your paper address subitem 12a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable as study mainly look into team performance and teamwork attitude

# 12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses

# Does your paper address CONSORT subitem 12b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"We applied descriptive statistics, chi-square tests, and t tests to analyze the demographic characteristics of the study population. We computed a paired sample t test to examine significant changes between the baseline and posttest performance scores and an independent sample t test to determine differences in the posttest scores between the groups. We performed a repeated measures analysis of variance (ANOVA) for the ATHCT and ISVS scores."

# X26) REB/IRB Approval and Ethical Considerations [recommended as subheading under "Methods"] (not a CONSORT item)

X26-i) Comment on ethics committee approval								
1 2 3 4 5								
subitem not at all important	0	0	0	0	•	essential		
Does your paper address subitem X26-i?  Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  "Ethical approval has been granted by NUS-IRB, Ref No: S-17-107."								
x26-ii) Outline informed consent procedures  Outline informed consent procedures e.g., if consent was obtained offline or online (how? Checkbox, etc.?), and what information was provided (see 4a-ii). See [6] for some items to be included in informed consent documents.								
subitem not at all important	0	0	0	•	0	essential		

# Does your paper address subitem X26-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"After obtaining written informed consent from participants, they were directed to a 20-minute computer-based lesson on communication skill strategies"

# X26-iii) Safety and security procedures

Safety and security procedures, incl. privacy considerations, and any steps taken to reduce the likelihood or detection of harm (e.g., education and training, availability of a hotline)

5

subitem not at all important

essential

# Does your paper address subitem X26-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Our study has very low risk

### **RESULTS**

13a) For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome

NPT: The number of care providers or centers performing the intervention in each group and the number of patients treated by each care provider in each center

#### Does your paper address CONSORT subitem 13a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A randomized controlled trial study was conducted with 120 undergraduate medical and nursing students who were randomly

assigned to undertake team training using virtual reality or live simulations. The participants from both groups were tested on

their communication performances through team-based simulation assessments. Their teamwork attitudes were evaluated using

interprofessional attitude surveys that were administered before, immediately after, and 2 months after the study interventions"

# 13b) For each group, losses and exclusions after randomisation, together with reasons

Does your paper address CONSORT subitem 13b? (NOTE: Preferably, this is shown in a CONSORT flow diagram) \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"In both groups, the participants in each team were randomly paired up (1 medicine student and 1 nursing student) and took turns role-playing and observing to participate in two simulation scenarios. "

#### 13b-i) Attrition diagram

Strongly recommended: An attrition diagram (e.g., proportion of participants still logging in or using the intervention/comparator in each group plotted over time, similar to a survival curve) or other figures or tables demonstrating usage/dose/engagement.

subitem not at all important

essential

#### Does your paper address subitem 13b-i?

Copy and paste relevant sections from the manuscript or cite the figure number if applicable (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

## 14a) Dates defining the periods of recruitment and follow-up

## Does your paper address CONSORT subitem 14a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

## 14a-i) Indicate if critical "secular events" fell into the study period

Indicate if critical "secular events" fell into the study period, e.g., significant changes in Internet resources available or "changes in computer hardware or Internet delivery resources"

5

subitem not at all important









essential

## Does your paper address subitem 14a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

#### 14b) Why the trial ended or was stopped (early)

#### Does your paper address CONSORT subitem 14b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

# 15) A table showing baseline demographic and clinical characteristics for each

NPT: When applicable, a description of care providers (case volume, qualification, expertise, etc.) and centers (volume) in each group

#### Does your paper address CONSORT subitem 15? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The majority were female (81, 67.5%), Chinese (105, 87.5%), and an average of 22.17 years of age (SD 2.07). There were no significant differences in the baseline characteristics, including age (P=.06), gender (P=.17), year of study (P=.85), and ethnicity (P=.94) between the virtual and simulation groups (Table 2). This supported the homogeneity of the participants between the 2 groups."

## 15-i) Report demographics associated with digital divide issues

In ehealth trials it is particularly important to report demographics associated with digital divide issues, such as age, education, gender, social-economic status, computer/Internet/ehealth literacy of the participants, if known.

subitem not at all important

essential

## Does your paper address subitem 15-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The majority were female (81, 67.5%),

Chinese (105, 87.5%), and an average of 22.17 years of age (SD 2.07). There were no significant differences in the baseline characteristics, including age (P=.06), gender (P=.17), year of study (P=.85), and ethnicity (P=.94) between the virtual and simulation groups (Table 2). This supported the homogeneity of the participants between the 2 groups.

16) For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups

# 16-i) Report multiple "denominators" and provide definitions

Report multiple "denominators" and provide definitions: Report N's (and effect sizes) "across a range of study participation [and use] thresholds" [1], e.g., N exposed, N consented, N used more than x times, N used more than y weeks, N participants "used" the intervention/comparator at specific pre-defined time points of interest (in absolute and relative numbers per group). Always clearly define "use" of the intervention.

subitem not at all important









essential

#### Does your paper address subitem 16-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

## 16-ii) Primary analysis should be intent-to-treat

Primary analysis should be intent-to-treat, secondary analyses could include comparing only "users", with the appropriate caveats that this is no longer a randomized sample (see 18-i).

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subitem not at all important









essential

## Does your paper address subitem 16-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)

# Does your paper address CONSORT subitem 17a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

All analysis in this study uses 95% CI

17a-i) Presentation of process outcomes such as metrics of use and intensity of	f
use	

In addition to primary/secondary (clinical) outcomes, the presentation of process outcomes such as metrics of use and intensity of use (dose, exposure) and their operational definitions is critical. This does not only refer to metrics of attrition (13-b) (often a binary variable), but also to more continuous exposure metrics such as "average session length". These must be accompanied by a technical description how a metric like a "session" is defined (e.g., timeout after idle time) [1] (report under item 6a).

subitem not at all important

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essential

## Does your paper address subitem 17a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

17b) For binary outcomes, presentation of both absolute and relative effect sizes is recommended

# Does your paper address CONSORT subitem 17b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

18) Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory

## Does your paper address CONSORT subitem 18? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

## 18-i) Subgroup analysis of comparing only users

A subgroup analysis of comparing only users is not uncommon in ehealth trials, but if done, it must be stressed that this is a self-selected sample and no longer an unbiased sample from a randomized trial (see 16-iii).

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subitem not at all important









essential

# Does your paper address subitem 18-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

## 19) All important harms or unintended effects in each group

(for specific guidance see CONSORT for harms)

## Does your paper address CONSORT subitem 19? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable as study is of low risk of harm

19-i	) Include	privacy	/ breaches,	technical	problems
1 / 1	, ii iciaac	pilvac	, Dicaciico,	tool ii iioai	PIODICITIO

Include privacy breaches, technical problems. This does not only include physical "harm" to participants, but also incidents such as perceived or real privacy breaches [1], technical problems, and other unexpected/unintended incidents. "Unintended effects" also includes unintended positive effects [2].

5

subitem not at all important

essential

## Does your paper address subitem 19-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

# 19-ii) Include qualitative feedback from participants or observations from staff/researchers

Include qualitative feedback from participants or observations from staff/researchers, if available, on strengths and shortcomings of the application, especially if they point to unintended/unexpected effects or uses. This includes (if available) reasons for why people did or did not use the application as intended by the developers.

subitem not at all important

essential

# Does your paper address subitem 19-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

#### DISCUSSION

# 22) Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence

NPT: In addition, take into account the choice of the comparator, lack of or partial blinding, and unequal expertise of care providers or centers in each group

# 22-i) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use)

Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use).

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subitem not at all important

essential

Does your paper address subitem 22-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The outcomes in this RCT study did not show the inferiority of computer-based virtual reality on teamwork attitudes and communication skill performances when compared with live simulations. These outcomes were consistent with earlier studies [19,20], providing more evidence to support its potential use in substituting conventional team-based simulations. In this virtual reality team training, we incorporated design elements that mimicked live simulations for the experiential learning and the ability to support multiusers, including students, a simulated patient, and a facilitator to come together for collaborative learning."

22-ii) Highlight unanswered r Highlight unanswered new questions	•			future	research	n
	1	2	3	4	5	
subitem not at all important	0	0	0	•	0	essential
Does your paper address sulted to be considered and paste relevant sections from indicate direct quotes from your man information not in the ms, or briefly end of the section of the ms and investigated and the section of the sectio	m the mar uscript), c explain wh te how v lification e of virtu ded learr	nuscript (in or elaborat y the item rirtual n workpla ual reality	e on this it is not app	tem by pro licable/re	oviding add	litional
20) Trial limitations, address relevant, multiplicity of anal	•	ırces of	potenti	ial bias,	impreci	sion, and, if
20-i) Typical limitations in eh Typical limitations in ehealth trials: P look at a multiplicity of outcomes, ind intervention/usability issues, biases to	articipant creasing r	s in ehealt isk for a T	pe I error.	Discuss I	piases due	to non-use of the
subitem not at all important	0	0	0	•	0	essential

#### Does your paper address subitem 20-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Our long-term evaluation of virtual reality on the retention of learning was limited to measuring changes in interprofessional attitudes 2 months after the intervention, with significant improvements in attitudes toward interprofessional socialization but not in attitudes toward interprofessional health care teams. Caution has to be taken on the validity of self-reported measures. Nonetheless, the opportunities to engage in social interactions in virtual reality could have improved students' attitudes toward interprofessional socialization."

#### 21) Generalisability (external validity, applicability) of the trial findings

NPT: External validity of the trial findings according to the intervention, comparators, patients, and care providers or centers involved in the trial

## 21-i) Generalizability to other populations

Generalizability to other populations: In particular, discuss generalizability to a general Internet population, outside of a RCT setting, and general patient population, including applicability of the study results for other organizations

subitem not at all important essential

#### Does your paper address subitem 21-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

# 21-ii) Discuss if there were elements in the RCT that would be different in a routine application setting

Discuss if there were elements in the RCT that would be different in a routine application setting (e.g., prompts/reminders, more human involvement, training sessions or other co-interventions) and what impact the omission of these elements could have on use, adoption, or outcomes if the intervention is applied outside of a RCT setting.

1

subitem not at all important







essential

## Does your paper address subitem 21-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

#### OTHER INFORMATION

# 23) Registration number and name of trial registry

## Does your paper address CONSORT subitem 23? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

## 24) Where the full trial protocol can be accessed, if available

Does y	our/	paper	address	CONSORT	subitem	24? *
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Cite a Multimedia Appendix, other reference, or copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable

# 25) Sources of funding and other support (such as supply of drugs), role of funders

## Does your paper address CONSORT subitem 25? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"This study was supported by the Singapore Millennium Foundation Research Grant"

## X27) Conflicts of Interest (not a CONSORT item)

## X27-i) State the relation of the study team towards the system being evaluated

In addition to the usual declaration of interests (financial or otherwise), also state the relation of the study team towards the system being evaluated, i.e., state if the authors/evaluators are distinct from or identical with the developers/sponsors of the intervention.

5

subitem not at all important essential

#### Does your paper address subitem X27-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Conflicts of Interest None declared."

#### About the CONSORT EHEALTH checklist

As a result of using this checklist, did you make changes in your manuscript? \* yes, major changes

yes, minor changes

What were the most important changes you made as a result of using this

none

checklist?

How much time did you spend on going through the checklist INCLUDING making changes in your manuscript \*

5 hours

As a result of using this checklist, do you think your manuscript has improved? *
O yes
O no
Other: the checklist may not apply to many components of this study
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This would involve for example becoming involved in participating in a workshop and writing an "Explanation and Elaboration" document
yes
no
Other:
Any other comments or questions on CONSORT EHEALTH
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