## Survey (Translated from Vietnamese into English)

You are invited to participate in the "Virtual Reality Distance Simulation - A Novel Educational Tool For Neonatal Resuscitation Training In A Middle-Income Country" project, conducted by Dr. Sarah Trinh and Dr. Ryan McAdams, Division of Neonatology, University of Wisconsin-Madison and Dr. Binh Ho, Department of Neonatology, Ho Chi Minh City Children's Hospital. The purpose of this project is to assess the role of Virtual Reality in Distance simulation for Neonatal Resuscitation Training.

If you choose to be in the study, we will ask you to complete a survey. The survey will help us learn more about topic(s). The survey will take about 5 minutes for you to complete. You can skip any survey questions that you do not want to answer. Even if you start the survey, you are not required to complete it. You can stop at any time. All your answers will be confidential and will not be shared with anyone outside the research team. The survey is anonymous, and no one will be able to link your answers back to you. Please do not include your name or other information that could be used to identify you in the survey responses.

If you have any questions about the project, please contact Dr. Sarah Trinh (ntrinh@uwhealth.org). This QI project has been reviewed according to the University of Wisconsin Health Sciences IRB procedures for Exempted Projects.

ELECTRONIC CONSENT: Please select your choice below.

Clicking on the "agree" button below indicates that:

- You have read the above information
- You voluntarily agree to participate
- You are at least 18 years of age

If you do not wish to participate in the QI project, please decline participation by clicking on the "disagree" button.

| Agree |
|-------|
|-------|



## Familiarity with VR

The first questions are about your general experiences with virtual reality, also known as VR.

| Resuscitation Simulation Training Module?   |
|---|
| O Yes   |
| O No  |
|   |
| Do you own a VR headset?  |
| O Yes   |
| O No  |
| About how often do you use your VR headset?   |
| Once a week or more often   |
| O 2 or 3 times a month  |
| Once a month  |
| Once every few months   |
| Once or twice a year, or less often   |
| Module Feedback   |
| The next questions are about your experience with the Virtual Reality Neonatal Resuscitation Simulation Training Module |
| Did you complete the Orientation module during this training session?   |
| O Yes   |
| O No  |
| How useful was the Orientation module in helping you familiarize with the VR environment?                               |
| O Not at all useful   |
| O A little usefu  |

| O Somewhat useful  |
|--|
| O Very useful  |
| O Extremely useful   |
|  |
| Would you want to view the Orientation module again prior to next VR training session?   |
| O Yes  |
| O No   |
| O Unsure   |
|  |
| What was the reason you did not complete the Orientation module?   |
| O I am familiar with VR  |
| O The module was not offered   |
| O Other reasons  |
|  |
|  |
| Please tell us about your reasons  |
| Please tell us about your reasons  |
| Please tell us about your reasons  |
| Please tell us about your reasons  Would you try VR simulation for neonatal resuscitation training again?  |
|  |
| Would you try VR simulation for neonatal resuscitation training again?   |
| Would you try VR simulation for neonatal resuscitation training again?  O Yes  |
| Would you try VR simulation for neonatal resuscitation training again?  O Yes O No   |
| Would you try VR simulation for neonatal resuscitation training again?  O Yes O No   |
| Would you try VR simulation for neonatal resuscitation training again?  Yes  No Unsure  Does VR provide a more realistic experience compared to traditional neonatal                               |
| Would you try VR simulation for neonatal resuscitation training again?  Yes  No  Unsure  Does VR provide a more realistic experience compared to traditional neonatal resuscitation training?      |
| Would you try VR simulation for neonatal resuscitation training again?  Yes  No  Unsure  Does VR provide a more realistic experience compared to traditional neonatal resuscitation training?  Yes |

| Would you recommend                                | VR simulation neona    | tal resuscitation training | to others?             |
|--|------------------------|----------------------------|------------------------|
| O Yes  |                        |                            |                        |
| O No   |                        |                            |                        |
| O Unsure   |                        |                            |                        |
|  |                        |                            |                        |
| How useful do you think                            | VR is as a tool for ne | onatal resuscitation trai  | ning?                  |
| O Not at all useful                                |                        |                            |                        |
| O A little useful                                  |                        |                            |                        |
| O Somewhat useful                                  |                        |                            |                        |
| O Very useful                                      |                        |                            |                        |
| O Extremely useful                                 |                        |                            |                        |
| Did you experience each training experience?       | n of the following sym | nptoms during or as a re   | sult of your VR        |
|  | Yes                    | Maybe                      | No                     |
| Headache   | 0                      | 0                          | 0                      |
| Dizziness  | 0                      | 0                          | 0                      |
| Eye strain   | 0                      | 0                          | 0                      |
| Other symptoms                                     | O                      | O                          | O                      |
| Please tell us more abou                           | ıt your symptoms       |                            |                        |
|  |                        |                            |                        |
| If you experienced any                             | inwanted symptoms      | during vour \/P ovporio    | aca hawlang did tha    |
| If you experienced any ulast after you finished yo | our session?           | duning your vik experier   | ice, now long did they |

O I did not experience any symptoms

| /21/23, 9:51 PM                           | Qualtrics Survey Software |
|---|---------------------------|
| O Immediately after I finished            |                           |
| O Less than 5 minutes                     |                           |
| O 5 to 10 minutes                         |                           |
| O 10 to 15 minutes                        |                           |
| O 15 to 20 minutes                        |                           |
| O 20 to 30 minutes                        |                           |
| O More than 30 minutes                    |                           |
|   |                           |
| Knowledge Assessment                      |                           |
| in a newborn. What does the MR SOPA acros |                           |
| R   |                           |
| S   |                           |
| 0   |                           |
| P   |                           |
| Α   |                           |
|   |                           |
|   |                           |

## **Demographics**

The last questions are about you.

What is your gender?

O Male

O Female

More than 10 years

| Do you have American Neonatal Resuscitation Program (NRP) Certificate?                        |
|---|
| O Yes   |
| O No  |
|   |
| In the last 5 years, how many Neonatal Resuscitation Program classes have you attended?       |
| O None  |
| O 1-2   |
| O 3-5   |
| O More than 5   |
|   |
| In the last 5 years, did you attend any other Neonatal resuscitation training beside NRP?     |
| O Yes   |
| O No  |
|   |
| If yes, please tell us more about the other neonatal resuscitation training you have attended |
|   |
|   |
| Comments  |
|   |
| Do you have any other thoughts on the VR training experience you would like to share?         |
|   |
|   |

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