

# Interpretable Multimodal Temporal Patterns of Trainee Behavior During Patient State Transitions in VR Simulation

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## 1. VR TRAINING EXPERIMENTS

Four different roles including:

These stage labels are scenario-script “phases” in the VR cardiac-arrest case. They mainly encode (1) the patient rhythm / condition and (2) the algorithm branch the team should follow (shockable vs non-shockable), plus sometimes a specific treatment focus.

9 unique stage labels:

- **V-Tach 2D:** Ventricular tachycardia (shockable rhythm) in phase 2, branch D of the scenario state machine; typically represents an alternate protocol path (e.g., instability or non-ideal sequencing) requiring rapid rhythm recognition and shock/CPR coordination.
- **V-Tach 2A.1:** Ventricular tachycardia in phase 2, branch A, step 1; often used to denote the canonical/ideal early shockable-rhythm pathway with prompt defibrillation/cardioversion (depending on pulse) and high-quality CPR.
- **V-Tach 2B.1:** Ventricular tachycardia in phase 2, branch B, step 1; an alternative pathway that may encode delayed or suboptimal decision-making/coordination relative to the canonical branch.
- **Asystole 1D No.1:** Asystole (non-shockable rhythm) in phase 1, branch D; first occurrence of this state in the scenario; expected actions include immediate CPR, epinephrine, and avoidance of defibrillation.
- **V-Fib 4C.1 – AMIO:** Ventricular fibrillation (shockable rhythm) in phase 4, branch C, step 1; a refractory-arrest state where *amiodarone* is indicated in addition to repeated defibrillation and CPR.
- **ROSC 5B – STEMI:** Return of spontaneous circulation (post-arrest care) in phase 5, branch B; STEMI

identified, prompting post-ROSC stabilization, 12-lead ECG interpretation, and escalation (e.g., cath lab activation).

## 2. THEME ANALYSIS UI

The total six diagrams for these six groups

## 3. RESULT 1

## 4. RESULT 2

## 5. RESULT 3

## 6. REFERENCES

**Table 1: Original action and speech event codes extracted from the VR simulation logs and used in this study. Event labels are preserved exactly as recorded in the dataset.**

Modality	Original Event Code	Semantic Name	Description
Action	administered_epinephrine	Epinephrine administration	Administering epinephrine medication to the patient.
Action	ascultate_lungs	Lung auscultation	Auscultating lung sounds to assess airway and ventilation status.
Action	cpr	Chest compressions (CPR)	Performing chest compressions during resuscitation.
Action	perform_bag_mask_pump	Bag-mask ventilation	Providing manual ventilation using a bag-mask device.
Action	pulse_check	Pulse check	Checking the patient's pulse to assess cardiac activity.
Speech	c_dta	Task allocation	Assigning specific tasks or actions to team members.
Speech	c_gta	Role assignment	Assigning or confirming team roles and responsibilities.
Speech	clc_dcb	Directive check-back	Closed-loop confirmation of a directive or instruction (receiver confirms receipt/completion).
Speech	clc_gcb	General check-back	Closed-loop confirmation of general information or status updates.
Speech	jip_ei_q	Information elicitation (questioning)	Requesting information from teammates (e.g., vitals, timing, observations).
Speech	jip_ei	Information evaluation	Interpreting, assessing, or critiquing information shared by teammates.
Speech	jip_si	Information sharing	Providing factual or synthesized information relevant to the situation.
Speech	m_sh	Hypothesis statement	Stating a diagnostic or explanatory hypothesis about the patient's condition.
Speech	sle_scu	Expressing uncertainty	Expressing doubt, concern, or uncertainty about the diagnosis or next steps.