Appendix 1 - BEME Coding Sheet

1	Administrative									
	Refe	erence Number:	Reviewer:							
	Type: Book Comment Conf. Paper/Proceed		☐ Guideline: ☐ Interview ☐ Journal ar ☐ Lecture	ticle No	etter ews on-peer re ffical publ	eview article ication	Report Statistical data e Test(s) Thesis			
	Cita	ation Information: Authors:								
				Vol;Issue;Pages						
	Sea	arch Method:			· ·					
	Jua	Electronic search	☐ Hand sea	rch G	Grey literature		Recommendation			
					,					
2	Eva	Evaluation Methods								
	a	Research design (tick all that a	pply)							
		Non-comparative studies								
		Audit Implied Action-based Case series	Stated Expert of Focus of Historic	group \Box	Stated		Narrative Observation Survey	Implied	Stated	
	If any of the above categories were che		ies were checked, furthe	necked, further define the approach used:						
	Cites evidence w/data		Concep Comme	otual						
		Comparative studies								
		Cross sectional	Implied Stated	Case control	Implied	Stated				
		Single group studies Before & after studies Time series	Implied Stated	Cohort study Prospective Retrospective	Implied	Stated	Trials Non-rand Randomi		Implied Stated	
	Review		Implied Stated							
			Concep	s were checked, further define the approach used: Conceptual Commentary						
		Meta-analysis								
	b	Data collection methods								
	☐ Interview ☐ Observation ☐ Opinion ☐ Patient outcomes ☐ Questionnaire ☐ Data from simulator			☐ MCQ exam /simulation						

3 Expected learning outcomes of intervention or approach (tick all that apply)										
	This section relates to the <i>intended</i> or <i>expected</i> learning outcomes for the educational intervention or educational approach described. This is different from the <i>impact</i> of the study (section 6).									
	Implied Stated Implied Stated Implied Stated Clinical Skills Understanding basic/clinical sciences Appropriate attitudes Appropriate attitudes Patient investigation Appropriate decision making Appropriate decision making Patient management Role of health professional Health promotion Personal development Appropriate information skills Patient safety/reducing errors Appropriate information skills Appropriate information Patient safety/reducing errors Appropriate information Appropriate									
	Please indicate specific skill (i.e., cardiac exam, intubation, venipuncture, etc)									
4	Context (Target Population), if applicable Number of Subjects / Size of Group Country / Location of study									
	Duration of exposure:									
	Frequency of exposure:									
	Level / stage: Pre-college CPD/CME Undergraduate college Higher general other than healthcare professional Medical school Undergraduate other than healthcare professional (early) Residency Undergraduate other than healthcare professional (later) Fellowship Pre-registration/basic professional education									
	Profession: Health sciences Primary care medicine (internal medicine, family medicine, pediatrics, Ob/Gyn) Medicine sub-specialty (cardiology, GI, pulm) Surgery Anesthesia Dentistry Nursing Professions allied to medicine Veterinary									
	Please indicate specific skill (i.e., cardiology, emergency medicine, anesthesiology etc)									
	Certification: High stake (licensing, board certification), requirement for promotion to next level of training Low stake (requirement to pass course, components for all grade/evaluation, etc) Unclear / not applicable									

5	State	Stated aim of study										
	Aim / objective of item		Implied	Stated								
6	Impact of intervention studied Code the level of impact being studied in the item and summarize any results of the intervention at the appropriate level. Note: include both predetermined and unintended outcomes.											
	Kirkpatrick hierarchy											
	Level 1 Participation - covers learners' views on the learning experience, its organization, presentation, content, tea methods, and aspects of the instructional organization, materials, quality of instruction											
	Lev	<i>r</i> el 2a	cal attitudes or									
Level 2b Modification of knowledge/skills - for <i>knowledge</i> , this relates to the acquisition of concepts, procedures for <i>skills</i> this relates to the acquisition of thinking/problem-solving, psychomotor and social skills									res and principles;			
	Lev	<i>r</i> el 3	Behavioral change - documents the transfer of learning to the workplace or willingness of learners to apply new knowledge & skills.									
	Lev	vel 4a	Change in organizational practice - wider changes in the organizational delivery of care, attributable to an education program									
Level 4b Benefits to patient / clients - any improvement in the health & well being of patients/clie educational program.								nts as a direc	t result of an			
7	Rate	evaluatio	on methods		Strongly disagree	Disagree	Uncertain	Agree	Strongly agree			
	1 Ap	propriatenes	s of study/review of	design								
	2 Im	2 Implementation of study/review design										
	3 Ap											
			aluation mothods	if annlicable:	_	_	_					

8	Strength of fin	dings					
				Low — — - 1		3	— — High 4 5
	2 Results ambiguo3 Conclusions can	ions can be drawn. Not sign us, but there appears to be probably be based on the re and very likely to be true quivocal	a trend				
9		escriptors (tick all that ap					
	To provide a concep	tual context of study, please	check the	educational descri	ptors for e	each of the following catego	ries:
	Curriculum:	☐ Community oriented ☐ Core		grated, horizontal grated, vertical		ultiprofessional ptions/special study module	Outcome-based e Problem-based
	Learning:	☐ Clinical ☐ Computer		operative ependent		ectures mulation	☐ Small group ☐ Work-based
	Physical setting:	☐ Classroom ☐ Teaching hospital		oulatory care oratory		aining center linical experience	☐ Distance learning☐ Other
	Assessment:	Feedback	Por	tfolio	Pı	ractical	Written
10	Educational fe	atures and uses of s	imulatio	, ,	,		
				Implied	Stated		
	Driven by valid	curriculum-based education	al need				
	Integrated into	curriculum					
	Outcomes clea	rly defined to learner					
	Authenticity an	d realism (validity) of the sin	nulation				
	Ability to contro	ol learning environment					
	User-friendly fo	or learner					
	User-friendly fo	or instructor					
	The presence of	of feedback					
	Allows indepen	dent learning					
	Opportunity to	change level of difficulty					
		or-based learning					
	High/low degre	e of maintenance					
	Need for suppo	ort of faculty and other perso	nnel				
	A method of do	cumenting learner performa	nce				
	Use at multiple	learner levels					
	Use for multiple	e health-professional catego	ries				
		le variety of clinical condition					
	Suitability for ir	ndividual					
	Suitability for si	mall-group					
	Suitability for la	arge-group learning					
	Role of teacher	clearly defined					
	Document part	•					
	Document leve						
	Opportunity for	repetitive practice					
		ure/use (licensure/certificatio	n,etc)				

Specific features of simulation Indicate type / name of simulator					
Specific capabilities of simulation / simulator (tick all that apply) Simulates bedside findings (heart sounds, respiration) Simulates procedure(endoscopy, intubation) Responds and reacts to user (anesthesia induction, ACLS)					
Documented improvement in learning/performance					
Overall impression of article Please make any additional comments regarding the overall <i>strengths</i> and <i>weaknesses</i> of the article.					