

AWARD NUMBER: W81XWH-17-2-0011

TITLE: Emergency Refreshing of Combat Surgical Skills

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CONTRACTING ORGANIZATION:
University of Maryland, Baltimore
Baltimore, MD 21201

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REPORT DOCUMENTATION PAGE

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1. INTRODUCTION:

This research project aims to maximize healthcare professionals' performance of life saving trauma management cognitive and psychomotor skills by use of near time emergency refreshing interventions. The interventions to be tested consist of (1) pre- and intraoperative video review and (2) intra-operative telementoring assistance. The primary outcome measure is surgeons' performance of 4 critical trauma procedures on cadavers. In addition to testing these specific performance enhancing tools, information into underlying behavioral models of surgeon performance will be studied so that these cognitive models can be used to guide the design of future interventions.

2. KEYWORDS:

Vascular injury, Combat wounds, Surgical training, Education, Surgical intervention, Telementoring, Video review, Skill retention, Error prevention, Error correction

3. **ACCOMPLISHMENTS:** The PI is reminded that the recipient organization is required to obtain prior written approval from the awarding agency grants official whenever there are significant changes in the project or its direction.

What were the major goals of the project?

List the major goals of the project as stated in the approved SOW. If the application listed milestones/target dates for important activities or phases of the project, identify these dates and show actual completion dates or the percentage of completion.

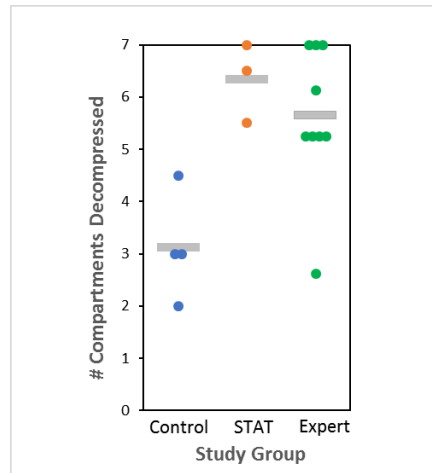
1. Assessment of whether static video refreshing of knowledge or dynamic interaction with a telementor are effective at improving outcome of trauma surgical performance of vascular exposure and fasciotomy versus a no refresher control condition in unpreserved cadavers.
2. Development of video / image tools (video mental review, VMR) for mental review of key steps in the vascular exposure and fasciotomy procedures.
3. Development of telementoring (dynamic interactive telementoring, DIT) for remote mentoring in trauma procedures.
4. Evaluate 'think-aloud' from the surgeon audio recordings for content and affective metrics, as well as surgeons' self-reported perceptions of self-confidence/helpfulness from VMR and DIT.

What was accomplished under these goals?

For this reporting period describe: 1) major activities; 2) specific objectives; 3) significant results or key outcomes, including major findings, developments, or conclusions (both positive and negative); and/or 4) other achievements. Include a discussion of stated goals not met. Description shall include pertinent data and graphs in sufficient detail to explain any significant results achieved. A succinct description of the methodology used shall be provided. As the project progresses to completion, the emphasis in reporting in this section should shift from reporting activities to reporting accomplishments.

1. Finalized procedure scripts and questionnaires for all four procedures to be used in this project: Axillary Artery Exposure (AAE), Femoral Artery Exposure (FAE), Lower Extremity Fasciotomy (LEF), and Upper Extremity Fasciotomy (UEF).
2. Finalized the video mental review (VMR) intervention tool video sequences and user interface for all procedures.
3. Finalized response scripts to be used for dynamic interactive telementoring (DIT).
4. Recruitment of participants from the previous W81XWH-13-2-0028 contract for pilot testing was begun for the video review group.
5. Recruitment for experimental and control participants has begun (16% of proposed study participant total number are enrolled or scheduled). These are surgeons who have taken the Advanced Surgical Skills for Exposure in Trauma (ASSET) course within 2-6 years and completed training or are in their final year of training, equivalent to being at or near deployment ready.
6. Testing of participants in the study has begun (4% of proposed study participants' evaluations are completed).
7. Preliminary results of the initial participants suggest emergency refreshing by VMR improves performance outcome relative to control and may enhance performance to a level similar to expert trauma surgeons. Further testing is required to determine if this observation is consistent.

Figure 1: Sum of LEF and UEF compartments decompressed in control, video review (STAT) and historic expert data from the previous project W81XWH-13-2-0028. Complete success of LEF (4 compartments) and UEF (3 compartments) indicated by a score of 7.



What opportunities for training and professional development has the project provided?

If the project was not intended to provide training and professional development opportunities or there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe opportunities for training and professional development provided to anyone who worked on the project or anyone who was involved in the activities supported by the project. “Training” activities are those in which individuals with advanced professional skills and experience assist others in attaining greater proficiency. Training activities may include, for example, courses or one-on-one work with a mentor. “Professional development” activities result in increased knowledge or skill in one’s area of expertise and may include workshops, conferences, seminars, study groups, and individual study. Include participation in conferences, workshops, and seminars not listed under major activities.

1. Experienced evaluators (surgeons and anatomists) trained new evaluators on the procedures and protocols of the project and reviewed each procedure to ensure proficiency of new evaluators.
2. The project is supporting a human growth factors graduate student contributing to the incorporation of key medical issues in human factors.

How were the results disseminated to communities of interest?

If there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe how the results were disseminated to communities of interest. Include any outreach activities that were undertaken to reach members of communities who are not usually aware of these project activities, for the purpose of enhancing public understanding and increasing interest in learning and careers in science, technology, and the humanities.

Nothing to Report.

What do you plan to do during the next reporting period to accomplish the goals?

If this is the final report, state “Nothing to Report.”

Describe briefly what you plan to do during the next reporting period to accomplish the goals and objectives.

In the next quarter, we plan to continue recruitment and evaluation of surgical performance with the schedule VMR and DIT interventions. Transcription of the audio recordings of the evaluations will begin for ‘think-aloud’ cognitive analysis.

In the next year, we plan to enroll and complete evaluation of the majority of the participant surgical performance.

4. **IMPACT:** Describe distinctive contributions, major accomplishments, innovations, successes, or any change in practice or behavior that has come about as a result of the project relative to:

What was the impact on the development of the principal discipline(s) of the project?

If there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe how findings, results, techniques that were developed or extended, or other products from the project made an impact or are likely to make an impact on the base of knowledge, theory, and research in the principal disciplinary field(s) of the project. Summarize using language that an intelligent lay audience can understand (Scientific American style).

During this reporting period we have finalized the video review tool and started collecting evaluation of surgical performance while using this tool. The tool consists of a photo and video library of 4 of the procedures taught in the ASSET course integrated into a user application. The potential impact is that this technology could be used in the operating room as an emergency pre- (e.g., while the surgeon is scrubbing) and intra-operative assistance tool for rarely performed life-saving procedures. This approach is broadly applicable to any operation, not just the four trauma procedures being tested/validated.

During this reporting period we have finalized the telementor scripts that will be use by telementors to give guidance to surgeons using a live stream video and audio connection. Standardization of telementor support is a necessary control for isolating and evaluating the effect of telementoring. This technology could be used during live surgical interventions to help improve the outcome of these four surgical procedures. Consistent telementor training and responses to surgical situations is likely to be an important component of successful telementor intervention in surgery.

What was the impact on other disciplines?

If there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe how the findings, results, or techniques that were developed or improved, or other products from the project made an impact or are likely to make an impact on other disciplines.

The project aids the incorporation of key medical issues to human factors research.

What was the impact on technology transfer?

If there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe ways in which the project made an impact, or is likely to make an impact, on commercial technology or public use, including:

- *transfer of results to entities in government or industry;*
- *instances where the research has led to the initiation of a start-up company; or*
- *adoption of new practices.*

The tools (video review tool, telementor scripts, and audio-visual technology) have been finalized for this project and could be used by the military and in other hospital settings to help improve the outcome of these four surgical procedures.

No such transfer has occurred as we are still in development/testing phases.

What was the impact on society beyond science and technology?

If there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe how results from the project made an impact, or are likely to make an impact, beyond the bounds of science, engineering, and the academic world on areas such as:

- *improving public knowledge, attitudes, skills, and abilities;*
- *changing behavior, practices, decision making, policies (including regulatory policies), or social actions; or*
- *improving social, economic, civic, or environmental conditions.*

Nothing to Report.

- 5. CHANGES/PROBLEMS:** The PD/PI is reminded that the recipient organization is required to obtain prior written approval from the awarding agency grants official whenever there are significant changes in the project or its direction. If not previously reported in writing, provide the following additional information or state, “Nothing to Report,” if applicable:

Changes in approach and reasons for change

Describe any changes in approach during the reporting period and reasons for these changes. Remember that significant changes in objectives and scope require prior approval of the agency.

Initial recruitment highlighted the difficulty in finding a sufficient number of trained surgeons who have taken the ASSET training course and were not been part of a previous study. We propose expanding recruitment to include surgeons in their final year of training (PGY 5). These surgeons would be equivalent to being deployment ready within 6-12 months. This change improves recruitment while still focusing on military relevant populations of deployment ready or near ready surgeons. This modification will be submitted to the University of Maryland, Baltimore, Institutional Review Board and the USAMRMC Office of Research Protections (ORP), Human Research Protection Office (HRPO).

Actual or anticipated problems or delays and actions or plans to resolve them

Describe problems or delays encountered during the reporting period and actions or plans to resolve them.

The technology required for set up of the telementor intervention took slightly longer than anticipated and as a result we are slightly behind on study participant enrollment in that phase of the study. We have broadened testing date availability to give additional flexibility for participant scheduling which has shown improvement in recruitment numbers, although making our laboratory scheduling more complex and slightly less cost efficient. We have budget to cover the anticipated cost efficiency diminishment and do not require additional funds. We plan to continue with this change of enrollment strategy to increase enrollment of study participants.

Changes that had a significant impact on expenditures

Describe changes during the reporting period that may have had a significant impact on expenditures, for example, delays in hiring staff or favorable developments that enable meeting objectives at less cost than anticipated.

We are slightly behind the projected expenditure due to a delay in hiring staff and the slight delay of participant enrollment (see above section for explanation) We anticipate this gap in projected vs. actual expenditure to tighten over the next few months because our new enrollment strategy is already helping to increase enrollment numbers and the lower efficiency of this laboratory scheduling will utilize the funding available from the gap.

Significant changes in use or care of human subjects, vertebrate animals, biohazards, and/or select agents

Describe significant deviations, unexpected outcomes, or changes in approved protocols for the use or care of human subjects, vertebrate animals, biohazards, and/or select agents during the reporting period. If required, were these changes approved by the applicable institution committee (or equivalent) and reported to the agency? Also specify the applicable Institutional Review Board/Institutional Animal Care and Use Committee approval dates.

Significant changes in use or care of human subjects

Nothing to Report.

Significant changes in use or care of vertebrate animals

Nothing to Report.

Significant changes in use of biohazards and/or select agents

Nothing to Report.

6. PRODUCTS:

• **Publications, conference papers, and presentations**

Report only the major publication(s) resulting from the work under this award.

Journal publications. *List peer-reviewed articles or papers appearing in scientific, technical, or professional journals. Identify for each publication: Author(s); title; journal; volume: year; page numbers; status of publication (published; accepted, awaiting publication; submitted, under review; other); acknowledgement of federal support (yes/no).*

Nothing to Report.

Books or other non-periodical, one-time publications. *Report any book, monograph, dissertation, abstract, or the like published as or in a separate publication, rather than a periodical or series. Include any significant publication in the proceedings of a one-time conference or in the report of a one-time study, commission, or the like. Identify for each one-time publication: author(s); title; editor; title of collection, if applicable; bibliographic information; year; type of publication (e.g., book, thesis or dissertation);*

status of publication (published; accepted, awaiting publication; submitted, under review; other); acknowledgement of federal support (yes/no).

Nothing to Report.

Other publications, conference papers and presentations. *Identify any other publications, conference papers and/or presentations not reported above. Specify the status of the publication as noted above. List presentations made during the last year (international, national, local societies, military meetings, etc.). Use an asterisk (*) if presentation produced a manuscript.*

In progress report presented to JPC1 at Fort Detrick on May 10th, 2018.

- **Website(s) or other Internet site(s)**

List the URL for any Internet site(s) that disseminates the results of the research activities. A short description of each site should be provided. It is not necessary to include the publications already specified above in this section.

Nothing to Report.

- **Technologies or techniques**

Identify technologies or techniques that resulted from the research activities. Describe the technologies or techniques were shared.

We have finalized the video review tool. The tool consists of a photo and video library of 4 of the procedures taught in the ASSET course. We have also finalized the telementor scripts that will be use by the telementor to give guidance to surgeons using a live stream video and audio connection. These technologies have only been pilot tested and used for this project and have not been shared otherwise.

- **Inventions, patent applications, and/or licenses**

Identify inventions, patent applications with date, and/or licenses that have resulted from the research. Submission of this information as part of an interim research performance progress report is not a substitute for any other invention reporting required under the terms and conditions of an award.

Nothing to Report.

- **Other Products**

Identify any other reportable outcomes that were developed under this project. Reportable outcomes are defined as a research result that is or relates to a product, scientific advance, or research tool that makes a meaningful contribution toward the understanding, prevention, diagnosis, prognosis, treatment and /or rehabilitation of a disease, injury or condition, or to improve the quality of life. Examples include:

- *data or databases;*
- *physical collections;*
- *audio or video products;*

- *software;*
- *models;*
- *educational aids or curricula;*
- *instruments or equipment;*
- *research material (e.g., Germplasm; cell lines, DNA probes, animal models);*
- *clinical interventions;*
- *new business creation; and*
- *other.*

Nothing to Report.

7. PARTICIPANTS & OTHER COLLABORATING ORGANIZATIONS

What individuals have worked on the project?

Provide the following information for: (1) PDs/PIs; and (2) each person who has worked at least one person month per year on the project during the reporting period, regardless of the source of compensation (a person month equals approximately 160 hours of effort). If information is unchanged from a previous submission, provide the name only and indicate “no change”.

Example:

Name: Mary Smith
Project Role: Graduate Student
Researcher Identifier (e.g. ORCID ID): 1234567
Nearest person month worked: 5

Contribution to Project: Ms. Smith has performed work in the area of combined error-control and constrained coding.
Funding Support: The Ford Foundation (Complete only if the funding support is provided from other than this award.)

Name: Samuel A. Tisherman
 Project Role: Co-PI
 Researcher Identifier (e.g. ORCID ID): <https://orcid.org/0000-0003-3810-3729>
 Nearest person month worked: 0.6
 Contribution to Project: Dr. Tisherman has performed work in the development and implementation of surgical intervention development and evaluation on surgical performance.
 Funding Support: W81XWH-17-2-0011

Name: Adam C. Puche
 Project Role: Co-PI
 Researcher Identifier (e.g. ORCID ID): 0000-0002-6847-1218
 Nearest person month worked: 3
 Contribution to Project: Dr Puche has performed work in the development and implementation of surgical intervention development and evaluation on surgical performance.
 Funding Support: W81XWH-17-2-0011

Name: Kristy Pugh

Project Role: Research Lead Specialist

Researcher Identifier (e.g. ORCID ID): n/a

Nearest person month worked: 12

Contribution to Project: Kristy has performed work in the development and implementation of surgical intervention development and evaluation on surgical performance.

Funding Support: W81XWH-17-2-0011

Name: Lorreen Agandi

Project Role: Research Assistant, Clinical

Researcher Identifier (e.g. ORCID ID): n/a

Nearest person month worked: 12

Contribution to Project: Lorreen has performed work in the development and implementation of surgical intervention development and evaluation on surgical performance.

Funding Support: W81XWH-17-2-0011

Name: Valerie Shalin

Project Role: Sub-award recipient

Researcher Identifier (e.g. ORCID ID): n/a

Nearest person month worked: 0.75

Contribution to Project: Dr. Shalin has contributed to the development of the scenario scripts for dynamic interactive telementoring.

Funding Support: W81XWH-17-2-0011

Name: Claire Shah

Project Role: Sub-award recipient

Researcher Identifier (e.g. ORCID ID): n/a

Nearest person month worked: 4

Contribution to Project: Claire has contributed to the development of the scenario scripts for dynamic interactive telementoring.

Funding Support: W81XWH-17-2-0011

Has there been a change in the active other support of the PD/PI(s) or senior/key personnel since the last reporting period?

If there is nothing significant to report during this reporting period, state “Nothing to Report.”

If the active support has changed for the PD/PI(s) or senior/key personnel, then describe what the change has been. Changes may occur, for example, if a previously active grant has closed and/or if a previously pending grant is now active. Annotate this information so it is clear what has changed from the previous submission. Submission of other support information is not necessary for pending changes or for changes in the level of effort for active support reported previously. The awarding agency may require prior written approval if a change in active other support significantly impacts the effort on the project that is the subject of the project report.

Nothing to Report.

What other organizations were involved as partners?

If there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe partner organizations – academic institutions, other nonprofits, industrial or commercial firms, state or local governments, schools or school systems, or other organizations (foreign or domestic) – that were involved with the project. Partner organizations may have provided financial or in-kind support, supplied facilities or equipment, collaborated in the research, exchanged personnel, or otherwise contributed.

Provide the following information for each partnership:

Organization Name:

Location of Organization: (if foreign location list country)

Partner’s contribution to the project (identify one or more)

- *Financial support;*
- *In-kind support (e.g., partner makes software, computers, equipment, etc., available to project staff);*
- *Facilities (e.g., project staff use the partner’s facilities for project activities);*
- *Collaboration (e.g., partner’s staff work with project staff on the project);*
- *Personnel exchanges (e.g., project staff and/or partner’s staff use each other’s facilities, work at each other’s site); and*
- *Other.*

Organization Name: Wright State University

Location of Organization: Dayton, Ohio, USA

Partner’s contribution to the project: contributed to the development of the scenario scripts for dynamic interactive telementoring.

Organization Name: Maryland State Anatomy Board

Location of Organization: Baltimore, Maryland, USA

Partner’s contribution to the project: Provides cadavers and lab space for the project.


7. SPECIAL REPORTING REQUIREMENTS

COLLABORATIVE AWARDS: N/A

QUAD CHARTS:

Emergency Refreshing of Combat Surgical Skills

Log Number: BA150808
 Award: W81XWH-17-2-0011
PI: Samuel A. Tisherman, MD/Adam Puche, PhD **Org:** University of Maryland **Award Amount:** \$1,471,317.16





Study/Product Aim(s)

- Develop narrated videos of experts performing key steps of the procedures and scripts for telementors. Develop multiple choice questions regarding the surgical procedures to be studied.
- Evaluate the performance of 2 upper extremity and 2 lower extremity procedures by 3 groups of surgeons using video review, telementoring, or no intervention.
- Evaluate audio recordings of surgeons during the procedures for content and affective metrics.
- Compare the performance of the 3 groups of surgeons with historic cohorts of surgeons.

Approach

We will test 2 approaches (video review and telementoring) to rapid refreshing of combat casualty surgical skills vs no refresher typical deployment-ready surgeons trained 2-6 years previously in the Advanced Surgical Skills for Exposure in Trauma Course.

Accomplishment: We have completed the process of upgrading the tablet application used in the previous study for surgical performance evaluation by co-located evaluators. We have also completed the creation of the video review tool.

Timeline and Cost

Activities	CY	17	18	19	20
Develop videos, scripts, and multiple choice questions (Aim 1)		■			
Evaluate surgeon performance (Aim 2)			■	■	■
Evaluate audio recordings (Aim 3)				■	■
Data analysis and comparisons with historic data (Aim 4)					■
Estimated Budget (\$K)		\$248	\$508	\$487	\$228

Updated: (05/30/18)

Goals/Milestones

CY17 Goal – Development of videos, telementor scripts, and MCQs

- ✓ Develop narrated video clips
- ✓ Develop telementor scripts
- ✓ Develop multiple choice questions
- ✓ Update tablet application

CY18 Goals – Surgeon performance evaluation

- Pilot test video clips and telementor scripts
- Evaluate surgeon performance of 4 ASSET procedures

CY19 Goal – Surgeon performance evaluation

- Continue surgical performance evaluations
- Begin evaluation of surgeon audio recordings

CY20 Goal – Data analysis

- Complete evaluation of surgeon audio recordings
- Complete data analysis

Comments/Challenges/Issues/Concerns: None

Budget Expenditure to Date
 Projected Expenditure: \$469,200.00
 Actual Expenditure: \$302,628.98 (cumulative, total thus far)

8. APPENDICES: Attach all appendices that contain information that supplements, clarifies or supports the text. Examples include original copies of journal articles, reprints of manuscripts and abstracts, a curriculum vitae, patent applications, study questionnaires, and surveys, etc.

No Appendices to Report.