

Simulation-Based Orthopaedic Training: Student Questionnaire

Section A: Demographic and Academic Background

1. Age: _____
2. Gender: ☐ Male ☐ Female
3. Year of Study: _____
4. Have you previously attended any orthopaedic skills workshops or simulation sessions?
☐ Yes ☐ No
5. Academic performance in the last professional examination: ☐ $\geq 75\%$ ☐ $< 75\%$

Section B: Pre-Simulation Self-Assessment

Rate your confidence (1–10) in the following skills:

Skill	Confidence Rating (1–10)
Applying a below-knee plaster cast	
Performing basic fracture reduction	
Identifying major joint dislocations	
Conducting a musculoskeletal examination	
Using orthopaedic instruments/tools	

Section C: Knowledge Assessment (Pre & Post)

(Same questions are used before and after the session)

1. What is the most appropriate initial step in managing a closed tibial shaft fracture?
a) Plaster cast b) Skin traction c) ORIF d) External fixator
2. The most commonly used position for applying below-knee plaster in ankle injury is:
a) Dorsiflexion b) Plantar flexion c) Neutral position d) Varus
3. Which of the following is NOT a complication of fracture immobilization?
a) Pressure sore b) Deep vein thrombosis c) Hypertension d) Joint stiffness

Section D: Post-Simulation Evaluation

1. Re-assess confidence using the same scale as in Section B.

2. Procedural Understanding (tick Yes/No):

☐ Yes ☐ No - I can confidently apply a below-knee cast on a synthetic limb.

☐ Yes ☐ No - I understand the key steps of fracture reduction.

☐ Yes ☐ No - I am able to identify when a simulated joint is dislocated.

3. Feedback on the Simulation Session:

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
The simulation was realistic and engaging.					
The faculty support and feedback were effective.					
The simulation improved my clinical reasoning.					
I would recommend this simulation for future students.					

4. Open-Ended Questions:

What did you like most about the simulation session?

What could be improved in future sessions?

Would you prefer more simulation modules in orthopaedics? Why or why not?