BACKGROUND & RATIONALE

- Simulation is essential in nursing education to develop clinical judgment and decision-making;

Technological advances have enabled immersive methods, such as holography, offering a new dimension of realism;
Social presence and emotional engagement may be enhanced through holographic prebriefing;

- Few studies compare holography and video simulation using standardized instruments.

PURPOSE

Objective: Compare students' perceptions of effectiveness and social presence in holographic vs. flat screen prebriefing.

HYPHOTESIS

Holographic prebriefing would enhance confidence, learning, and presence more than traditional video.



METHODS

This study employed a quantitative, **quasiexperimental design** with two parallel groups: one using holographic patient simulation (H) and another using video-based simulation (F).

Design and Sample

The research was conducted at the University of Central Florida (UCF), School of Nursing, and approved by the Institutional Review Board (IRB). Data collection occurred from January to March 2025.

127 nursing students randomly assigned to two groups: Hologram (n = 64) and Flat Screen Video (n = 63). Participants engaged in a clinical simulation scenario involving a pediatric patient, followed by a structured debriefing. Data were collected using a Demographic Survey, the Simulation Effectiveness Tool – Modified (SET-M), and the Social Presence Scale. Descriptive and inferential statistical analyses were conducted (t-tests and chi-square tests).

Exploring the impact of Holograms in Prebriefing on Nursing Students' Empathy in Simulated Patient Care: a cross-over study

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RESULTS - DEMOGRAPHICS

	Demo	ographic Variable	phic Variable Hologram (n=64) Flat Screen (n=				
	Age (Mean ± SD)			20.70 ± 3.01	21.02 ± 2.72		
	Geno	Gender (Female/Male)		56 / 8	54 / 9)
	Ethnicity (W	Ethnicity (White/Asian/Black/Others)		42 / 10 / 10 / 2	40 / 12 / 9 /		9/2
	Hi	spanic or Latino		21	17		
	Prior Hologram Experience (Yes) 3			0			
_							
	Item	Mean Hologram (SD)	Μ	ean Flat Screen (SD)	t-statistic	p-
F	Prebriefing 1	2.74 ± 0.44		2.60 ± 0.55		1.53	C
F	Prebriefing 2	2.78 ± 0.46	2.67 ± 0.52 1.29 0				
Γ	Scenario 1	2.81 ± 0.41		2.67 ± 0.50		1.77	C
Γ	Scenario 2	2.75 ± 0.48		2.60 ± 0.57		1.63	C
Γ	Scenario 3	2.72 ± 0.51		2.63 ± 0.56		0.95	C
	Scenario 4	2.77 ± 0.45		2.62 ± 0.54		1.66	C
	Scenario 5	2.66 ± 0.52		2.57 ± 0.58		0.91	C

Scenario 5	2.66 ± 0.52	2.57 ± 0.58	0.91	0
Scenario 6	2.73 ± 0.47	2.56 ± 0.59	1.76	0
Scenario 7	2.72 ± 0.48	2.63 ± 0.53	1.01	0
Scenario 8	2.75 ± 0.44	2.67 ± 0.54	0.94	0
Scenario 9	2.80 ± 0.42	2.65 ± 0.56	1.74	0
Scenario 10	2.72 ± 0.49	2.60 ± 0.58	1.23	0
Scenario 11	2.75 ± 0.47	2.62 ± 0.55	1.40	(
Scenario 12	2.70 ± 0.49	2.60 ± 0.57	1.10	(
Debriefing 1	2.83 ± 0.38	2.67 ± 0.51	2.03	0
Debriefing 2	2.78 ± 0.42	2.41 ± 0.64	3.85	<(
Debriefing 3	2.69 ± 0.50	2.52 ± 0.62	1.64	0
Debriefing 4	2.75 ± 0.44	2.63 ± 0.60	1.23	0
Debriefing 5	2.73 ± 0.45	2.76 ± 0.50	-0.33	0
<i>(</i>)				

(*p < 0.05)

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Item	Mean Hologram (SD)	Mean Flat Screen (SD)	t-statistic	p-value
Presence 1	4.80 ± 1.50	3.98 ± 1.81	2.75	<mark>0.007*</mark>
Presence 2	4.52 ± 1.38	3.97 ± 1.72	1.97	0.051
Presence 3	4.44 ± 1.53	3.70 ± 1.53	2.72	<mark>0.007*</mark>
Presence 4	5.11 ± 1.46	4.60 ± 1.56	1.89	0.062
Presence 5	4.77 ± 1.42	3.70 ± 1.53	4.07	<mark><0.001*</mark>
(*n < 0.05)				

(*p < 0.05)

REFERENCES

Bailenson, J. N., Blascovich, J., Beall, A. C., & Loomis, J. M. (2001). Equilibrium theory revisited: Mutual gaze and personal space in virtual environments. *Presence: Teleoperators & Virtual Environments, 10*(6), 583–598. https://doi.org/10.1162/105474601753272844 Gunawardena, C. N., & Zittle, F. J. (1997). Social Presence Scale [Database record]. APA PsycTests. https://doi.org/10.1037/t43779-000

 Fey, M. K., & Jenkins, L. S. (2015). Debriefing Practices in Nursing Education Programs: Results from a National Study. Nursing education perspectives, 36(6), 361–366. https://doi.org/10.5480/14-1520

 Foronda, C. L., Fernandez-Burgos, M., Nadeau, C., Kelley, C. N., & Henry, M. N. (2020). Virtual Simulation in Nursing Education: A Systematic Review Spanning 1996 to 2018. Simulation in healthcare: journal of the Society for Simulation in Healthcare, 15(1), 46–54. https://doi.org/10.1097/SiH.0000000000000111

 Gaba, D. M. (2004). The future vision of simulation in healthcare. Quality and Safety in Health Care, 13(suppl 1), i2–i10. https://doi.org/10.1136/gshc.2004.009878

 J. D. Vermunt (2023). Understanding, measuring and improving simulation-based learning in higher education: students and teacher learning perspectives. Learning and Instruction, 86. https://doi.org/10.1016/j.learninstruc.2023.101773

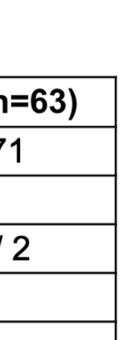
 INACSL Standards Committee. (2021). Healthcare simulation is nursing education (3rd ed.). National League for Nursing.

 Jeffries, P. R. (2020). Simulation in nursing education: From conceptualization to evaluation (3rd ed.). National League for Nursing.

Leighton, K., Ravert, P., Mudra, V., & Macintosh, C. (2015). Updating the Simulation Effectiveness Tool: item modifications and reevaluation of psychometric properties. *Nursing Education Perspectives*, 35(5), 317-323. https://pubmed.ncbi.nlm.nih.gov/26521501/ Motola, I., Devine, L. A., Chung, H. S., Sullivan, J. E., & Issenberg, S. B. (2013). Simulation in healthcare education: A best evidence practical guide. *Medical Teacher*, 35(10), e1511–e1530. https://doi.org/10.3109/0142159X.2013.818632 Padilha, J. M., Machado, P. P., Ribeiro, A., Ramos, J. L., & Costa, P. (2019). Clinical virtual simulation in nursing education: Randomized controlled trial. *Journal of Medical Internet Research*, 21(3), e11529. https://doi.org/10.2196/11529 Liu, Xin PhD; Codd, Casey PhD; Mills, Christine PhD. (2018). Incremental Effect of Academic Predictors on Nursing Admission Assessment. *Nurse Educator* 43(6):292-296. http://doi.org/10.1097/INNE.00000000000000502 Verkuyl, M., Romaniuk, D., Atack, L., & Mastrilli, P. (2017). Virtual Gaming Simulation for Nursing Education: An Experiment. *Clinical Simulation in Nursing*, 13(5):238–244. 10.1016/j.ecns.2017.02.004 External Link



No significant differences between groups.



-value
0.128
0.199
0.079
0.106
0.345
0.100
0.365
0.081
0.316
0.351
0.084
0.220
0.163
0.273
).045*
<mark>0.001*</mark>
0.104
0.222
0.743

RESULTS – SET-M

These findings indicate that both simulation methods were generally perceived as effective by participants. However, statistically significant differences emerged in specific aspects of the debriefing dimension. All other dimensions (prebriefing and scenario itens) showed no statistically significant differences between groups, suggesting similar perceptions of simulation effectiveness across most aspects of the simulation experience.



RESULTS – Social Presence Scale These findings indicate significantly higher perceptions of social presence in the Hologram Group, particularly in items related to realism and engagement (Presence 1, Presence 3, and Presence 5), suggesting greater perceived interaction and immersion in the holographic simulation environment.

ng Education Perspectives 35(5) 317-323 https://pubmed.ncbi.nlm.nih.gov/26521501/

CLINICAL SCENARIO

Pediatric patient: 14-year-old "Nicole"
Goals: health history-taking, communication, psychosocial assessment
Duration: 10-min interaction, 5-min small group, 20-min debriefing
Tools: Proto hologram table vs. pre-recorded video



DISCUSSION

Holography enhanced emotional expression and presence; Flat screen facilitated reflection and confidence during debrief; **Both groups demonstrated learning, supporting blended approaches.**

RESULTS – SET-M

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