

# Poster #158: Data Requirements for the Use of VR Platforms for the Practical Assessment of Medical Imaging

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# **Project Rationale**

Though Virtual Reality (VR) technology has improved significantly over the past few years, touch-sense displays and data (i.e., haptics) has lagged behind visual and auditory progress (Wang et al., 2019). However, the anticipated use of VR in both medical imaging education and assessments has only grown in the past several years (e.g., Makary, 2020; Shah, 2019; Tang et al., 2018; Uppot et al., 2019). Consequently, it behooves medical imaging educators and assessors to evaluate both the current capabilities of VR technology and the data streams needed to validate the authenticity of this medium for real world applications. The current study will be conducted in two parts: 1) evaluate the current capabilities of haptics in VR technology and the authenticity of dynamic "touch" processes as compared to real world simulation tasks, and 2) evaluate the data streams needed to validate the authenticity of VR tasks compared to real-world practice assessment tasks.

# Virtual Reality (VR) Headsets

Modern VR Headsets and controllers consist of a head-mounted display that is wired or wireless and one controller for each hand. Some of the most popular VR Sets include the Oculus Quest 2, Valve Index VR Kit, and the Oculus Quest Pro. Due to the comparatively lower cost, the Oculus Quest 2 is already being used in the hospitality and medical industries to train and provide assessments for medical professionals and patients (Vaughan et al., 2016). Cost and lack of software development often are the biggest barrier to entry.

# Data Sources in VR

- Headset Position (x,y,z coordinates), rotation (x, y, z orientations), audio recordings (mp3, WAV, etc), image/video recording (mp4, MOV, F47), and time.
- **<u>Controller</u> Haptic** (frequency & amplitude), **position** (x, y, z coordinates), rotation (x, y, z orientations), button press (time & true/false), joystick movement (x and y positions, as well as true or false button clicks/touches), **trackpad** (x and y positions, as well as true or false button clicks/touches), and time.
- User provided data (gender, age, job, experience usually in a CSV or JSON file) and user **generated data** from completing steps and evaluations in VR (CSV, JSON, or Matrix).
- **Extrapolated** Interactions with the virtual environment, velocity and angular velocity, acceleration and angular acceleration, **poking**, **grabbing**, **pointing**, and other **hand** movements/positions, interactions with real world objects in a virtual environment.

# Sonography Tasks in VR

## Task Specifications Should...

- Provide all learners with an equal opportunity to demonstrate their knowledge
- Represent the types of tasks a learner would encounter in practice (e.g., common sonography tasks)
- Include clearly defined expectations and directions
- Be free from distractions and construct-irrelevant variance (e.g., hard to use software or hardware)

## Formative Assessment of Skills

For medical sonographers, VR offers a flexible framework for performing tasks and receiving formative feedback (e.g., skill-level diagnostic feedback). Both process data and outcomes data can be collected and scored to provide learners with feedback.

# **VR EQUIPMENT FOR EDUCATION AND ASSESSMENT**

#### PROS FOR EDUCATION AND ASSESSMENT

- Best for position tracking Head, eye/gaze (with add on), body, hand,
- finger tracking Semi-modular for upgrades
- Best field of vision
- Steam development tools
- Highest image refresh rate of 144Hz





# **Operationalizing Tasks and Feedback**

### Process vs Outcomes Data

- **Process Data** Steps, actions, and sequences performed by the learner to perform a specified task
- Outcomes Data the end result or product from the task (e.g., the desired sonography image)

## Scoring and Feedback to Learner

**Process Mining** can be used to collect robust data on a cohort of experts. This data can then be used to create a profile to which the process data from the learner can be compared. Deviations from the expert processes can be flagged and may result in opportunities for learner feedback and improvement. Image Similarity Indexing can be used to compare the final image taken during the task to those captured by experts.

#### META QUEST 2 FOR EDUCATION AND ASSESSMENT

- ot the most accurate position tracking
- eye/gaze tracking
- nd and finger tracking not as advanced as
- e Meta Quest Pro
- aller field of vision, less immersive





USE CASE AT HILTON HOTELS



#### META QUEST PRO

**VALVE INDEX** 

- PROS FOR EDUCATION AND ASSESSMENT
- Augmented Reality available
- Head, Eye/Gaze, Body, Hand, Finger Tracking
- Faster Internal Processor
- Each controller has its own processor
- High Resolution

- CONS FOR EDUCATION AND ASSESSMENT Priciest out of modern commercially
- available options
- Better position tracking, still not the best • Smaller field of vision, less immersive,
- better than Meta Quest 2



DRE INFO AND DETAILS

CONS FOR EDUCATION AND ASSESSMENT

Meta Quest Pro

gaming experience

processor

Wired

Still somewhat pricey, but cheaper than the

Require a higher end PC due to no internal

Limited mobility, meant to be a more stationary





MORE INFO AND DETAILS

# OTHERS 8:0



#### Virtual Reality kits are available from a large number of manufacturers, but those listed above have been tested, have high quality images, and have tracking capabilities largely built in. For a more comprehensive breakdown on available VR kits please check out the QR code to the right.



develop and access to headsets might be limited. Validity research studies will also be needed to evaluate the generalizability of tasks from VR to real life scenarios.

Kolb, D. A. (2015). Experiential learning: Experience as the source of learning and development. Upper Saddle River, NJ: Pearson.

Roberts, J. (2018). From the editor: The possibilities and limitations of experiential learning research in higher education. Journal of Experiential Education, 41, 3–7.

Shah, S. (2019). Top four technologies in medical imaging. Imaging Technology News.

Uppot, R. N., Laguna, B., McCarthy, C.J., De Novi, G., Phelps, A., Siegel, E., & Courtier, J. (2019). Implementing virtual and augmented reality tools for radiology education and training, communication, and clinical care. Radiology, 291(3), 570-580.

*VR* headsets can gather so-called biometric data, including "really sensitive, really intimate data about your body posture, your eye gaze, what you're looking at, your pupil dilation, what you're not looking at, your gestures, what you're touching, what you're interacting with, what you're saying, even as specific as minute variations in skin color or blushing." EdWeek.org



Note: QR codes in this poster link to additional references, handouts, and resources.

# **Conclusions and Current Limitations**

## Why VR Tasks?

• Experiential learning is more impactful than classroom in many situations (Kolb, 2015, Morris, 2018, Roberts, 2018) • VR provides a low-stakes environment for practicing skills • The controlled environment allows learners to focus on specific tasks and skills, and receive detailed feedback Increase opportunities for global standards in medical imaging and medical imaging assessment Limitations for using VR for Education and Assessment in the field of sonography include that the software takes time and resources to

# References

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# Contact

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