

White Paper

Remote Medical Training with BlueEye Classroom Wearable Video



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“RedZinc has been at the forefront of developing wearable video technology to save lives by expediting remote patient treatment and enabling patient care at home. Wearable video requires advanced network capabilities for seamless video transmission for which we have partnered with leading Telecom and research companies such as VTT, Telenor, TNO, Telefonica and others. We are also involved in leading research projects such as 5G Heart, Health 5G, 5G-PPP, 5G-EPICENTRE, 6G-IA and others.

As part of the 5G Heart project under healthcare use case H1A, RedZinc carried out a pilot on remote medical training using BlueEye wearable video. On behalf of RedZinc, I would like to thank the University of Oulu, Oulu University Hospital, VTT and 5G Heart teams for this opportunity. I would also like to thank all the pilot participants (educators, students, coordinator), especially the three educators at University of Oulu & Oulu University Hospital Heli Helander, Paula Vähäsalo, and Marja Ojaniemi.

A big thanks to Mikko Uitto, Research Scientist at VTT Technical Research Centre of Finland, and the VTT team for facilitating VTT’s 5G Test Network for the pilot.”

Donal Morris
CEO & Founder
RedZinc Services



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Executive Summary

Remote education with real-time video offers many benefits in comparison to face-to-face teaching. The University of Oulu Medical Faculty and Oulu University Hospital in Finland used RedZinc's wearable video 'BlueEye' to deliver Pediatric tutorials to remote students via real-time point-of-view video.

This white paper outlines the need for a remote education pilot, the BlueEye video technology, the pilot details and outcomes. The survey conducted at the end of the pilot shows that both students and educators found remote training with BlueEye wearable video added significant value to their learning and teaching. The educators realised that BlueEye enables training which would otherwise be not possible. The students found the training sessions easier to attend and it made more efficient use of their time.

"BlueEye enables delivery of training sessions which would otherwise be not possible".

"Students found the training sessions easier to attend and it made more efficient use of their time".

One of the medical educators involved in the pilot said the Pandemic had challenged medical education in many ways. Traditional bedside sessions and direct patient contact needed to be minimised. Group sessions and ward rounds are problematic in hospitals.

"New technologies like real-time wearable video provide promising solutions and high quality patient-centric education".

The results suggest that remote training with BlueEye **video** has the potential to **partly replace** and **support** in-classroom **training**. It is a practical option when students are not able or are not allowed to attend face-to-face contact teaching including patients in the hospital.

Introduction

Background

As part of the 5G Heart project, RedZinc Services collaborated with the University of Oulu and Oulu University Hospital to conduct a pilot on BlueEye wearable video for remote medical training. This white paper is written based on the results from the pilot.

Oulu University Hospital is a university hospital in Oulu, Finland. It is affiliated with the University of Oulu and is used as a teaching hospital by the Faculty of Medicine. Oulu University Hospital is responsible for the whole of Northern Finland – accounting for more than half of Finland's geographical area and home to 741,000 people¹. Oulu University Hospital conducts high quality clinical and biomedical research and educates future healthcare professionals.

RedZinc Services is a Dublin based software company specializing in mobile video telemedicine. RedZinc's wearable video solution, BlueEye, transmits real-time point-of-view video from one location to another. The real-time point-of-view video can be used for support, consultation, training or collegial work.

Motivation for wearable video pilot for medical training

A critical component of medical education is the demonstration of medical procedures to students, many of which happen in the hospital premises with real patients or manikins. The onset of **COVID-19** pandemic **stalled the delivery of such demonstrations** around the world as the resulting social guidelines prohibited many students in one place.

Oulu University Hospital in Finland faced the same situation which motivated the school to use BlueEye wearable video technology. BlueEye technology allowed the school to deliver medical training sessions to remote students virtually.

It was further found that video can be extremely useful as a point of view demonstration for procedures – this is not always possible with a group of students trying to see over the shoulder of the educator.

¹ <https://www.ppshep.fi/en/Pages/default.aspx>

BlueEye Technology

RedZinc’s wearable video platform, BlueEye Handsfree, consists of a lightweight wearable camera (to transmit live video), a BlueEye app in a smartphone (for mobile connection), and a secure cloud-based BlueEye hot desk (for remote video access). See Figure 1. BlueEye transmits real-time point-of-view video from one location to another. The live interactive video can be used for training, consultation, and collegial work.

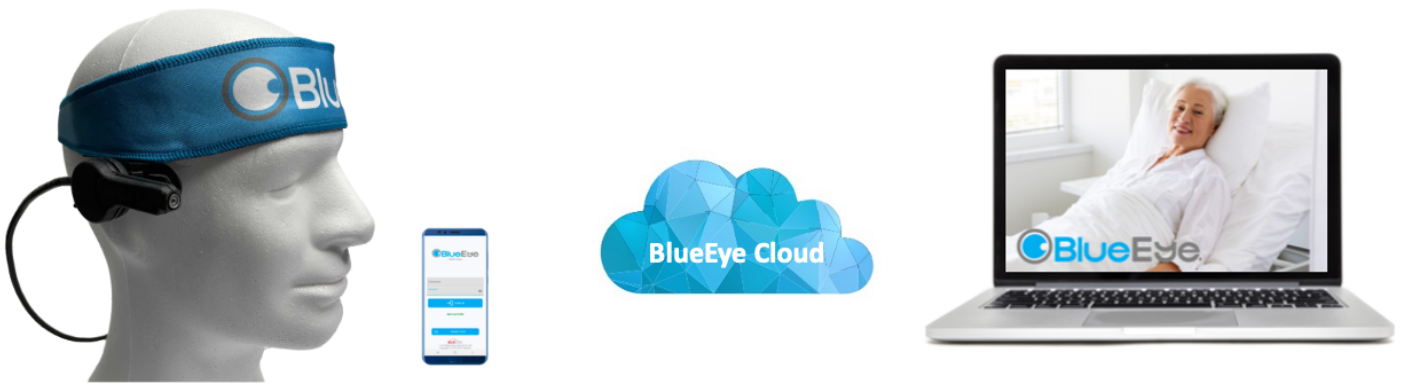


Figure 1 BlueEye Classroom wearable video solution

BlueEye Classroom, a variant of BlueEye Handsfree, has been designed specifically for medical education. The wearable video solution allows medical educators to share live point-of-view video with remote students, while performing a medical procedure. See Figure 2. BlueEye Classroom supports an **interactive and collaborative learning environment** while facilitating **first person perspective of the medical procedure to many remote students**.

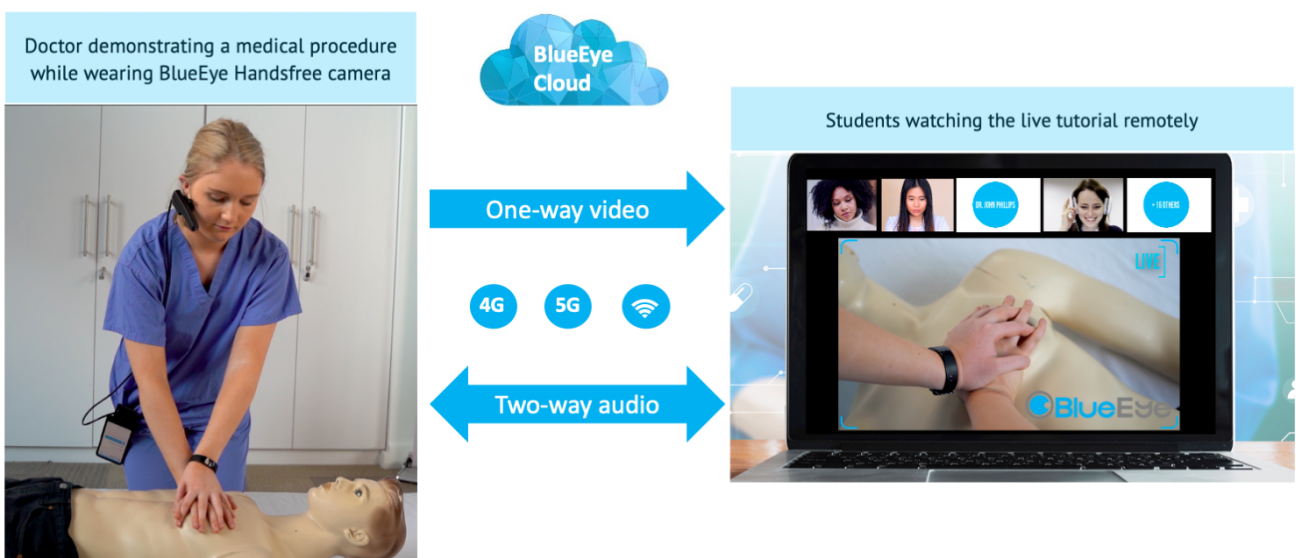


Figure 2 A medical educator (left) demonstrating a medical procedure to remote students (right)

Key Features of BlueEye Classroom

The wearable video solution allows **one-way video** transmission from the medical educator to remote students. This allows the medical educator to focus on the demonstration without having to worry about the video being transmitted to the remote students. The **two-way audio** transmission between the educator and the students makes the session interactive. It ensures that the students can interact with the educator or with other students, whenever necessary. Some of the other key features of the solution include

- 2 mega-pixel high-definition camera
- Headband camera to fit different head sizes and comfortable for long use
- No app/software download needed by the students
- Moderator function to manage class
- Chat function
- Screenshare
- Mute/unmute, remove, add students
- Supports multiple device types, operating systems, and web browsers

The educator or moderator schedules a class and invites students via calendar function in BlueEye Classroom. At the scheduled class time, the educator wears the BlueEye camera over their head and connects it with the smartphone. The educator then logs in to BlueEye app to start streaming live point-of-view video. The remote students click on the secure link to access the live streaming.

Key outcomes supported by BlueEye Classroom

Conducting video classroom sessions with BlueEye Classroom has many benefits such as

- Enables live demonstration of a medical procedure to a group of remote students
- Avoids contagion associated with groups of students on ward rounds
- Facilitates best possible view of the procedure to many students
- Eliminates the need for travel by the students saving costs and time
- Supports delivery of quality education and training to the students
- Mitigates the challenges associated with the gathering of many students at one place

Pilot

Oulu University Hospital used BlueEye wearable video solution for pediatrics training to remote medical students.

The pilot was carried out in April and October 2021 for graduate medical students.

A manikin baby is shown here for illustrative purposes. Real patients were used in the training.

Participants

The pilot had three types of participants

- Coordinator
- Educators
- Students

The coordinator uses the calendar feature in BlueEye Classroom to schedule a class and invite students. At the scheduled class time, the coordinator starts the class, while students join using the secure link in the email or message.

The educator wears BlueEye camera on their forehead connected to a smartphone with the BlueEye video streaming app (see Figure 3). When the class is due to start, the educator starts live video streaming via the BlueEye app in the smartphone (Figure 4).



Figure 3 A doctor demonstrating a medical procedure while wearing BlueEye camera over the head

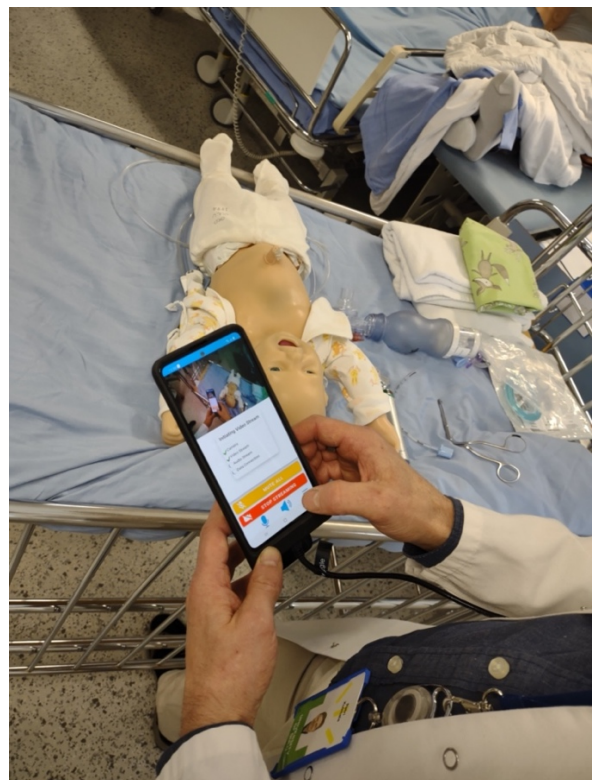


Figure 4 A doctor live streaming point-of-view video via BlueEye app

In the pilot, students can watch live video from the educator's point-of-view on their computer, mobile or tablet (Figure 5).



Figure 5 A student watching a medical tutorial on a laptop

Pilot Session Training Set up

Three different types of classroom sessions were conducted with BlueEye Classroom

- Diabetes Outpatient Clinic
- Pediatric Neurology Outpatient Clinic
- Pediatric Rheumatology Outpatient Clinic

All three sessions were carried out in a regular outpatient clinic included in the traditional training of medical students. The number of students attending each session were 4 in the Diabetes Clinic, 4 in the Pediatric Rheumatology Clinic and 18 in the Pediatric Neurology Clinic.

The attending group of medical students were divided into two smaller groups. Half of the students were present in the hospital and the other half of the students attended remotely. Each student attended a similar session twice and switched their roles regarding attendance (either present or remotely).

The session on Pediatric Neurology was carried out such that the students attending remotely were present behind the mirror-window class wall in the next room to the outpatient room. These students were able to see the actual outpatient and educator both via the mirror-window, and via the remote access using BlueEye classroom platform on their computers or cell phones.

Results

With BlueEye Classroom, Oulu University Hospital was able to organize medical demonstrations for the students despite the COVID restrictions during the pandemic. Based on the pilot, Oulu University Hospital conducted surveys on three clinical teachers and 27 graduate medical students.

Two surveys took place, one student survey and one educator survey. Each survey had 4 sections, namely

- Usability of BlueEye Classroom Platform
- Suitability of BlueEye Classroom for medical education
- Effectiveness of BlueEye Classroom for medical education
- Suitability of BlueEye video sessions compared with face-to-face teaching

The responses from the students and educators were collected with the **5-point Likert scale** i.e., the students were given a statement and were asked to specify their level of agreement using the following scale for each survey

1 = Strongly disagree, 2 = Partially disagree, 3 = Neutral, 4 = Partially agree, 5 = Strongly agree

Strengths of wearable video technology and its application in medical training

The strengths of the BlueEye wearable video technology and its use in training, which showed up due to this pilot were

- Ease of use
- Easy to connect with the educator
- Suited the type of training
- Achieved competence goals

Additionally, some of the key benefits identified during the pilot, of using BlueEye wearable video for remote training were

- It makes students' time more efficient
- It makes it easier for students to attend training sessions
- It requires less space for training as compared to face-to-face training
- It can partly or wholly replace face-to-face teaching

Challenges of wearable video technology and its application in medical training

Challenges with the technology which showed up due to this pilot were

- Remote connection was not always smooth
- Interaction with the educator was not always smooth

Delivering medical tutorials with BlueEye wearable video requires stable and reliable internet connection at the educator and students' ends. Both the above challenges were due to unstable internet connection at the educator or students' ends. To address this issue, a hospital or university could invest in a 5G campus network or boosted signal in order to use video as a training tool.

Students Survey Results

27 graduate medical students participated in the survey of whom the average age was 27 years old with maximum age of 44 and minimum age of 23. A total of 69.4% of the students attended the ‘Pediatric Neurology Outpatient’ classroom session and the other two sessions were attended by 15.4% students. All training sessions involved a patient.

1. Usability of BlueEye Classroom Platform

The following questionnaire is based around the usability of BlueEye Classroom for the training sessions, using the Likert scale.

	1	2	3	4	5	Avg	Median
The BlueEye live stream training platform was easy to use	7.4%	11.1%	22.2%	33.4%	25.9%	3.6	4.0
It was easy to connect with the trainer	14.8%	11.1%	18.5%	29.7%	25.9%	3.4	4.0
The remote connection worked smoothly throughout the training event	26.0%	18.5%	18.5%	18.5%	18.5%	2.9	3.0
The interaction with the trainer was technically smooth	14.8%	29.6%	33.4%	11.1%	11.1%	2.7	3.0

An average score of 3.6 indicates that most of the **students found that BlueEye Classroom was easy to use. A score of 3.4 shows that it was easy for the students to connect with the trainer.** Students can join a session on BlueEye Classroom by simply clicking on a secure link. They do not need to download an app or create an account, making it easy and quick for the students to join a session.

An average score of less than 3 for ‘how smoothly the remote connection worked throughout the session’ and ‘whether the interaction with the trainer was technically smooth’, indicates that the

internet connection may have been poor quality. Real-time video connection with BlueEye Classroom requires reliable internet connection. For optimum video, a minimum of 5 Mbps (Megabits per second) upload and download internet speed is needed.

In response to the question **whether BlueEye Classroom could be used for teaching or training sessions that would otherwise not be possible, 88.5% students agreed** and 11.5% students disagreed. See table below.

	N	Percentage
No	3	11.5%
Yes	23	88.5%

BlueEye Classroom is an alternative to face-to-face training sessions. The real-time point-of-view video provides the classroom like environment for

remote students. This supports **immersive and interactive learning experience.**

2. Suitability of BlueEye Classroom for medical education

The following questionnaire is based around the suitability of BlueEye Classroom for medical education as per the 5-point Likert scale.

	1	2	3	4	5	Avg	Median
How well did the BlueEye live stream video system fit the type of teaching you attended (as defined in the data for the teaching event above)?	3.7%	7.4%	18.5%	51.9%	18.5%	3.7	4.0
How well did the BlueEye live stream video system fit into the implementation format of the training event you participated in (as defined in the training event data above)?	3.7%	11.1%	25.9%	48.2%	11.1%	3.5	4.0
How well was the BlueEye live stream video system suitable for teaching the content of the training event you attended?	3.7%	18.5%	18.5%	48.2%	11.1%	3.4	4.0
How well did you achieve the competence goals set for the teaching event?	3.7%	14.8%	18.5%	59.3%	3.7%	3.4	4.0

An average score of above 3 in all the four questions in the above table indicates that the students found BlueEye Classroom to be well suited to their medical tuition. The response to the questions shows that the **delivery of the medical training sessions (Pediatrics) with BlueEye Classroom was well received by the students.**

The students were asked if the remote connection significantly interfered with their interaction with the trainer, to which **66.7% students disagreed** and 33.3% agreed.

BlueEye Classroom is an interactive end-to-end solution which supports **two-way audio**

communication between the trainer and the students. This allows the students to interact effectively with the trainer and with other students resulting in a comprehensive learning experience.

In response to the question whether BlueEye video sessions added value to their own learning, 66.7% students disagreed and 33.3% students agreed.

BlueEye Classroom wearable video platform facilitates the delivery of training sessions to remote students. The solution currently does not have content modules that can add value to the student training.

3. Effectiveness of BlueEye Classroom

In the following assessment, the students were given statements to verify the effectiveness of BlueEye Classroom for the training sessions for medical education.

27 students responded to this section

	1	2	3	4	5	Avg	Median
Once I have learned how to use the BlueEye live stream video system fluently, using it would make my time more efficient in the future	18.5%	7.4%	22.2%	37.1%	14.8%	3.2	4.0
Once I have learned how to use the BlueEye live stream video system smoothly, using it would make it easier to attend the training event in the future	11.1%	3.7%	14.8%	48.2%	22.2%	3.7	4.0
Using the BlueEye live stream video system reduces the amount of space required for teaching	11.1%	3.7%	29.7%	29.6%	25.9%	3.6	4.0

BlueEye Classroom secured an average rating of above 3 in the statements

- **BlueEye makes the time more efficient**
- **BlueEye makes attending training events easier**
- **BlueEye reduces the amount of space required for teaching**

BlueEye Classroom allows the students to attend the training sessions from anywhere in the world

(home/in transit/school) providing **them flexibility, and saving time that would have been spent in travel.** The solution also mitigates the space constraints that are applicable to in-classroom trainings. Online classes can support a higher number of students as compared to in-classroom programs resulting in higher efficiency and cost savings.

4. Suitability of BlueEye video sessions compared with face-to-face teaching

In response to the question whether BlueEye video sessions or a similar system could replace face-to-face teaching, over **74% students** voted that BlueEye can replace face-to-face teaching partly and **7% students** voted that BlueEye can replace face-to-face teaching wholly.

	N	Percentage
Not at all	5	18.5%
Partly	20	74.1%
Wholly	2	7.4%

Furthermore, **88% students agreed** that BlueEye live stream video can be used for teaching that would not otherwise be possible.

This indicates that BlueEye Classroom is suitable for online training and is a feasible alternative to in-classroom training, especially in the case of geographic limitations and for a large group of students.

The students were asked their opinion on the suitability of BlueEye video sessions as compared with traditional face-to-face teaching. In the response shown in the table below, 42.3% students found that face-to-face teaching is better than video teaching.

	N	Percentage
Both are equally good	1	3.8%
Traditional face-to-face teaching is clearly better	11	42.3%
Traditional face-to-face teaching is a little better	10	38.5%
The BlueEye live stream video system is a little better	0	0.0%
The BlueEye live stream video system is clearly better	0	0.0%
I cannot say	4	15.4%
Total		100%

While BlueEye Classroom supports the students with their interaction with the trainer and fellow students during the class, it is currently not an alternative to the before and after-class networking that the students are usually engaged in when they attend the classroom programs. Also, when the students attend classroom programs,

they are ensured optimal learning environment. This may not be the case when the students attend the training sessions remotely, usually from their home. Finally, some students had connectivity issues which interfered with their training sessions.

Educators Survey Results

4 paediatrics educators participated in the survey, all of which were clinical teachers. All the teaching events involved a patient and/or a dummy patient.

1. Usability of BlueEye Classroom Platform

The following questionnaire is based around the usability of BlueEye Classroom for the training sessions. The responses from the educators were collected as per the 5-point Likert scale.

	1	2	3	4	5	Avg	Median
The instructions for using the BlueEye live stream video system were clear	0%	0%	0%	25%	75%	4.8	5.0
The BlueEye live stream training platform was easy to use	0%	0%	25%	25%	50%	4.3	4.5
The BlueEye live stream video system did not interfere with or impede my performance at the teaching event (e.g., procedure, patient examination, or other performance)	0%	25%	0%	75%	0%	3.5	4.0
There were no technical issues with the BlueEye live stream video system attached to the laptop head	0%	50%	25%	25%	0%	2.8	2.5
It was easy to connect with students / trainees	0%	25%	25%	0%	50%	3.8	4.0
The remote connection worked smoothly throughout the training event	25%	25%	25%	0%	25%	2.8	2.5
Remote management of students / trainees participating in the event was easy	0%	0%	50%	50%	0%	3.5	3.5
Oral interaction with voice communication with students / trainees was technically smooth	0%	25%	75%	0%	0%	2.8	3.0
I was very alone in using and managing the system during the course, and there was no need for an assistant	50%	25%	25%	0%	0%	1.8	1.5

An avg score above 3 indicates BlueEye Classroom

- **Is easy to use and requires minimal training**
- **Does not impede educator’s teaching**
- **Supports easy management of remote students**

An average score of below 3 in some categories suggests there were technical issues with BlueEye live video stream and that the remote audio and video connection did not work smoothly during

the session. Video transmission requires a consistent stable internet connection and no firewall blockage. Video and audio breaks when there is a break in internet connection.

In the survey, most educators suggested that they needed assistance in conducting the class. BlueEye Classroom is designed in a way that the educator just focusses on demonstrating the medical procedure, while the administration part of the class is performed by a designated participant.

2. Suitability of BlueEye Classroom for medical education

The following questionnaire is based around the suitability of BlueEye Classroom for medical education. Again, the responses from the educators were collected as per the 5-point Likert scale.

	1	2	3	4	5	Avg	Median
How well did the BlueEye live stream video system fit the type of teaching you conducted (as defined above in the teaching event data)?	0%	0%	25%	25%	50%	4.3	4.5
How well did the BlueEye live stream video system fit into the implementation format of the training event you implemented (as defined above in the training event data)?	0%	0%	0%	50%	50%	4.5	4.5
How well was the BlueEye live stream video system suitable for teaching the content of your teaching event?	0%	0%	0%	100%	0%	4.0	4.0
How well did the students achieve the competence goals set for the teaching event?	0%	0%	25%	50%	25%	4.0	4.0

An average score of above 4 in all the questions related to suitability of BlueEye Classroom to delivery of medical training sessions indicates that **BlueEye Classroom is an effective solution for the delivery of virtual pediatrics tutorials to remote students**. The solution also allows the professors to set class rules which are visible to the students before they join the class. This allows the professor to set student guidelines for a smooth session.

In response to the question whether the remote connection significantly interfered with interaction with the students, 66.7% trainers agreed and 33.3% trainers disagreed out of 3 respondents. Remote education tutorials are reliant on robust internet connection at the educator and students' ends. Also, one-way video from the educator to the students mean that the educator is not able to see the students, which may affect the perceived response to the training.

3. Effectiveness of BlueEye Classroom

Here the educators were asked to specify how effective BlueEye Classroom was for medical education with answers given as per the Likert scale.

4 educators responded to this section

	1	2	3	4	5	Avg	Median
Once I have learned how to use the BlueEye live stream video system fluently, using it would make my time more efficient in the future.	25%	25%	25%	25%	0%	2.5	2.5
Once I have learned to use the BlueEye live stream video system fluently, using it would facilitate the practical implementation of the teaching event in the future.	0%	25%	25%	25%	25%	3.5	3.5
Using the BlueEye live stream video system reduces the amount of space required for teaching.	0%	50%	0%	50%	0%	3.0	3.0

A score of below 3 in the first question indicate that the educators do not believe that virtual classes with BlueEye Classroom can make their time more efficient. This make sense where the educator has to travel to the training session. It would make their time more efficient in cases where they could teach from one location. In this pilot, BlueEye Classroom did not have a direct impact on the efficiency of time for the educators. The educators still needed to schedule classes and travel to the laboratory or school for the virtual demonstration.

A score of 3.5 indicates that the educators think that virtual classroom sessions with BlueEye Classroom facilitates the implementation of teaching events for remote students.

A score of 3.0 shows that educators think virtual classroom saves space. This is particularly useful when the travel restrictions prohibit students from travelling to the classroom.

4. Suitability of BlueEye video sessions compared with face-to-face teaching

BlueEye Classroom made it possible to deliver medical tutorials to students, which otherwise would not have been possible due to Covid restrictions. The students were also able to see the medical procedure from the educator’s point-of-view, which is not possible in face-to-face teaching.

In response to whether BlueEye Classroom or a similar system could replace the traditional face-to-face teaching, **100% of the respondent educators agreed that remote could partly replace face-to-face teaching.**

	N	Percentage
Not at all	0	0.0%
Partly	4	100.0%
Wholly	0	0.0%

In response to the question whether BlueEye Classroom can be used for training sessions that were otherwise not possible, **100% of the 4 educators agreed.** BlueEye Classroom can also support delivery of medical demonstration to remote students when they are not able to travel to the classes.

	N	Percentage
No	0	0.0%
Yes	4	100.0%

The educators were asked their opinion on the suitability of BlueEye video sessions as **compared** with traditional face-to-face teaching. In the response shown in the table below, **50% of the educators thought that both are equally good**, whereas the other 50% thought face-to-face teaching is little or clearly better.

	N	Percentage
Both are equally good	2	50.0%
Traditional face-to-face teaching is clearly better	1	25.0%
Traditional face-to-face teaching is a little better	1	25.0%
The BlueEye live stream video system is a little better	0	0.0%
The BlueEye live stream video system is clearly better	0	0.0%
I cannot say	0	0.0%

In response to the question whether BlueEye video sessions added value to the learning of students/trainees in their teaching events, **75% agreed** and 25% disagreed out of 4 respondents.

	N	Percentage
No	1	25.0%
Yes	3	75.0%

Strengths and Limitations of the report

This report uses the results from a survey of educators and students and gets the perspective of both sides of the technology which is really useful. We see the challenges and improvements that can be made as a result of the survey.

We have used 5-point Likert scale to collect responses from the educators and the students which makes it easy for the responders to choose suitable options based on their experiences while providing the quantitative data suitable for analysis.

One of the limitations of the scale is that it does not allow the participants to express their opinion in detail. The sample size of responders (4 educators and 27 students) is smaller than ideal. The number of educators could have been bigger and this would have made more significant results for the survey.

The review and analysis include in this report is based on one educational scenario i.e. Pediatric training.

Conclusion

Remote online training with a solution like BlueEye Classroom can partly replace or support classroom training as it facilitates training to many students, **makes training possible despite travel restrictions, saves time for the students, makes it easier for the students to attend the training sessions, and reduces the amount of space required for teaching.**

In-classroom training has its own merits as it provides an optimal learning environment to the students and a higher sense of control on class proceedings to the educator. Additionally, in-classroom programs do not have to deal with the technical difficulties such as unreliable internet connection and hardware issues, that may arise in the case of remote training.

The participants in the pilot, educators and students, felt that BlueEye Classroom wearable video is an easy-to-use solution, which made it easy to connect with the trainer, suited the type of medical teaching (pediatrics) and achieved competence goals. BlueEye Classroom enabled the delivery of medical tutorials which would have not otherwise been possible due to travel restrictions.

The results from this pilot show that BlueEye Classroom is an effective solution for the delivery of medical demonstrations to a large group of remote students. The participants in the pilot agreed that **BlueEye added significant value to their learning/teaching.**