# A Survey on Augmented Reality in Medical Education

Tanisha Gour; Sameer Randive; Dr. Sandhya Dahake Dept. Of MCA, GHRCEM, India

#### Abstract

Augmented Reality (AR) has the potential to revolutionize medical education by delivering a more immersive and interactive learning experience. This paper assesses current AR usage in medical training and evaluates its potential to change learning outcomes using a survey-based questionnaire. Specifically, it studies the perceptions of students and educators regarding the role of AR in demystifying complex topics like anatomy and surgical procedures. In this paper the discussed methodology is the distribution of a structured questionnaire among medical students and faculty. Results prove conclusively that AR involves learners, improves retention, and offers simulations. However, the study realistic identified certain challenges, including cost and technical issues. This further reinforces the growing recognition that AR has a future in medical education.

With rapid advancements in the incorporation of augmented reality (AR), medical education is experiencing a revolution in highly interactive and emergent learning technology.

## **Keywords:**

Medical Education, Augmented Reality, Survey, anatomy, surgery, radiology, Applications.

## 1. Introduction

Medical sciences have always been in a quest for innovations in teaching to ease learning in classes that require much understanding of complex and, often, abstract entities such as human anatomy, pathology, and surgical procedures. For a better part of the training, instruction has been mainly through

traditional means of teaching with lectures, textbooks, and dissections in cadavers. With advances in technology, however, instructors have been able to offer new means to enhance student participation and improve instructional effectiveness more than ever before.One of the promising technologies most to connect theoretical education and clinical practice is augmented reality (AR). AR facilitates the interaction and manipulation of digital content superimposed on real-world entities, thereby creating more engaging, immersive. and interactive learning environments. AR applications in the field of medical education encompass a whole range of applications, from anatomy visualization, surgical simulation, to diagnostic training. With AR, this greater interactivity and involvement lead to a stronger grasp of anatomical concepts and medical procedures that had previously proved quite difficult to teach.

Although there is much enthusiasm surrounding AR in education today, still it is a growing process that is coming to improvement as applied in medical training fields. A comprehensive study and analysis of the effectiveness of AR concerning the medical industry are also quite scanty. This survey intends to Title Application of AR in Medical Education from current applications, anticipated advantages, challenges, and future possibilities in this field. Surveying medical students and educators would bear fruit as this research aims to produce meaningful insights into how AR is influencing and merging into the medical curriculum and changing student learning outcomes [1].

#### 2. Literature Review

A Historical Overview of Augmented Reality in Medical Education

AR technology in medical education has opened new horizons for teaching and understanding medical concepts and procedures. The paper discusses the present scenario of AR in medical education, from applications to effectiveness, as well as challenges surrounding the technology.

## • AR in Anatomy and Radiology Education

Though AR has applications in most domains of education, anatomy and radiology are considered the greatest beneficiaries in the medical field. Such approaches, like cadaver dissections, static images, and textbooks, normally do not provide sufficient context for a thorough understanding of anatomical structures and the context.

They must be supplemented with digitized interactive AR structures that allow the students direct 3D manipulation of anatomical objects for a dynamic, interactive learning process. For example, Marques et al. (2020) say that AR enables students to visualize organs, bones, and tissues in many different ways to understand very anatomical complex structures better. In radiology, it allows the overlay of the diagnostic images, for example, X-rays or MRIs, onto a human body to make it possible to view those medical images in real time as it were positioned within a real body. This therefore increases the understanding of students and practitioners on the relations between anatomical findings and diagnostic data, thus improving their diagnostic skills in clinical decision-making [2].

## • AR in Surgical Education and Training

Altered reality introduced by augmented reality has revolutionized surgical education via immersive surgical simulation, enabling surgical procedures to be practiced in a simulated setting, giving students a hands-on, risk-free, repeatable learning experience.

For example, research such as azuma et al., 2001, indicates that AR-based surgical simulation training has effects on the procedural knowledge and skills acquisition of students when they are finally exposed to

realistic surgical situations. Furthermore, "augmented reality" can be applied in the operating room by projecting patient-specific data or anatomy landmarks directly into the field of view of the surgeon, thereby making the surgical procedure more accurate and safe [3].

• Advantages of AR in Medical Education One of the primary benefits that AR can offer to medical education would interactiveness that it would offer in learning. Interaction with 3D models and simulations gives students possibilities to learn those concepts that could rarely be understood fairly through traditional modes of instruction. Creating a more engaging and more highly immersive learning environment through AR makes student engagement stronger and knowledge retention easier. Again, it makes learning personal: One learns at the pace they want, going back to difficult concepts or issues, and practicing clinical skills without interference due to time or availability of resources. This acquaintance with personalized learning particularly is important in those clinical disciplines where actual competency and hands-on experiences matter the most [6].

## • Challenges in Implementing AR

The implementation of AR in medical education has its challenges even with the positives. A significant hurdle would be the cost incurred in developing AR applications or in terms of acquiring the hardware, such as AR glasses, headsets, and high-performance computing systems, which weighs heavily on the finances of an educational institution. These costs slow down the acceptance of AR learning tools in certain parts of the world. Another challenge is that there is no standardized content. Despite being numerous, the applications available differ greatly in the quality of the instructional design. The absences of approved universal AR content standards put into question the possibility of educators adequately

identifying high quality, evidence-based materials for their students. In a similar vein, the interdisciplinary development of AR applications involves expertise from software developers, domain experts, and educators, which in itself can be a maze of timelines and poor communication. Technical limitations also throw difficulties into the ring. While AR technology has taken leaps and bounds in development, disallowed device incompatibilities, software glitches, and the need for enormous computing resources can spoil the end-user experience and integration into the curriculum all by themselves [7].

#### • Future Directions

The future of AR applications in medical education offers great promise: Longitudinal studies to assess the long-term effects of AR on student performance concerning clinical practice and patient care should be the areas of focus for future research. The next step is to create lowcross-platform AR cost, tools for easy accessibility to learn and correlate real-world data from medical environments. Additionally, studying AR's interoperability with other technologies, such as VR and AI, can provide a framework for more advanced and personalized learning environments. A combination of AR and AI could be used to assess student performance in real-time and create personalized learning paths for students based on their specific needs. In this way, a medical education program could be further strengthened through pursuing these future directions [8].

## 3. Methodology

The methodology for the present survey study entails an extensive review of pertinent literature, case studies, and empirical data related to the integration of Augmented Reality (AR) within medical education, while this section describes the research design, data collection method, and analysis tools employed to investigate the effects, efficacy, and limitations of AR in the playing field of medical education [8].

#### **Research Method**

To describe how augmented reality is applied in medical education and what kind of impact it has on the area, this research design is clear and detailed. A qualitative design of research would be followed to search and synthesize previous literatures, case studies, and reports from institutions of using AR technology. It would lead to mile-wide data in order to discern some of the general trends, benefits, and challenges of using AR in medical training [4].

## Data Collection

#### 1. Literature Review:

The primary method was through a literature review of peer-reviewed articles, books, conference papers, and reports concerning AR in medical education.

## 2. Surveys&InterviewsARLearningTool Survey and Interview:

Surveys and interviews were conducted with medical educators, AR developers, and students experienced with AR learning tools. Sample survey items covered perceived effectiveness, benefits, and challenges with AR tool use: the type of AR tools, how often they use these tools ,influence on learning and engagement,obstacles toward integration, and

view points on future incorporation [10].

## 3. Case Study Analysis

Most of which were conducted in medical institutions using the integrative approach of AR. Using such case studies, it evaluated how effective AR is in learning about and teaching anatomy, surgery, and radiology [11].

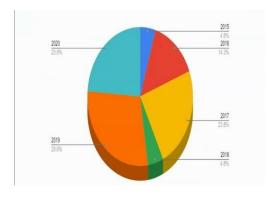
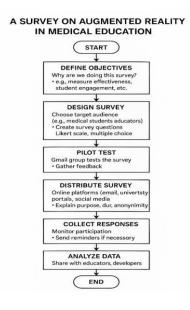


Fig.1 Year wise growth using AR



<u>Fig.2</u> Uses of AR in Medical Education

This flowchart clearly outlines the logical steps needed to conduct a systematic and professional survey on the use of Augmented Reality (AR) in medical education.

## 5. Conclusion

The current methodology describes a mixedmethods approach for exploring the role of augmented reality (AR) in medical education. This will be achieved through a combination of literature reviews and primary data collected through surveys, interviews, and case studies. The goal of this study is to provide a comprehensive view of the current state of augmented reality (AR) in medical training, the challenges it faces, and its potential for future development.

This study outlines a mixed-methods approach for investigating the use of AR in medical education. While the methodology combines literature reviews with primary data collection through surveys, interviews, and case study analysis. Finally author concludes that, the study aims to develop a comprehensive overview of the current state of AR in medical training, the challenges that it faces, and possible future directions for development [9].

## 6. References

1.Eckert M, Volmerg JS, Friedrich CM, et al. Augmented reality in medicine: systematic and bibliographic review. JMIR Mhealth Uhealth. 2019;7(4). DOI: 10.2196/10967. [DOI] [PMC free article] [PubMed] [Google Scholar]

2. Milgram P, Kishino F. A taxonomy of mixed reality visual-displays. IEICE TRANS Inf Syst. 1994;E77d(12):1321–9. [Google Scholar]

3. Vázquez R. Educational strategies applied to the teaching of anatomy. The evolution of resources. Eur J Anat. 2019;11(S1):31– 43. [Google Scholar]

4. Walsh R, Bohn R. Computer-assisted instructions: a role in teaching human gross anatomy. Med Educ. 1990;24(6):499–506. [DOI] [PubMed] [Google Scholar]

5.Stensaas SS. Animating the curriculum: integrating multimedia into teaching. Bull Med Libr Assoc. 1994;82(2):133. [PMC free article] [PubMed] [Google Scholar]

6.Carmichael SW, Pawlina W. Animated powerPoint as a tool to teach anatomy. The Anatomical Record: An Official Publication of the American Association of Anatomists. The Anatomical Record. 2000;261(2):83– 88. [DOI] [PubMed] [Google Scholar] 7.Baatz S Medical science and medical informatics: the visible human project 1986-2000. in the history and heritage of scientific and technological information systems. Proceedings of the 2002 Conference, Medford, Information Today, 2004. New York, USA. [Google Scholar]

8. Doyle MD. The visible embryo project: embedded program objects for knowledge access, creation and management through the world wide web. Computerized Med Imaging Graphics. 1996;20(6):423–431. [DOI] [PubMed] [Google Scholar]

9. Trelease RB. The virtual anatomy practical: a stereoscopic 3D interactive multimedia computer examination program. Clinical Anatomy: The Official Journal of the American Association of Clinical Anatomists and the British Association of Clinical Anatomists. linical Anatomy (New York). 1998;11(2):89– 94. [DOI] [PubMed] [Google Scholar]

10. Sutherland IE A head-mounted three dimensional display. In Proceedings of the December 9-11, 1968, fall joint computer conference, part I, 1968, San Francisco, California: ACM, p. 757–764. [Google Scholar]

11. Rizzo A. Virtual reality exposure therapy for combat-related PTSD, in Posttraumatic stress disorder. Springer, Switzerland ; 2009. p. 375–399. [Google Scholar]

12. Molnar A. Content type and perceived multimedia quality in mobile learning. Multimed Tools Appl. 2017;76(20):21613–21627. [GoogleSchola]