

Table S1 Evaluation comments from learners

1. The simulation was realistic enough for me to engage in learning?	2. The simulation exercise helped me improve my technical skills?	3. The simulation exercise was clinically applicable to my practice?	4. I will change my practice as a result of this simulation exercise	5. Comments
Good for learning how to guide fiberscope	Manipulating fiberoptic scope	I look forward to coming back!	Hope to use fiberoptic intubation more effectively	Great. Can also recommend participants to watch videos before the workshop at home—maybe more time for hands-on learning. Also maybe more realistic if do anesthetic prep/medicate patient beforehand too
The eye blinking was too real!	Would like more time to practice and less on the videos	Planning was a highlight as it makes you think about meds in additional to technique	These concepts were already part of practice—just need to get better at guiding scope!	Less video time; more play time
When the mannequins are so obvious it's hard to view it realistically. Also, pretending to have equipment or drugs not really present takes away from realistic scenarios	Working with scope itself	The hands-on portion very helpful. Experience in a team setting was helpful as well	I've had practice with this before but it was good to practice	The art of topicalizing for awake FOI is something I am less comfortable with than the actual intubating itself. Was helpful to practice nasal as I am also less able at those than oral
I think it would have been more realistic to have 1 "resident" and 1 "attending" doing this simulation instead of so many people.	Handling fiberoptic scope in sim setting (less pressure than actual clinical setting) with real time feedback from peers		Techniques for topicalization	Overall I thought it was a very educational as well as informational. Only thing that may improve would be to physically go over the steps for awake intubation
Would suggest making adverse events (i.e., apnea) in response to versed/fentanyl to throw a wrench	But mannequins have rigid and dry structures so it's almost easier to do procedures on them		Using the checklist supplied to create a systematic approach to care	Would be even more helpful to have this earlier in residency
Needed more time—scheduled for 1 hour but went over. I think we all though we needed be keep moving fast	Use of scope		Although it is easy to make a plan, need a back up plan and to think more thoroughly about all risks and benefits of the plan	I am happy to be intubated awake by my colleagues in the future!
	FOB manipulation			Great program!
	It was good to have a few minutes with the scope to practice		Better topicalization sedation. Also now I have a better understanding of some of the difficulties like anxiety issues	Split up groups to allow focused learning. Rile play OR personnel to make it more real. Vital signs are a critical portion of our care. It will cue us to change what we are doing in a positive way
	Using FOB scope. Every time you get your hands on it, you improve! Simulation allows you to go slowly enough to get a better feel for how to handle the scope			Separate skills practice location from the case
				Early steps of learning—every repetition helps
				Just to save cost for the program, I think we can use "fake" medications instead of real ones. Thank you very much for organizing this! Please organize this more often, so helpful!
				Would like more time to practice awake nasal intubations, even though it is a skill we can rarely take advantage of
				It was a great opportunity to practice skills—since I rarely have the chance
				When starting the simulation cases, it would be more beneficial to "set the stage" prior to entering the operating room (i.e., assigning a team leader/assigning specific people to specific tasks)
				A more clear idea, now, of which meds and doses to use for awake FOIs
				Thank you—very nice exercise
				Finish on time (schedule it longer if necessary) allow a longer amount of time for the exercise. Clarify the goals of this sim
				Mannequin was too easy to intubate, so didn't find technically challenging
				Providing enough time for the tams to come up with a plan

FOI, fiberoptic intubation; FOB, fiberoptic bronchoscopy.