

Supplemental Material

Appendix A

Table 6 | Post-Intervention Clinical Staff Feedback (n=8)

Question	"Yes" Response N (%)
1. Were your job/duties interfered with at any time during the VR study? Either with a patient receiving the VR program or otherwise?	0 (0%)
2. Do you believe the VR program socially isolated any patient during the entirety of their treatment session?	0 (0%)
3. Did research staff prevent you from providing adequate care to any of the patients in the dialysis center, at any time while the study was on going?	0 (0%)
4. Do you feel the VR study was well received by the entire staff?	8 (100%)
5. Do you feel the VR program was well received by the patients?	8 (100%)
6. Did you have any difficulties communicating with any patient while they received the VR program?	0 (100%)

Appendix B

Simulator Sickness Questionnaire (SSQ)

Item Response Options

None = 0, Slight = 1, Moderate = 2, Severe =3

SSQ Symptoms

General discomfort

Fatigue

Headache

Eye strain

Difficulty focusing

Increased salivation

Sweating

Nausea

Difficulty concentration

Fullness of head

Flurred vision

Dizzy (eyes open)

Dizzy (eyes closed)

Vertigo

Stomach awareness

Burping