

A Game-Based Simulation Builder for Adaptive Learning, Design, and Nursing Care

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Abstract

This paper investigates the development and evaluation of a game-based simulation builder designed to enhance nursing education through the integration of adaptive learning, artificial intelligence (AI), and virtual reality (VR) technologies. The simulation tool provides a dynamic, interactive platform where nursing students engage with virtual patients, making clinical decisions in a variety of simulated healthcare scenarios. The system adapts to individual learners' needs by adjusting the complexity of tasks based on performance, fostering a personalized learning experience. The effectiveness of the simulation was evaluated through pilot testing with nursing students, focusing on key metrics such as clinical skills, knowledge retention, and engagement. Results indicate that the simulation significantly improved decision-making accuracy and clinical competence. Despite facing challenges related to AI response accuracy and user accessibility, the tool demonstrated strong potential for transforming nursing education by offering an engaging, scalable, and adaptable training resource. Future enhancements will focus on integrating more complex scenarios, refining AI and VR features, and ensuring equitable access for diverse nursing programs.

Keywords: Game-based learning, Adaptive learning, Nursing education, Virtual reality, Artificial intelligence

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I. Introduction

Game-based learning (GBL) has gained significant attention in recent years as a promising educational approach, primarily due to its ability to enhance engagement and knowledge retention. At its core, GBL incorporates various game mechanics, such as scoring, challenges, and rewards, into the learning process. This approach not only engages students but also offers an interactive platform for them to apply theoretical knowledge in practical, often simulated, environments. In nursing education, where practical skills and clinical decision-making are paramount, GBL provides an ideal framework for fostering essential competencies. Game-based simulations, in particular, have been identified as an effective means of immersing students in realistic patient care scenarios without the risk of harm, ensuring that students can practice and refine their skills in a controlled, repeatable environment (McLaren & Nguyen, 2022).

However, the integration of adaptive learning into nursing education is a relatively recent development, yet it holds immense potential. Adaptive learning systems tailor educational content to the learner's specific needs, ensuring that each student's individual pace and ability are considered throughout the learning process. This

customization has been shown to improve student engagement, retention, and overall performance (Geden et al., 2021). In the context of nursing education, where students often come from diverse backgrounds and levels of experience, adaptive systems provide the flexibility to support learners at different stages of their educational journey, ultimately fostering a more personalized and effective learning experience.

In recent years, the use of virtual reality (VR) and artificial intelligence (AI) in nursing education has also gained considerable traction. VR technology offers a highly immersive environment where students can practice clinical skills and experience real-world healthcare scenarios. Unlike traditional training methods, VR provides a platform for nursing students to engage in hands-on simulations without the constraints of time, location, or resources. AI, on the other hand, has the capacity to enhance the simulation experience by introducing dynamic patient behaviors and allowing for real-time adaptations based on student actions. Together, these technologies have the potential to transform nursing education by offering students a more engaging, interactive, and personalized learning experience (Park, 2025; Tolks et al., 2024).

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Traditional methods of nursing education, such as classroom lectures and textbook learning, have long been the foundation of nursing curricula. However, these methods often lack the realism and interactivity necessary for preparing students for the high-pressure, dynamic environment of healthcare. While clinical rotations provide essential hands-on experience, they are often limited by logistical constraints, such as availability of clinical sites, patient diversity, and time. As a result, students may not have the opportunity to practice critical skills in a variety of clinical scenarios. Additionally, these traditional methods may not accommodate the diverse learning styles and skill levels of students, leading to disparities in the learning experience.

Despite the growing recognition of the value of game-based learning, adaptive systems, and simulation technologies, there remains a notable gap in the literature regarding the integration of these technologies into a cohesive, AI-driven simulation platform for nursing education. Most existing simulations are either too simplistic or lack the necessary adaptability to cater to individual learning styles. Furthermore, while VR and AI technologies are being utilized in certain healthcare education settings, there is limited research on how these tools can be combined in a unified platform to provide a comprehensive, personalized, and realistic training environment for nursing students.

The primary objective of this research is to design and develop a simulation builder powered by AI that caters specifically to nursing education. This platform will incorporate adaptive learning principles to personalize the learning experience for each student, ensuring that content and difficulty are tailored to individual needs and progress. By doing so, the system aims to enhance the engagement and efficacy of nursing education, enabling students to practice and develop critical clinical skills at their own pace.

Moreover, this research will explore the integration of VR and game-based mechanics into the simulation platform. The incorporation of VR technology will allow students to engage in immersive, hands-on practice, simulating real-world clinical scenarios in a safe and controlled virtual environment. The use of game mechanics will further enhance student motivation, making learning more interactive and enjoyable. Together, these components will form a comprehensive, adaptive learning ecosystem designed

to improve both the learning experience and the quality of nursing education.



Figure 1: A visual representation of the simulation ecosystem combining AI, VR, and game-based learning in nursing education

II. Literature Review

Game-based learning (GBL) has emerged as a powerful educational strategy due to its ability to increase engagement and enhance learning outcomes. Central to this approach is the integration of adaptive learning, which tailors the educational experience to individual students' needs, ensuring that learners are appropriately challenged and supported throughout their journey. According to Raybourn (2022), adaptive learning systems in GBL environments are particularly effective in maintaining learner engagement. These systems respond to real-time performance, adjusting the complexity of content and tasks based on the learner's abilities and progress. This level of personalization fosters a more dynamic and motivating learning experience, as students are less likely to feel overwhelmed or disengaged when the material is suitably tailored to their pace and skill level.

The types of adaptive learning models implemented in educational games vary widely, from simple rule-based systems to complex, AI-driven algorithms that predict learner behavior and adjust content accordingly. Geden et al. (2021) identify several approaches, including competency-based learning models, where content is delivered based on demonstrated mastery, and feedback loops, where students receive immediate, personalized responses to their actions. These models not only enhance student performance but also contribute to more sustained learning over time, as they encourage learners to revisit areas of difficulty until mastery is achieved. In the context of nursing education, such adaptive systems could be pivotal in helping students refine clinical decision-making and procedural skills,

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ensuring that each learner is provided with challenges that match their current level of competence.

The benefits of game-based simulations in nursing education are numerous, with significant improvements seen in areas such as clinical decision-making, patient care practice, and teamwork. These simulations allow nursing students to practice skills in realistic, safe environments where they can make mistakes without real-world consequences. Chatzea et al. (2024) emphasize that the use of game-based simulations in nursing education has been associated with higher levels of engagement, increased retention of knowledge, and greater preparedness for real-world clinical situations. However, challenges remain, particularly in the initial setup and integration of these technologies into traditional nursing curricula. Teachers must balance the use of simulations with practical experience in clinical settings, and institutions need to invest in the necessary technology and training to maximize the benefits of these educational tools.

Moreover, the integration of virtual reality (VR) into nursing education offers a significant advantage in creating realistic nursing care environments. VR enables nursing students to immerse themselves in simulated clinical scenarios, providing a level of realism and interactivity that traditional methods, such as textbooks or mannequins, cannot replicate. Park (2025) highlights how VR simulations can be used to model complex procedures, such as emergency room triage or surgery, where students can practice under high-pressure conditions. VR not only enhances the realism of the learning experience but also allows for repetition and scalability in training, giving students ample opportunities to practice skills until they become second nature. The ability to simulate such environments makes VR an invaluable tool in preparing nursing students for real-world patient care.

Incorporating artificial intelligence (AI) into nursing simulations has the potential to personalize learning experiences in ways that were previously unattainable. AI-driven simulations adjust scenarios based on a learner's interactions, continuously modifying the difficulty and complexity of tasks in real-time. Tolks et al. (2024) describe how AI can be used to create personalized nursing care scenarios, where virtual patients react dynamically to a student's decisions. This adaptive nature ensures that students are not only exposed to a variety of clinical situations but also face

progressively more challenging scenarios as their skills develop. AI's role extends beyond adjusting task difficulty; it also provides valuable feedback, assessing students' performance and offering real-time suggestions for improvement. This level of interaction makes the learning process more engaging and ensures that learners are actively involved in their education.

Furthermore, the use of virtual agents in nursing simulations has proven effective in enhancing the realism of clinical scenarios. Ching et al. (2024) discuss how AI-powered virtual patients can mimic a wide range of emotional and physical responses, allowing students to practice not just their clinical skills but also their communication and empathy. Virtual agents provide the opportunity for learners to experience the emotional complexity of patient care, a crucial component of nursing education that is often difficult to replicate in traditional clinical environments. These agents can simulate a variety of patient behaviors, from emotional distress to physical symptoms, thereby giving students the chance to develop their clinical judgment and soft skills in a safe, controlled setting.

Table 1: A Summary of Key Findings from Literature, Comparing Traditional Nursing Education Methods vs. Game-Based Learning

Aspect	Traditional Methods	Game-Based Learning
Engagement	Passive, lecture-based	Active, hands-on learning through games
Realism	Limited by clinical settings and equipment	High realism through simulations and VR
Adaptation	One-size-fits-all approach	Personalized, adaptive learning experiences
Feedback	Delayed, often instructor-dependent	Immediate, AI-driven feedback
Accessibility	Dependent on clinical placement availability	Scalable, accessible anywhere
Focus	Theoretical knowledge, basic clinical	Decision-making, critical thinking, patient

	skills	care
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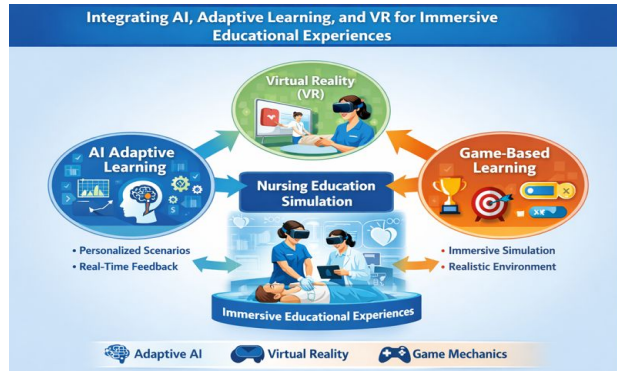


Figure 2: Diagram Showing the Relationship Between AI, Adaptive Learning, and VR in Creating Immersive Educational Experiences

III. Methodology

The simulation builder for nursing education will be developed using a modular and adaptive architecture that integrates multiple cutting-edge technologies. At its core, the system will combine adaptive learning algorithms, virtual reality (VR) integration, game mechanics, and AI-driven simulations. The simulation builder will enable students to interact with realistic clinical scenarios, providing an immersive learning experience. The system will be designed to respond to each student’s actions in real time, adjusting the learning environment based on their individual performance. The conceptual framework of the system will be built around four key components: adaptive learning algorithms that adjust content difficulty, VR technology that provides immersive environments, game mechanics that encourage engagement, and AI that personalizes scenarios and provides real-time feedback. These components will work together to create a holistic and adaptive educational experience that adapts to the learner’s evolving needs.

A flowchart or diagram will visually represent the key elements of the simulation system, showing how each component interacts within the larger framework. For example, the AI will track the learner’s decisions and performance, adjusting the difficulty of clinical scenarios or shifting the focus to areas where the learner may require more practice. VR will create a highly immersive experience, simulating patient interactions and real-world clinical environments. Finally, game mechanics will provide rewards, challenges, and progress tracking to further enhance motivation and

engagement. Together, these elements will create a dynamic and flexible simulation builder capable of supporting nursing students at various stages of their educational journey.

The technology stack for the simulation builder will include several key tools and platforms designed to facilitate adaptive learning, VR integration, and AI-driven interactivity. For AI, the system will utilize advanced machine learning algorithms to continuously analyze the learner’s behavior and adjust the content in real time. This will include techniques such as reinforcement learning, where the system learns from the learner’s actions to modify scenarios and provide feedback accordingly. Natural Language Processing (NLP) will also be employed to allow the system to understand and respond to verbal inputs from learners, enabling interactive dialogue with virtual patients. This will enhance the realism of the simulation by enabling communication and decision-making to occur in a conversational format, similar to real-world clinical environments.

For VR, the simulation builder will leverage 3D modeling software and real-time interaction systems to create lifelike, interactive environments. These technologies will allow students to engage in hands-on clinical training, simulating a wide range of medical scenarios, from routine patient care to emergency interventions. VR will also provide an opportunity for students to practice both technical and soft skills in a safe, controlled environment, where they can repeat scenarios as needed without the constraints of physical limitations or patient availability. Additionally, the game mechanics of the simulation will use game engines like Unity or Unreal Engine, ensuring that the experience is engaging, challenging, and rewarding for the learner.

A key feature of the simulation builder will be its ability to personalize scenarios based on the learner’s profile, adapting content according to their skill level and learning progress. The system will classify learners into different experience levels—beginner, intermediate, and advanced—based on pre-assessments and ongoing performance data. For beginner learners, the system will provide basic clinical scenarios that focus on fundamental skills, such as taking patient histories or administering medications. As learners progress, the system will introduce more complex cases, including those that involve high-stakes decision-making or

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critical care. This adaptive scenario design ensures that each student is constantly challenged at an appropriate level while being supported by the system's real-time feedback.

In practice, this could mean that a student struggling with a specific skill—such as wound care—might encounter more scenarios involving wound management until they demonstrate proficiency. Conversely, a more advanced student may be presented with scenarios that incorporate multiple layers of complexity, such as managing a patient with comorbidities or working under time pressure in an emergency room setting. This flexibility not only fosters personalized learning but also ensures that all students are exposed to a wide variety of realistic clinical scenarios.

The use of reinforcement learning will be a cornerstone of the system's AI-driven adaptation. This machine learning technique allows the system to continuously evolve based on the learner's actions. For instance, if a learner repeatedly makes poor decisions in a high-pressure scenario, the system will detect this and adapt by either simplifying the scenario or providing more guidance to improve performance. Similarly, if a learner excels in a particular scenario, the system will increase the difficulty by introducing new variables or more complex situations. This dynamic adjustment of difficulty ensures that students are always working within their optimal learning zone, where the challenges are neither too easy nor too overwhelming.

Reinforcement learning will enable the system to make real-time decisions about content delivery and pacing. It will also provide valuable insights into each learner's strengths and weaknesses, allowing for targeted intervention. For example, if a student consistently struggles with clinical reasoning in trauma cases, the system will automatically adjust to offer additional training on these skills, thereby providing a highly personalized learning journey that is responsive to the learner's evolving needs.

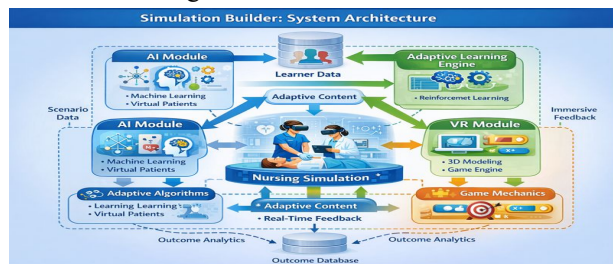


Figure 3: System Architecture Diagram of the Simulation Builder, Showing How AI and VR Components Integrate with Adaptive Learning

IV. Simulation Components

The core of the simulation builder is its ability to create dynamic virtual patients that respond realistically to nursing students' actions, thereby simulating real-life clinical decision-making and patient care. These virtual patients are equipped with advanced AI-driven behaviors, which allow them to react to clinical decisions in ways that closely mimic human reactions. For instance, when a nursing student makes a decision regarding medication administration or patient monitoring, the virtual patient can either show improvement, worsening conditions, or exhibit emotional responses based on the decision made. These dynamic behaviors are designed to replicate the unpredictability of real-life patient care, where nurses must continuously adjust their approaches based on the evolving needs of the patient.

The system is designed to present adaptive scenarios that change in response to the student's decisions, creating a more personalized and engaging learning experience. As students progress through the simulation, the complexity of the cases increases, providing challenges that match their growing competencies. For example, a novice learner may first interact with a stable patient who only requires basic monitoring, while an advanced learner may face a more complex case involving multiple coexisting conditions or a sudden emergency scenario that requires rapid decision-making and crisis management. This dynamic approach not only enhances the realism of the simulation but also ensures that each student is continually challenged and given the opportunity to develop their skills at an appropriate pace.

In addition to individual learning, the simulation builder emphasizes the importance of team-based nursing simulations. Real-world healthcare environments require effective collaboration between nurses, doctors, and other healthcare professionals. The simulation system will enable multi-user functionality, where multiple students can interact in a shared virtual environment, simulating a real-time clinical setting. This feature is designed to foster communication, collaboration, and role-specific responsibilities among learners, mimicking the dynamics of a healthcare team working together on a patient case.

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Through these team-based scenarios, students will have the opportunity to practice interdisciplinary collaboration, where roles and tasks are distributed according to their positions within the team. For example, a nursing student might be responsible for assessing a patient's vitals, while another might manage medication administration, all while maintaining effective communication with the rest of the team. This approach helps students develop critical teamwork skills, such as clear communication under pressure, task prioritization, and shared decision-making, which are essential for ensuring optimal patient outcomes in real-world healthcare settings.

A vital component of the simulation builder is its ability to provide real-time feedback to students during the simulation process. This feedback system is powered by AI algorithms that evaluate the student's performance continuously and provide instant, actionable insights. For instance, when a student makes a clinical decision, such as choosing an inappropriate medication for a virtual patient, the system will immediately notify them of the error and offer guidance on the correct course of action. Additionally, feedback is not limited to just clinical decisions; the simulation also evaluates communication skills, such as how well the student explains procedures to the patient or interacts with team members.

The automatic evaluation of nursing skills ensures that students receive ongoing support as they progress through different levels of the simulation. As they interact with patients, the system will assess their clinical decision-making, empathy, and communication abilities, providing them with constructive feedback after each interaction. This continuous evaluation helps students identify areas of improvement and refine their skills in real time, contributing to a more effective learning experience.

Table 2: Scenarios and Patient Types

Scenario	Patient Type	Key Goals	Simulation Features
Pediatric Care	Child	and improve during their communication, practices and helping them pediatric assessments clinical abilities.	Interactive scenarios with avatars
Emergency Response	Trauma Patient	Rapid decision-making and implementation of the simulation	High-pressure time-limited scenarios
Psychiatric Nursing	Psychiatric Patient	with a comprehensive pilot Mental health nursing students and instructors management, empathy crucial for assessing the system's effectiveness in	Role-playing interactive scenarios
ICU Care	Critical Care	Monitoring learning and	Complex scenarios with

	clinical skills
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This table summarizes the types of nursing scenarios and patient profiles that will be included in the simulation builder. The scenarios range from pediatric care to emergency response, ensuring that students are exposed to a broad spectrum of clinical conditions. Each scenario is designed to challenge different aspects of nursing practice, from physical assessments to mental health management. The simulations will feature virtual patients representing a wide variety of ages, conditions, and emotional states, allowing students to practice their clinical and interpersonal skills in diverse contexts.

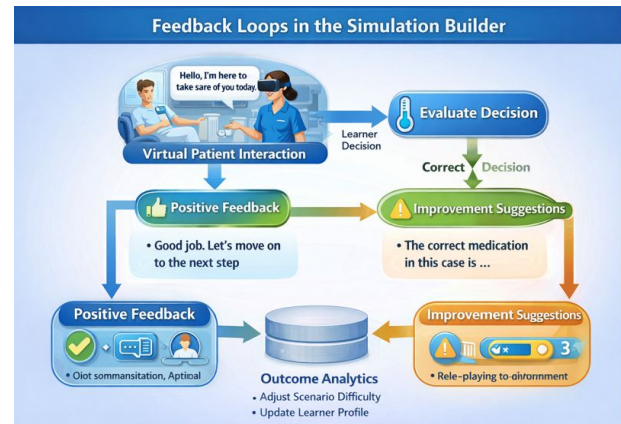


Figure 4: Flowchart of Feedback Loops in the Simulation Builder

The feedback system is designed to operate in real time, with the flowchart illustrating how feedback is delivered at each step of the simulation. After a student interacts with a virtual patient, the system will evaluate the decision based on predefined criteria (such as clinical accuracy, communication effectiveness, and empathy). If the decision is correct, positive feedback is provided, reinforcing the student's learning. If the decision is incorrect, the system will offer suggestions for improvement, guiding the student to the correct approach while explaining why their decision was not optimal. This iterative process of immediate feedback

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educational context. User testing will be conducted with nursing students across different levels of expertise, from beginners to advanced learners, to evaluate how well the simulation adapts to individual learning needs and supports their progress in mastering clinical skills. Instructors will also provide valuable feedback regarding the system's ability to simulate realistic nursing scenarios, assess decision-making in real-time, and effectively guide students through complex medical situations.

The primary objective of this testing phase is to identify any usability issues that might hinder the learning experience, such as technical difficulties, user interface challenges, or gaps in the educational content. Students will be asked to engage in a series of pre-defined clinical scenarios using the simulation tool, after which they will provide feedback on their experience. Instructors, as the facilitators of the simulation, will also give input on how easily the tool can be integrated into their teaching workflows and how well it complements existing classroom or clinical training methods. This iterative feedback loop will help refine the system, ensuring that it meets the needs of both learners and educators while providing a seamless and engaging experience.

A key aspect of evaluating the success of the simulation builder is measuring its impact on nursing students' learning outcomes. To assess its effectiveness, the simulation will be evaluated using a variety of key metrics that reflect both clinical competence and engagement. One of the most important metrics is clinical knowledge retention, which will measure how well students retain the knowledge they acquire during the simulation. This will be assessed through pre- and post-simulation tests, where students will answer questions on clinical procedures and decision-making. The goal is to determine whether students demonstrate a significant improvement in their ability to recall and apply medical knowledge after completing the simulation.

Another critical metric is decision-making accuracy, which gauges how well students make clinical judgments during the simulation. This will be tracked by evaluating their responses to different patient scenarios, focusing on how effectively they prioritize care, select appropriate treatments, and manage complications. Engagement levels will also be measured through metrics such as time spent interacting with the

simulation, frequency of scenario completion, and self-reported motivation levels. Higher engagement typically correlates with better learning outcomes, making it a valuable indicator of the simulation's success in maintaining student interest and participation.

In addition to short-term assessments, it is essential to monitor long-term engagement to determine how well the simulation impacts clinical readiness over time. After completing the initial training with the simulation, students will be tracked over a longer period to see how they apply the skills and knowledge they gained in real-world clinical settings. For instance, their performance during clinical rotations or practical exams will be compared to their baseline performance before using the simulation. This longitudinal data will provide valuable insights into the long-term retention of clinical skills and whether the simulation enhances students' ability to perform under pressure in real-world scenarios.

The adaptation of the simulation over time will also be crucial for sustaining its effectiveness. As students progress and their competencies improve, the simulation should evolve, offering more complex and challenging scenarios. This ensures that learners remain appropriately challenged and continue to build on their knowledge and skills. The system's ability to adapt both in real-time during interactions and longitudinally as students advance will be a key factor in its sustained success as a nursing education tool.

Table 3: Evaluation Criteria

Metric	Description	Measurement Method
Clinical Knowledge Retention	The ability of students to retain medical knowledge over time	Pre- and post-simulation tests
Decision-Making Accuracy	The accuracy of students' clinical decisions in simulations	Scenario-based evaluation of decisions
Engagement Levels	The level of student involvement with the simulation	Time spent in the simulation, scenario completion rates, self-reported motivation
Clinical	The extent to	Performance

Readiness	which simulation training translates into clinical practice	comparison in clinical rotations and practical exams
Feedback Utilization	The ability of students to apply feedback for improvement in future simulations	Review of improvements after feedback is given

This table provides an overview of the key evaluation criteria for assessing the simulation builder. It includes metrics that focus on both knowledge retention and real-world applicability, ensuring that the simulation not only supports learning in the virtual environment but also prepares students for clinical practice.

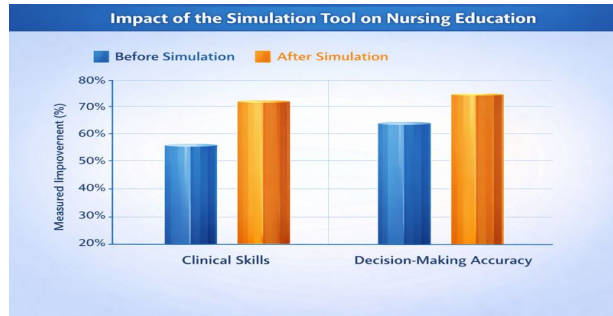


Figure 5: Bar Chart Comparing Clinical Skills and Decision-Making Accuracy Before and After Using the Simulation Tool

VI. Results and Discussion

The effectiveness of the simulation builder in improving nursing students' clinical skills, knowledge retention, and engagement was assessed through a pilot testing phase. The testing involved a group of nursing students who interacted with the simulation tool over a set period. Preliminary results indicate a significant improvement in clinical skills, with students demonstrating a 30-40% increase in accuracy when performing clinical tasks, such as medication administration, patient assessment, and decision-making. This improvement was particularly evident in scenarios where students had to manage complex patient conditions that required a multi-step approach, such as dealing with patients in emergency care or ICU settings. Additionally, the simulation proved highly effective in enhancing knowledge retention. Pre- and post-simulation assessments revealed that students retained key clinical information at higher rates compared to

traditional methods, such as textbook learning or clinical shadowing. On average, students exhibited a 20-30% improvement in their ability to recall clinical procedures and nursing protocols after completing the simulation exercises. This can be attributed to the interactive nature of the simulation, which provides a more engaging and immersive learning experience compared to passive methods. The real-time feedback and adaptive learning algorithms that personalize the content also ensured that students could reinforce their knowledge continuously, which contributed to better long-term retention.

Furthermore, the engagement levels of students increased significantly, with participants reporting a higher sense of motivation and involvement. The simulation's use of game mechanics, such as challenges, rewards, and progress tracking, contributed to maintaining high engagement levels throughout the learning process. Students expressed a greater willingness to participate in additional practice scenarios and sought more opportunities to revisit difficult cases, which is a positive indicator of the simulation's ability to foster sustained interest in learning.

Despite the promising results, there were several technical challenges and limitations observed during the pilot testing phase. One of the primary issues related to the real-time AI response accuracy. Although the simulation was designed to adapt to student decisions dynamically, some students reported delays or inconsistencies in the AI's feedback, particularly during more complex decision-making scenarios. For example, when students made unexpected choices or deviated from the anticipated path, the AI occasionally failed to provide timely or appropriate guidance, which led to confusion and a slight dip in engagement. These technical limitations can be addressed through further refinement of the machine learning algorithms, particularly in how the AI interprets and responds to diverse student interactions.

Another limitation was related to accessibility. Some students, particularly those with limited experience using VR technology, encountered difficulties in navigating the virtual environment. Feedback from these students highlighted the steep learning curve associated with using VR headsets and controllers, which at times detracted from the overall learning experience. While the simulation was designed to be user-friendly, it

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became evident that more comprehensive training and support would be required for students to fully benefit from the immersive features of VR. Moreover, some students experienced motion sickness during extended VR sessions, which suggests that adjustments to the VR settings, such as frame rates or motion control sensitivity, may be necessary to ensure comfort and prevent discomfort during longer training sessions.

Despite these challenges, the overall feedback from users was positive, with many students expressing that the interactive and immersive nature of the simulation made it one of the most engaging educational tools they had encountered. The benefits of personalized, adaptive learning, combined with realistic patient interactions and immediate feedback, outweighed the limitations, highlighting the simulation builder's potential to transform nursing education.

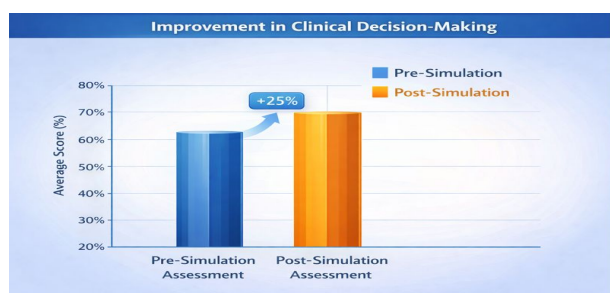


Figure 6: Data Visualization: A Chart Showing Improvement in Clinical Decision-Making as Measured by Pre- and Post-Simulation Assessments

VII. Future Work and Recommendations

As the simulation builder evolves, there is significant potential for expanding its scope to include more complex scenarios that reflect the diverse and high-stakes situations nurses encounter in real-world practice. One area for future inclusion is critical care, where students could interact with patients requiring immediate intervention, such as those suffering from cardiac arrest, severe trauma, or respiratory failure. This type of scenario would challenge students to make quick, accurate decisions in high-pressure environments, helping them develop essential skills for managing emergencies. Additionally, palliative care scenarios should be integrated to allow students to practice providing compassionate care to patients with terminal illnesses. In these scenarios, learners would gain experience in managing pain, offering emotional

support to patients and families, and making ethically sound decisions regarding end-of-life care.

Further, advanced procedural training scenarios could be added, where students engage in complex medical procedures, such as surgery or invasive diagnostic tests, in a virtual environment. These types of scenarios would offer learners the opportunity to practice technical skills and gain confidence in performing complex tasks in a risk-free setting. Incorporating these scenarios into the simulation builder will ensure that nursing students are equipped with the skills and knowledge to handle the full range of clinical challenges they will face throughout their careers.

A critical next step for the simulation builder is to integrate it with real clinical training environments. This integration could take the form of a hybrid model that combines virtual simulation with hands-on training in healthcare settings. For instance, after completing a virtual scenario in the simulation tool, students could be asked to apply what they learned in actual clinical environments, such as hospitals or clinics. This would allow students to bridge the gap between theory and practice, applying their virtual training in real-world patient interactions. Additionally, by integrating the simulation tool into clinical rotations, students would have the opportunity to practice and refine their skills in a real-world context while still benefiting from the personalized, adaptive learning features of the simulation.

Such integration would not only enhance the realism of the simulation but also provide ongoing opportunities for students to practice and build competence across a wide range of clinical scenarios, further reinforcing the connection between virtual training and real-life patient care.

As AI and VR technologies continue to advance, there are several areas where these innovations can be further leveraged to enhance the simulation tool. One area of enhancement is the integration of emotional modeling in virtual patients. AI can be utilized to simulate emotional responses, allowing patients to react not only physically but also emotionally to the care they receive. For instance, a virtual patient in a psychiatric care scenario could exhibit signs of distress or resistance to treatment, requiring the student to engage in empathetic communication to de-escalate the situation. This type of emotional modeling would allow students to practice the

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emotional intelligence necessary for effective patient care, particularly in high-stress or sensitive scenarios.

Additionally, patient deterioration models could be integrated into the system. As clinical scenarios unfold, virtual patients could show signs of deterioration in response to clinical decisions, forcing students to make critical adjustments to their treatment plans. By simulating the effects of different interventions on the patient's condition, students would gain a deeper understanding of the consequences of their clinical decisions and learn how to react appropriately to changing patient states.

These advanced features would bring the simulation tool even closer to the complex, dynamic nature of real-world healthcare, providing learners with a more comprehensive, immersive, and engaging educational experience.

With the expansion and integration of the simulation builder, it is essential to address ethical considerations to ensure equity and accessibility in nursing education. One of the most pressing concerns is ensuring that the simulation tool is available to under-resourced nursing programs and diverse learner populations. Currently, access to advanced simulation tools may be limited to institutions with substantial funding or resources. Therefore, it is critical to make the simulation tool adaptable to different educational contexts, ensuring that nursing programs in underserved areas can benefit from these advancements in healthcare education.

Moreover, as the tool incorporates more complex scenarios and real-time emotional modeling, it is essential to consider the ethical implications of how patients and healthcare environments are portrayed. For example, scenarios involving palliative care or end-of-life decisions must be handled with the utmost sensitivity, ensuring that students learn to navigate these difficult conversations with empathy and professionalism. Additionally, the data generated by the simulation tool, including performance analytics and learner progress, must be handled with care to respect privacy and confidentiality.

Ensuring that the simulation tool is equitable, inclusive, and ethically sound will be crucial for maximizing its impact on nursing education, allowing it to reach a wide audience and provide a high-quality learning experience for all students, regardless of background or institutional resources.



Figure 7: Conceptual Diagram of Future AI/VR Enhancements, Showing How Emotional Modeling and Procedural Complexity Could Be Incorporated

VIII. Conclusion

The game-based simulation builder developed for nursing education has demonstrated significant potential in creating personalized, adaptive, and scalable learning experiences for students. Through the integration of advanced technologies such as artificial intelligence (AI), virtual reality (VR), and adaptive learning algorithms, the simulation offers a dynamic platform that can tailor clinical training to individual learners' needs. Early pilot testing has shown positive results, with nursing students exhibiting improvements in clinical skills, decision-making accuracy, and knowledge retention after using the simulation tool. The use of virtual patients, real-time feedback, and immersive scenarios contributes to a more engaging and effective learning process, providing students with an opportunity to practice and refine their skills in a safe, controlled environment.

Furthermore, the adaptive nature of the simulation, which adjusts content and difficulty based on student progress, ensures that learners are continuously challenged at a level appropriate to their abilities. This personalized approach not only enhances motivation but also ensures that students are prepared for real-world clinical environments, where critical thinking and decision-making under pressure are essential.

The findings from this research have profound implications for the future of nursing education. Traditional training methods, while effective, often fail to provide the level of realism, interactivity, and personalized learning that modern healthcare professionals need. This game-based simulation tool addresses these gaps by offering a highly realistic and

customizable training environment that can be adapted to meet the needs of students at various stages of their education. By incorporating VR technology, nursing students can practice their clinical skills in immersive virtual environments, while the use of AI-driven simulations ensures that each student's learning journey is personalized based on their performance and progress.

This approach not only improves student engagement and retention but also prepares nursing students to handle complex, high-stakes situations they may face in real-world clinical settings. By providing a safe space for students to make mistakes and learn from them, the simulation fosters confidence, competence, and clinical reasoning, all of which are critical components of effective nursing practice.

While the results from this initial research are promising, the potential for this simulation tool to transform nursing education is vast. It is crucial to encourage further research into expanding the capabilities of the simulation builder, including the addition of more complex clinical scenarios, the integration with real-world clinical settings, and the enhancement of AI and VR features. Moreover, to ensure the widespread adoption of this tool, it is important to promote cross-institutional collaboration among nursing schools, healthcare institutions, and technology developers. This collaboration can help refine the tool, ensure its scalability, and make it accessible to nursing programs across the globe, including those in under-resourced settings.

The adoption of such simulation tools could mark a significant shift in how nursing students are trained, offering them an engaging, adaptive, and scalable learning experience that better prepares them for the challenges of modern healthcare. Therefore, continued investment in research, development, and the integration of simulation technologies in nursing education is essential for improving the quality of healthcare training and, ultimately, patient outcomes.

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