Supplementary Table S1. Item-level pre-test and post-test self-efficacy scores

Item	n	Pre mean ± SD	Pre median (IQR)	Post mean ± SD	Post median (IQR)	Mean change	Z	p-value	p-value (Holm)	r	r_c (95% CI)
Airway maneuvers											
1. Head tilt-chin lift technique	50	3.60±1.11	4.00 (3.00-4.00)	4.22±0.95	4.00 (4.00-5.00)	+0.62	-3.463	<0.001	0.002	0.490	0.73 (0.43-0.95)
2. Jaw-thrust maneuver in cervical trauma	49	3.45±1.16	4.00 (3.00-4.00)	4.14±0.91	4.00 (4.00-5.00)	+0.69	-3.324	<0.001	0.003	0.475	0.66 (0.37-0.87)
3. Two-person BVM ventilation	49	3.53±1.08	4.00 (3.00-4.00)	4.18±0.91	4.00 (4.00-5.00)	+0.65	-3.184	0.001	0.003	0.455	0.65 (0.33-0.90)
4. Oropharyngeal airway contraindications	48	3.31±1.01	3.00 (3.00-4.00)	4.10±0.83	4.00 (4.00-5.00)	+0.79	-4.052	<0.001	<0.001	0.585	0.79 (0.56-0.96)
5. Selecting the appropriate airway maneuver	48	3.40±0.94	3.50 (3.00-4.00)	4.25±0.84	4.00 (4.00-5.00)	+0.85	-4.178	<0.001	<0.001	0.603	0.85 (0.66-0.97)
Advanced airway-intubation											
1. Purpose of ramped positioning	50	2.88±1.14	3.00 (2.00-4.00)	3.94±1.00	4.00 (3.25-5.00)	+1.06	-4.631	<0.001	<0.001	0.655	0.92 (0.74-1.00)
2. BURP maneuver application	49	2.98±1.09	3.00 (2.00-4.00)	3.98±1.01	4.00 (3.00-5.00)	+1.00	-4.672	<0.001	<0.001	0.667	0.89 (0.74-1.00)
3. Indications for cricoid pressure (Sellick)	48	2.85±1.01	3.00 (2.00-3.25)	4.00±0.99	4.00 (4.00-5.00)	+1.15	-4.742	<0.001	<0.001	0.684	0.88 (0.66-1.00)
4. Pre-procedural complication risk assessment	46	3.28±1.11	4.00 (3.00-4.00)	4.00±0.97	4.00 (3.00-5.00)	+0.72	-3.204	0.001	0.003	0.472	0.65 (0.33-0.90)
5. Airway priorities in trauma patients	48	3.46±1.07	4.00 (3.00-4.00)	4.19±0.91	4.00 (4.00-5.00)	+0.73	-3.703	<0.001	0.001	0.534	0.78 (0.54-0.95)
Intraosseous access											
1. Mechanism of IO fluid delivery	51	2.94±1.08	3.00 (2.00-4.00)	4.06±0.95	4.00 (4.00-5.00)	+1.12	-4.673	<0.001	<0.001	0.654	0.92 (0.79-1.00)
2. Absolute contraindications to IO access	50	2.88±0.96	3.00 (2.00-3.00)	3.90±0.91	4.00 (3.00-5.00)	+1.02	-4.774	<0.001	<0.001	0.675	0.93 (0.80-1.00)
3. First response to inadequate IO flow	50	2.70±1.04	3.00 (2.00-3.75)	3.96±0.86	4.00 (3.00-5.00)	+1.26	-5.010	<0.001	<0.001	0.708	0.96 (0.87-1.00)
4. Drugs administrable via the IO route	49	2.73±1.04	3.00 (2.00-4.00)	3.80±1.04	4.00 (3.00-5.00)	+1.06	-4.602	<0.001	<0.001	0.657	0.90 (0.75-1.00)
5. Recognition and prevention of IO complications	50	2.88±1.00	3.00 (2.00-4.00)	3.98±0.91	4.00 (3.00-5.00)	+1.10	-5.034	<0.001	<0.001	0.712	0.97 (0.88-1.00)
Defibrillation, cardioversion and pacing											
1. Stepwise defibrillation in ventricular fibrillation	51	3.35±1.16	3.00 (3.00-4.00)	4.08±0.96	4.00 (4.00-5.00)	+0.73	-4.183	<0.001	<0.001	0.586	0.95 (0.81-1.00)
2. Advantages of synchronized cardioversion	50	3.06±1.02	3.00 (2.25-4.00)	4.06±0.87	4.00 (3.25-5.00)	+1.00	-4.533	<0.001	<0.001	0.641	0.97 (0.87-1.00)
3. Indications for transcutaneous pacing	50	2.96±0.97	3.00 (2.00-4.00)	4.02±0.84	4.00 (4.00-5.00)	+1.06	-4.944	<0.001	<0.001	0.699	0.94 (0.82-1.00)
4. Safety measures during defibrillation	49	3.45±1.14	4.00 (3.00-4.00)	4.20±0.84	4.00 (4.00-5.00)	+0.76	-4.078	<0.001	<0.001	0.583	0.95 (0.81-1.00)
5. ECG-based intervention decisions	49	3.35±1.03	3.00 (3.00-4.00)	4.00±0.89	4.00 (3.00-5.00)	+0.65	-3.715	<0.001	0.001	0.531	0.78 (0.50-1.00)
Transport ventilator and supraglottic airway											
1. Ventilator settings in suspected ARDS	51	2.67±1.07	3.00 (2.00-3.00)	3.98±0.97	4.00 (3.50-5.00)	+1.31	-5.117	<0.001	<0.001	0.717	0.95 (0.86-1.00)
2. Effects of increasing PEEP	50	2.84±1.06	3.00 (2.00-4.00)	4.08±0.90	4.00 (4.00-5.00)	+1.24	-4.884	<0.001	<0.001	0.691	0.98 (0.91-1.00)
3. Managing acute desaturation during transport ventilation	49	2.86±0.98	3.00 (2.00-4.00)	4.10±0.87	4.00 (4.00-5.00)	+1.24	-5.103	<0.001	<0.001	0.729	0.97 (0.90-1.00)
4. Indications for supraglottic airway use	50	2.90±1.05	3.00 (2.00-4.00)	3.96±0.95	4.00 (3.00-5.00)	+1.06	-4.777	<0.001	<0.001	0.676	0.93 (0.81-1.00)
5. Supraglottic airway as a plan B strategy	48	2.69±0.99	3.00 (2.00-3.00)	4.04±0.90	4.00 (3.75-5.00)	+1.35	-5.320	<0.001	<0.001	0.768	1.00 (1.00-1.00)
Cricothyrotomy simulation											
1. Performing cricothyrotomy in a CICO case	50	2.78±1.17	3.00 (2.00-4.00)	3.98±0.98	4.00 (3.25-5.00)	+1.20	-4.938	<0.001	<0.001	0.698	1.00 (1.00-1.00)
2. Anatomical realism of the task trainer	48	3.13±1.06	3.00 (2.00-4.00)	4.19±0.87	4.00 (4.00-5.00)	+1.06	-4.624	<0.001	<0.001	0.667	0.97 (0.88-1.00)
3. Following the scalpel-bougie-tube sequence	47	2.98±1.03	3.00 (2.00-4.00)	3.91±0.93	4.00 (3.00-5.00)	+0.94	-4.293	<0.001	<0.001	0.626	0.91 (0.70-1.00)
4. Managing complications (bleeding, false passage)	46	3.02±1.11	3.00 (2.00-4.00)	3.87±0.96	4.00 (3.00-5.00)	+0.85	-4.289	<0.001	<0.001	0.632	0.95 (0.81-1.00)
5. Identifying the cricothyroid membrane by palpation	47	3.21±1.16	3.00 (2.00-4.00)	4.11±0.96	4.00 (4.00-5.00)	+0.89	-4.341	<0.001	<0.001	0.633	0.91 (0.74-1.00)

All items were rated from 1 (strongly disagree) to 5 (strongly agree)
n: Number of participants with paired pre-test and post-test responses for that item, Z: Standardized Wilcoxon signed-rank statistic, p-value (Holm): Holm-Bonferroni adjusted p-value across the 36 comparisons, r: |Z|/√n, with n including participants whose difference score was zero, r_c: Matched-pairs rank-biserial correlation [95% bootstrap confidence interval (CI)], SD: Standard deviation, IQR: Interquartile range, BVM: Bag-valve-mask, BURP: Backward-upward-rightward pressure, IO: Intraosseous, ECG: Electrocardiography, ARDS: Acute respiratory distress syndrome, PEEP: Positive end-expiratory pressure, CICO: Cannot intubate, cannot oxygenate

Supplementary Table S2. Direction of change, tied observations and post-test ceiling responses

Item/subscale	n	Increase	Decrease	No change	Shapiro-Wilk p-value (differences)	Post-test responses at the scale maximum (%)
Airway maneuvers						
1. Head tilt-chin lift technique	50	23	4	23	<0.001	48.00
2. Jaw-thrust maneuver in cervical trauma	49	23	8	18	<0.001	42.86
3. Two-person BVM ventilation	49	24	6	19	0.003	44.90
4. Oropharyngeal airway contraindications	48	27	5	16	<0.001	35.42
5. Selecting the appropriate airway maneuver	48	26	4	18	0.001	45.83
Advanced airway-intubation						
1. Purpose of ramped positioning	50	31	1	18	<0.001	32.00
2. BURP maneuver application	49	31	3	15	0.002	36.73
3. Indications for cricoid pressure (Sellick)	48	35	2	11	0.002	35.42
4. Pre-procedural complication risk assessment	46	24	6	16	0.006	36.96
5. Airway priorities in trauma patients	48	23	5	20	<0.001	45.83
Intraosseous access						
1. Mechanism of IO fluid delivery	51	30	3	18	<0.001	37.25
2. Absolute contraindications to IO access	50	31	2	17	<0.001	30.00
3. First response to inadequate IO flow	50	33	2	15	0.001	30.00
4. Drugs administrable via the IO route	49	30	3	16	<0.001	30.61
5. Recognition and prevention of IO complications	50	33	1	16	<0.001	34.00
Defibrillation, cardioversion and pacing						
1. Stepwise defibrillation in ventricular fibrillation	51	23	1	27	<0.001	39.22
2. Advantages of synchronized cardioversion	50	27	1	22	<0.001	36.00
3. Indications for transcutaneous pacing	50	33	2	15	<0.001	30.00
4. Safety measures during defibrillation	49	22	1	26	<0.001	42.86
5. ECG-based intervention decisions	49	24	3	22	<0.001	32.65
Transport ventilator and supraglottic airway						
1. Ventilator settings in suspected ARDS	51	35	2	14	0.002	33.33
2. Effects of increasing PEEP	50	31	1	18	<0.001	38.00
3. Managing acute desaturation during transport ventilation	49	34	1	14	0.001	38.78
4. Indications for supraglottic airway use	50	31	2	17	<0.001	36.00
5. Supraglottic airway as a Plan B strategy	48	36	0	12	<0.001	35.42
Cricothyrotomy simulation						
1. Performing cricothyrotomy in a CICO case	50	31	0	19	<0.001	34.00
2. Anatomical realism of the task trainer	48	28	1	19	<0.001	43.75
3. Following the scalpel-bougie-tube sequence	47	27	1	19	<0.001	29.79
4. Managing complications (bleeding, false passage)	46	24	1	21	<0.001	30.43
5. Identifying the cricothyroid membrane by palpation	47	26	2	19	<0.001	42.55
Airway maneuvers (subscale)	50	31	7	12	0.023	32.00
Advanced airway-intubation (subscale)	50	36	4	10	0.045	30.00
Intraosseous access (subscale)	51	35	3	13	0.002	27.45
Defibrillation, cardioversion and pacing (subscale)	51	33	3	15	<0.001	29.41
Transport ventilator and supraglottic airway (subscale)	51	38	2	11	0.013	27.45
Cricothyrotomy simulation (subscale)	50	31	1	18	<0.001	30.00

Tied (zero-difference) pairs were excluded from the Wilcoxon rank sums but retained in n for the calculation of r. Shapiro-Wilk tests were applied to the within-participant difference scores; all were significant ($p<0.05$), supporting the use of non-parametric tests. For subscales, the ceiling column reports the percentage of participants whose post-test subscale mean equalled 5.00
BVM: Bag-valve-mask, BURP: Backward-upward-rightward pressure, IO: Intraosseous, ECG: Electrocardiography, ARDS: Acute respiratory distress syndrome, PEEP: Positive end-expiratory pressure, CICO: Cannot intubate, cannot oxygenate