SAFETY

simulation for medical practice

SIMULATION APPROACH FOR EDUCATION AND TRAINING IN EMERGENCY

Childbirth

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Summary

Scenario Description

Learning Target

Medical:
Management of a normal birth process

CRM:
- Leadership
- Decision making

Description

Where:
Emergency department

Frame conditions:
Day shift in the ED, all resources available

Participants

Students

Who:
1-2 doctors
1 nurse

Notes: should be used as a hybrid with an actor. Actor needs to be either midwife or very well briefed!

Scenario Briefing

Briefing (everyone)	Additional Briefing (individual Positions)	Case Briefing (Roleplayers)
36 yr old, IIIG IIIP, other two birth spontaneous, no complications. Healthy woman, no antecedents, normal pregnancy. Started from home with contractions every 3-4 minutes, midwife told her to come quickly to hospital. Just before entering ED amniotic fluid came out. Currently midwifes bound in delivery room		If actor – normal birth, don't overact the pain/screaming, listen to advice.

Notes:

Script SIM Nurse/Co-Instructor

List of Material	Set-Up Room	Set-Up Simulator
- normal ED cart - Birthing simulator (eg Noelle, SimMum) OR - SP with MamaNatalie - Newborn simple puppet	- ED stretcher with sim or empty stretcher - actor walks in	- actor dressed, with MamaNatalie - wet from amniotic fluid - previous documents at hand, bag packed for hospital stay

Notes:

Scenario Saver

How to react if the medical problem is not identified	How to react if the medical problem is identified too quickly	Other comments, material needed for savers (e.g. white coat)
Problem is obvious	Development of birth cannot be influenced	Midwife can be sent to take over

Notes:

Scenario End Criteria

Scenario ends when…		
• Child is born an tended to • Placenta is extracted		

Notes: Normal birth – child should be given to mother, umbilical cord cut.
General note – end the scenario saying:
"The patient is now going to be taken care of, thank you for solving the case"

Simulator Set-Up, Steering

	Phase 1 Start	Phase 2	Phase 3 Child born	
Vitals	HR: 90 /min SR. BP: 130/ 85 mmHg SpO2: 98%, RR: 15 /min GCS: 15 Contractions every 3 minutes CTG normal	HR: 100 /min SR. BP: 140/ 95 mmHg SpO2: 98%, RR: 15 /min GCS: 15 Contractions every minute CTG normal	HR: 80 /min. BP: 120/60 SpO2: 99% RR: 28 /min GCS: 15 No contractions No CTG	
Text for patient	Excited, slightly worried	Pain at contractions		
Other info	If actor – normal birth, don't overact the pain/screaming, listen to advice.			
Management during scenario			Think about placenta	

Notes:

Abstract

Learning Target:	Management of CHILD BIRTH
Description:	Normal childbirth, no complications
Participants:	1-2 doctors 1 nurse
Case Briefing:	36 yr old, IIIG IIIP, other two birth spontaneous, no complications. Healthy woman, no antecedents, normal pregnancy. Started from home with contractions every 3-4 minutes, midwife told her to come quickly to hospital. Just before entering ED amniotic fluid came out. Currently midwifes bound in delivery room
List of Material:	Normal ED cart Birthing simulator (eg Noelle, SimMum) OR SP with MamaNatalie Newborn simple puppet
Set-Up Room	ED stretcher with sim or empty stretcher, actor walks in
Set-Up Simulator:	actor dressed, with MamaNatalie wet from amniotic fluid previous documents at hand, bag packed for hospital stay
Scenario Saver:	midwife can be sent in to take over
Scenario End Criteria:	Child is born Placenta is extracted
Management during Scenario:	If actor – normal birth, don't overact the pain/screaming, listen to advice.
Other:	