SAFETY

simulation for medical practice

SIMULATION APPROACH FOR EDUCATION AND TRAINING IN EMERGENCY

Intracranial Bleeding (ICB)

Ludwig-Maximilians-University (LMU)

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DOCUMENT VERSION 01

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Summary

Scenario Description

Learning Target

Medical:

- Symptoms of an ICB
- Treatment of complications
- maybe neurological exam (if actor)

CRM:

- SA
- Leadership
- Communication

Description

Where:

Emergency department

Frame conditions:

Day shift, all resources available

Participants

- 2 doctors
- 1 nurse

Notes: can be used as a hybrid with an actor

Scenario Briefing

Briefing (everyone)	Additional Briefing (individual Positions)	Case Briefing (Roleplayers)
Mr. Jones has been brought in by the ambulance. During the morning, he had developed a headache and a left hemiparesis. Brain CT has revealed an ICB, located in the right basal ganglia. His condition is stable, he has a GCS of 13. He is tired, but able to communicate and oriented. You are waiting for a transfer to the Stroke Unit.	SP: You are an 75 yr old man, living alone (your wife died of cancer 10 years ago). Your neighbour, whom ou visited in the morning, alerted the ambulance. You are scared and a bit disoriented. You are feeling very tired.	If actor – a bit disoriented, but able to communicate. Left arm and leg are weak, but not completely paralyzed.

Notes:

Script SIM Nurse/Co-Instructor

List of Material	Set-Up Room	Set-Up Simulator
• Normal ED cart • Adult simulator or SP	• emergency department with sim • maybe actor	• Dressed • Iv line • O2 mask

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)
Patient will stabilize and exhibit shallow breathing.	Airway can be a bit tricky	

Notes:

Scenario End Criteria

Scenario ends when…		
• Airway is secured and patient is ventilated		

Notes: Don't let the patient die!

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 Resp. arrest	Phase 3 Intubation	Phase 4 stabilisation
Vitals	HR: 80 bpm, SR BP: 180/110 mmHg; SpO2: 97 %, Resp. Rate: 14, Temp: 36,9°C; GCS 13 Pupils: isocoric, light reaction is normal	HR: 45 /min. BP: 180/95, SpO2: decreasing over 1 min to 75% RR: apnea	HR: 70 /min. BP: 140/80 SpO2: 95% RR: venitlated PaCO2: 65 mmHg;	HR: 70 /min. BP: 140/80 SpO2: 99% RR: venitlated PaCO2: 36 mmHg;
Text for patient	Tired, knows who he is Moaning	Silence		
Other info				
Management during scenario		Change to sim if started with actor		

Notes:

Abstract

Learning Target:	Relatively straightforward ICB, management of acute respirators complications
Description:	- 2 doctors - 1 nurse All students
Participants:	Mr. Jones has been brought in by the ambulance. During the morning he developed a headache and a left hemiparesis. Brain CT has revealed an ICB, located in the right basal ganglia. His condition is stable, he has a GCS of 13, He is tired, but able to communicate and oriented. You are waiting for a transfer to the Stroke Unit
Case Briefing:	Normal ED cart - Adult simulator OR - SP
List of Material:	- ED stretcher with sim - maybe actor
Set-Up Room	- dressed - iv line - O2 mask
Set-Up Simulator:	Patient will stabilize and exhibit shallow breathing
Scenario Saver:	Airway secured, patient ventilated
Scenario End Criteria:	Change to sim needed if start with actor
Management during Scenario:	Relatively straightforward ICB, management of acute respirators complications
Other:	