

SIMULATION SCENARIO DESIGN WORKSHEET

Today's Date:	Name of Scenario Author: Email: Phone:
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GENERAL SCENARIO INFORMATION

Est. Pre-briefing Time:	Est. Scenario Time:	Est. Debriefing Time:	Course #:
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Title of Scenario: HTN in pregnancy in Postpartum

Brief Description:
39 W HTN pt, vaginal delivery. 2nd day pp (to be discharged home later in the day). BP taken in the morning was 154/100. Patient has no IV and needs Procardia and labetalol.

Setting of Sim: PP room

Facilitators:

Dates of Sims:	Pilot Date : 12/17/19 1/9/20
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Type of Simulation (check all that apply) : Task Trainer Mannequin Actor/SP

Scenario recording requested <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	Classroom needed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Debriefing Room needed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no
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PARTICIPANT INFORMATION

Disciplines:	Total Number:	Number per Sim:
RNs		1-2
MDs		
RTs		
Pharmacists		
CSTs		
Other		

LEARNING OUTCOMES

**Team STEPPS® competencies (leadership, mutual support, situation monitoring, communication) are to be incorporated into every simulation to promote patient safety (ahrq.gov, 2017)*

General Learning Outcomes (to be disclosed to participants)

Appropriate nursing care of PP HTN pt

Scenario Specific Outcomes (for facilitator only)

Objectives:

1. Learner will complete an SBAR report to a Physician.
2. Learner will find and place the appropriate orders given in EMR.
3. Learner will give Procardia appropriately.
4. Learner will follow blood pressure protocol after Procardia given.
5. Learner will find and place the appropriate orders for Labetalol in EMR and gather appropriate staff.

Expected cognitive skills to be demonstrated by participant:

- Assess• Understands what it means to have a hypertensive disorder in pregnancy diagnosis.
Discuss signs and symptoms of hypertensive disorder in pregnancy.
- Plan• Discusses warning signs of a hypertensive disorder.
- Implement Identify precautions used for hypertensive disorders (seizure precautions, timing of checks, decrease environmental stimuli, etc).
Discusses seizure precautions and decreased environmental stimuli (low lights, quiet environment, and padded side rails).
- Evaluate Understands warning signs of a hypertensive disorder.
- Document Discuss the appropriate documentation guidelines.

Expected psychomotor skills to be demonstrated by participant:

- Performs proper assessment of hypertensive patient.
- Recognizes signs and symptoms, lab values, and vital signs associated with hypertensive disorder.
- Performs neuro assessment, including level of consciousness, DTRs, presence of visual disturbance, headache, and epigastric pain.

Expected affective skills to be demonstrated by participant:

- Demonstrates assessment of patient and notifies physician using SBAR.
- Documents assessments and practices appropriately in the EMR.
- Commits to providing patient comfort and safety.

PRE-BRIEFING INFORMATION

Pre-requisite Knowledge/Reading/Testing (provide references on last page):

- POEP
Module 8 Complications of Pregnancy, Part 2
- CBT
FHCI Hypertensive Disorders in Pregnancy

Policy:

Hypertensive Disorder in Pregnancy

Critical Element:

Magnesium Sulfate

NOTE TO FACILIATORS: Prior to beginning the simulation, participants must be oriented to simulator and/or setting, understand guidelines and expectations for their scenario(s), have completed all pre-work, and understand their assigned roles.

Pre-Briefing Report to Participants

PATIENT	Tonya		AGE/SEX	28 year old		ADMISSION WEIGHT			
PRIMARY MD	Foxlow or Fam Med MD			PROCEDURE	Vaginal delivery				
CONSULTS				CODE STATUS	Full				
DX	Vaginal delivery, HTN			PASSWORD					
CURRENT PROBLEM	2 nd day PP, HTN			NEXT OF KIN	Husband- Tyler				
				DIET	Regular				
HX	39 weeks Vaginal delivery HTN- took Labetalol 100mg daily during pregnancy (nothing after delivery)								
ALLERGIES	PCN								
MEDICATIONS	Stool softener Ibuprofen 600mg q8h								
SAFETY/PRECAUTIONS	None								
RESTRAINTS	None								
CURRENT CONDITION				<input type="checkbox"/> VENT	<input type="checkbox"/> ETT	SIZE		LOCATI ON	PP room
SKIN		PAIN	2 /10 but comfo rtable	MODE		RATE		<input type="checkbox"/> PEEP	
CARDIO/RHYTHM/ PULSES				FIO2		<input type="checkbox"/> PS		<input type="checkbox"/> NC	<input type="checkbox"/> CPAP/BIPAP
RESP	Clear			<input type="checkbox"/> IV LINES	None				
NEURO	A/Ox3, DTRs normal			<input type="checkbox"/> PICC/CVL		<input type="checkbox"/> ART			
GI/GU	BM	Pos	VOID	Normal	<input type="checkbox"/> MIVF				
		<input type="checkbox"/> FOLEY	none	<input type="checkbox"/> DRIPS	none				
TUBES	<input type="checkbox"/> NG/OG	<input type="checkbox"/> JP	<input type="checkbox"/> CT						
I/O									
VITALS	Under call orders until this one								
ACTIVITY	Up ad lib								
SUGGESTIONS/RECOMMENDATIONS/REQUESTS TO MD/NURSE									

S

B

A

R

Call MD for orders	
ORDERS	<p>Notify Physician Vitals/Other</p> <p>Temp greater than: 100.4</p> <p>Heart rate greater than (beats/min): 120</p> <p>Systolic BP greater than: 150</p> <p>Diastolic BP greater than: 100</p> <p>Other: Abnormal vaginal bleeding</p> <p>Routine, UNTIL DISCONTINUED, starting today at 1552, Until Specified, May shower.</p> <p>Diet Regular, DIET EFFECTIVE NOW, starting today at 1552, Until Specified</p> <p>Laboratory</p> <p>Only order the Rh Workup if indicated and not done previously.</p> <p>CBC without differential, AM DRAW, First occurrence tomorrow at 0600</p> <p>Meds</p> <p>acetaminophen tab, 650 mg, Oral, EVERY 4 HOURS PRN, For mild pain</p> <p>HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet, 1 Tab, Oral, EVERY 4 HOURS PRN, Pain, For moderate pain</p> <p>ibuprofen (ADVIL,MOTRIN) tablet, 600 mg, Oral, EVERY 6 HOURS PRN, Pain, for moderate pain</p>
ANTICIPATED CHANGES OR OTHER ISSUES	
PENDING LABS	

SET UP/RESOURCES (for simulation center staff)

Simulation Setting

- | | |
|---|--|
| <input type="checkbox"/> ER
<input type="checkbox"/> Med-Surg
<input type="checkbox"/> Pediatrics
<input type="checkbox"/> ICU
<input type="checkbox"/> OR / PACU | <input checked="" type="checkbox"/> Women's & Children's
<input type="checkbox"/> Behavioral Health
<input type="checkbox"/> Home Health
<input type="checkbox"/> Pre-Hospital
<input type="checkbox"/> Doctor's office/clinic (table, chairs and exam table)
<input type="checkbox"/> Other: |
|---|--|

Time of Day: 0800

Is the patient a mannequin or a Standardized Patient (SP)? mannequin

Appearance of Mannequin

Clothing gown	Moulage	Incisions/Dressings
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Appearance of Actor/SP

Clothing	Moulage	Incisions/Dressings
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Monitor Waveform Setup		
EKG/HR <input checked="" type="checkbox"/>	RR <input checked="" type="checkbox"/>	O2 Sat <input checked="" type="checkbox"/>
BP <input checked="" type="checkbox"/>	Arterial Line <input type="checkbox"/>	PAP <input type="checkbox"/>
ETCO2 <input type="checkbox"/>	Other:	
Equipment attached to patient		
ECG Monitor <input type="checkbox"/>	BP Cuff <input type="checkbox"/>	Arterial/PA lines <input type="checkbox"/>
Oxygen Sat Probe <input type="checkbox"/>	NG tube <input type="checkbox"/>	Foley <input type="checkbox"/> Urine Color:
Chest Tube <input type="checkbox"/>	Vent <input type="checkbox"/>	IV line <input type="checkbox"/>
ID Band/MRN <input checked="" type="checkbox"/>	Allergy Band <input type="checkbox"/>	IO <input type="checkbox"/> SCDs <input type="checkbox"/>
Fall Blanket/Footies <input checked="" type="checkbox"/>	Other:	
IV Type		
PIV <input type="checkbox"/>	Saline Lock <input type="checkbox"/>	Central Line <input type="checkbox"/>
PICC <input type="checkbox"/>	UVC/UAC <input type="checkbox"/>	
IV Fluids/Rate		
NS	D5	D10
LR	Other:	
Rate of Fluids:		
Medications (to be retrieved from Pyxis)		
PO	IVP	IVPB
1. Procardia (20mg Capsule)	1. Labetalol (20mg)	
Medication Equipment Available in the Room		
IV Pump <input type="checkbox"/>	Number of channels	IV Pump Tubing <input type="checkbox"/>
IV Piggyback tubing <input type="checkbox"/>	IV gravity tubing <input type="checkbox"/>	Extra IV tubing <input type="checkbox"/>
Syringes/#/Size 1 10ml NS syringe	Needles/#/size	Med cart/Pyxis Needs to have Procardia (pill), Labetalol IV push
IV start supplies/angio gauge Yes, 18 gauge with Y site and IV start kit	Art Line <input type="checkbox"/>	PA Catheter <input type="checkbox"/>
Pressure bag <input type="checkbox"/>	Syringe pump <input type="checkbox"/>	Syringe pump tubing <input type="checkbox"/>
IO <input type="checkbox"/>	Umbilical Line <input type="checkbox"/>	Other
Cardiac Equipment Available in the room		
12 lead ECG machine <input type="checkbox"/>	Code Cart <input type="checkbox"/>	Defibrillator <input type="checkbox"/>

Temp Pacemaker <input type="checkbox"/>	Telemetry Pack <input type="checkbox"/>	AED <input type="checkbox"/>
Respiratory Equipment Available in the room		
Nasal cannula <input checked="" type="checkbox"/>	Simple Facemask <input type="checkbox"/>	Venturi Mask <input type="checkbox"/>
Non-rebreather <input type="checkbox"/>	IS <input type="checkbox"/>	Trach <input type="checkbox"/>
BiPAP/CPAP <input type="checkbox"/>	Vent <input type="checkbox"/>	Suction <input type="checkbox"/>
Suction cath/#/size	Intubation box <input type="checkbox"/>	Other
GI Equipment Available in the room		
NG/OG <input type="checkbox"/>	G tube <input type="checkbox"/>	Feeding pump <input type="checkbox"/>
Feeding bag <input type="checkbox"/>	Dining tray <input type="checkbox"/>	Other:
GU Equipment Available in the room		
Foley <input type="checkbox"/>	Condom catheter <input type="checkbox"/>	SP catheter <input type="checkbox"/>
Urinal <input type="checkbox"/>	Bedpan	Other:
Other Supplies		
TED hose <input type="checkbox"/>	SCDs <input type="checkbox"/>	Dressing Supplies <input type="checkbox"/>
Venipuncture <input type="checkbox"/>	Blood tubes <input type="checkbox"/>	Culture tubes <input type="checkbox"/>
Thermometer <input checked="" type="checkbox"/>	Pen light <input type="checkbox"/>	Fall blanket/footies <input type="checkbox"/>
Any additional set up notes for sim staff: stethoscope, reflex hammer, QR codes		

Scenario Progression Storyboard

Patient Initial State

Rhythm: no EKG monitor

HR: 90

BP: 154/100

SpO2: 99

Resp: 18

No VS taken

Take VS. (has been 15 minutes since last)

Pt cues, "I haven't had elevated BP since delivery. Is that ok?"

Declining State

Rhythm: none HR: 90

BP: 160/110 SpO2: 98 Resp: 18

RN does nothing

H-to-T assess

MD called, SBAR to be given

Pt cues, "Does my MD know about this?"

Give Procardia 10mg

RN does nothing

Declining State (10 minutes after dose)

Rhythm: none HR: 80

BP: 182/112 SpO2: 97 Resp: 20

End Scenario

RN does nothing

RN calls MD with SBAR. Orders for Labetalol panel given.

End Scenario

Progression Outline

Timing	Patient verbal and/or non-verbal communication	Participant expected behaviors/interventions	Patient Response (potential cues for participant if needed?)
Beginning (0-2 mins)	<ul style="list-style-type: none"> Pt concerned as she has not had any elevated BP in PP. 	<ul style="list-style-type: none"> Blood pressure retaken in 15 minutes after previous one. 	<ul style="list-style-type: none"> "I haven't had elevated BP since delivery. Is that ok?"
2-5 mins	<ul style="list-style-type: none"> Pt still concerned, becoming anxious 	<ul style="list-style-type: none"> MD gives orders for Procardia PO panel. RN places panel orders in EMR. Procardia 10mg given. 	<ul style="list-style-type: none"> Pt cues, "Does my MD know about this?"
5-10 mins	<ul style="list-style-type: none"> Pt still concerned, becoming anxious Pt questioning what is going on 	<ul style="list-style-type: none"> Blood pressure retaken continually above call orders (increasing rapidly). H-to-T assessment completed Ask questions: HA? Blurry vision/vision changes? Epigastric pain? Listen to lung and heart sounds Perform clonus and reflex assessment (DTR) Document findings in EPIC 	<ul style="list-style-type: none"> HA 6 out of 10, Blurry vision Epigastric pain, sharp, stabbing pain on my right side, "I don't feel well." +1 beat Clonus BL Brisk Reflexes BL

10-15 mins		<ul style="list-style-type: none"> • Repeat VS (BP and HR) • RN SBAR to MD. • Labetalol panel orders given. • RN needs to: call for IV start, EKG monitoring (ACLS provider or Rapid), • RN puts appropriate panel order in EMR • Gets appropriate medication dose 	<ul style="list-style-type: none"> • Am I okay? • Will this new medication affect my breastmilk?
End of Scenario (When objectives met? At specified time period)		<ul style="list-style-type: none"> • Have all appropriate people in place (ACLS provider, IV, and medication). • Verbalizes how often to take BP after giving medication and what assessments. 	

SP role description

Name and Role in scenario (Patient? Family member?)

Brief Scenario Summary

Patient location

History pertinent to simulation	
Mental State/Demeanor	
Questions/comments SP may verbalize during scenario	
SP Observations	How does the staff communicate with you and with each other?

DEBRIEFING GUIDE

With Video

Without Video

Debriefing/Guided Reflection Questions:

1. How did you feel throughout the simulation experience
2. Tell me what went well.
3. Let's review the objectives and discuss whether we were successful or not

General learning outcome(s)
Appropriate nursing care of PP HTN pt
Scenario Specific Outcomes *Copy from page 2 of this form*
<p>Objectives:</p> <ol style="list-style-type: none"> 1. You completed an SBAR with the physician how did that feel? Tell me about the experience. 2. Tell me about how placing the orders in the EMR went. 3. What medication did you give your patient? How did that feel? Comfortable/need more practice? 4. Tell me about your next steps once you are in the HTN protocol. 5. Your patient needed further medication, tell me about what was ordered and your steps.

4. If you were able to repeat the scenario, what would you do differently?
5. What GAPS did you identify in your own knowledge base and/or preparation for the simulation experience?
6. Talk about how you will transfer what is learned during this experience to your work setting.
7. Is there anything else you would like to discuss?

Evaluation Tools

Attach to this page the evaluation tools (surveys, tests) that you plan to use

References

List references for your educational content

ahrq.gov. (2017, August). *TeamSTEPPS 2.0 Team Strategies and Tools to Enhance Performance and Patient Safety*. Retrieved from <https://www.ahrq.gov/sites/default/files/wysiwyg/professionals/education/curriculum-tools/teamstepps/instructor/essentials/pocketguide.pdf>

MD speaking parts

Actions	Statements
SBAR called to MD	Hello, _____. What is going on? Yes, that is my patient.
RN gives BPs	Any signs and symptoms? How is her DTRs? Blurry vision? Headache? Epigastric pain? How many days postpartum is she? Does she have an IV?
After answers	Start the Procardia panel since she does not have an IV. Call me in an hour with an update.

MD speaking parts

Actions	Statements
SBAR called to MD	Hello, _____. What is going on?
RN talks about blood pressures	How is she now? Her blood pressures are increasing? Did the Procardia lower her Blood pressure at all?
After answers	Any signs and symptoms now? How is her DTRs? Blurry vision? Headache? Epigastric pain? What are her current vital signs?
RN answers	Sounds like we need Labetalol. Start an IV and the Labetalol panel. I will come up and see her.