**Simulation Development Steps**

**Create a Case Scenario:** *Utilizing the 4 T’s (Tone,* ***Tissue****, Trauma, Thrombin)*

*D.P is a 34* *-year-old G5P0040 who was admitted in active labor at 41+2 weeks. History is significant for 4 surgical terminations. She progressed in labor and had an uncomplicated delivery of a live female infant with Apgars 9 and 9 and a weight of 3755 grams. Immediately after delivery, she had some brisk bleeding. The placenta took about 20 minutes to deliver and required a bit more traction than normal. After the delivery of the placenta, she continues to have bleeding that is more than normal. She had no lacerations. She is now approximately 30 minutes postpartum and is still having some bleeding.*

*She has no significant past medical history. ▪ She has no known drug allergies. ▪ Her pregnancy was uncomplicated except for an elevated 1-hour glucose screen with a normal 3-hour glucose tolerance test.*

*Hemoglobin: 12.2 ▪ Hematocrit: 36.6 ▪ WBC: 12,000 ▪ Platelets: 218,000*

\**Entire case can be reviewed at the Council on Patient Safety in Women’s Health: Practicing For Patients: Postpartum Hemorrhage Clinical Simulation Scenario Package*: [Case 3: Retained products](https://safehealthcareforeverywoman.org/wp-content/uploads/Hemorrhage-Case-3.pdf)

**Learning Objectives:***(****Use the PPH Simulation Learning Objectives document to select objectives that meet your simulation goals.)***

When conducting the simulation, choose 3-4 of the objectives in the companion document.

<https://www.in.gov/health/ipqic/files/pph-simulation-learning-objectives.pdf>

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| Cognitive | Technical | Behavioral  |
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**Expected Duration** *Approximately 30 minutes*

* 1. *10-minute sim*
	2. *20-debrief*

**Determine Roles** *(nurses, providers, other disciplines, family member/friend, etc.):****(Select roles based on your facility availability.)***

**Equipment/Supplies:**

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| --- | --- | --- |
| **Setting** | **Moulage** | **Manikin** |
| \_\_ ED \_\_ Triage\_\_ L&D \_\_ OR/PACU\_\_ Postpartum | Fake blood (liquid, fabric with or without weights) | \_\_ Low Fidelity\_\_ High Fidelity |

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| **Equipment** |
| \_\_EKG/HR \_\_ Arterial Line  \_\_ RR \_\_ PAP\_\_O2 Sat Probe \_\_ETCO2 \_\_BP Cuff Other:  | PIV Access:  Yes\_ or No\_\_Gauge: \_\_\_Location/s:\_\_ \_\_\_\_  | Foley Catheter: Yes \_ or No\_\_Tamponade Balloon / intrauterine vacuum device:Yes \_\_ or No\_\_Scale: |

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| **Medications/ Fluids** |
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**Pre-briefing:**

*This is a safe learning environment. This is not an individual assessment of performance. Our goal is to identify gaps in care; how can we make your job easier/more efficient. This is a time to practice and make mistakes.*

*Orient learners to the simulation room and OR. Go over*

* + *Orientation to equipment and space*
	+ *Simulation is a safe place; won’t talk about specific learners; mutual respect (what happens in sim stays in sim)*
	+ *We want you to treat this like a real patient scenario; “suspend all disbelief that you have about simulation”*
	+ *May or may not want to share the medical emergency in advance*
	+ *How to obtain VS, meds, equipment, etc. How to call providers/call for help.*
	+ *Share the learning objectives.*
	+ *Assign a leader and/or assign roles (can be facility specific and based on resources/personnel)*

**Scenario Progression:**

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| **Patient Initial State**Alertness: B/P: HR: RR: Pain scale: Fetal HR: Uterine Activity: QBL: Other:  |

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|  |
| *Timing* | *Patient Findings/Scripting* | *Expected Participant Behaviors/Interventions* |
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**Debriefing: *(Use the PPH Simulation debriefing questions document)***

<https://www.in.gov/health/ipqic/files/pph-simulation-debriefing-questions.pdf>

**If a hemorrhage debriefing form is needed, one can be found in the Indiana toolkit:**

<https://www.in.gov/health/ipqic/files/Hemorrhage-Debrief-Form.pdf>