Simulation Request Form

Today's Date:

Requestor Contact Information

Name: Department: Phone number:

email.

Learner Info

Targeted Learner Type: Number of Learners:

Faculty Info

Number of faculty/educators: Name of Simulation Faculty:

<u>Please complete the following form and email it to cams@mountsinai.org</u>

Scheduling Info

Name of Simulation: Start and End Time: Desired Dates:

Will this be a recurring session? If so, please specify:

*sessions outside of CAMS operating hours will be evaluated by CAMS leadership. Sim Staff may not be available.

Session Info

Type of Simulation: Types of rooms required: Is this a new simulation:

List of Task Trainers, Simulators and other equipment needed:

*consumable supplies are to be provided by requestor

Please summarize what you want to accomplish with this simulation. If more space is required please attach a word document.

Please specify the objectives of this simulation in precise and measurable terms. What should the learners be able to do, know and show upon completion of this simulation. If more space is required please attach a word document.

Other Materials Required for Case-Based Simulations

Please attach a course curriculum to this request. A template will be provided to you along with this form.

*The course curriculum must be submitted at least 3 weeks prior to desired date of simulation.

Research

Is this simulation part of a research project?
*If yes, please provide a description of the research project in a word document
If yes, was an IRB submitted?
If yes, date of IRB Submission:
Is this simulation part of a Grant funded project?

Contact Us:



PHONE 212-523-8985



EMAIL <u>cams@mountsinai.org</u>



WEBSITEhttps://icahn.mssm.edu/research/cams



Section 1: Case Summary

Scenario Titl	e:			
Keyword	ds:			
Brief Description of Cas	se:			
	Goals and Objectives			
Educational Go	al:			
Objective	es: 1.			
(Medical and CR)	M) 2.			
	3.			
	Learners, Setting and Personnel			
	☐ Junior Learners ☐ Staff			
Target Learners:	\square Physicians \square Nurses \square RTs \square Inter-professional			
	☐ Other Learners:			
Location:	☐ Sim Lab ☐ In Situ ☐ Other:			
D 1.1	Instructors:			
Recommended	Confederates:			
Number of Facilitators:	Sim Techs:			
Scenario Development				
Date of Developme	ent:			
Scenario Developer	(s):			
Affiliations/Institutions				

Section 2A: Initial Patient Information

A. Patient Chart						
Patient Name:			Age:	Gender:	Weight:	
Presenting comp	laint:					
Temp:	HR:	BP:	RR:	O ₂ Sat:	RA	
Glucose:			GCS: (EVM)			
Triage note:						
Allergies:						
Past Medical History:		Current Medicat	tions:			

A. Further History		
Include any relevant history not included in triage note above. What information will only be given to		
learners if they ask? Who will provide this information	n (mannequin's voice, confederate, SP, etc.)?	
B. Physic	cal Exam	
List any pertinent positive and negative findings		
Cardio:	Neuro:	
Resp:	Head & Neck:	
Abdo:	Ext:	
Back:		
Skin:		

Section 4: Associate and Standardized Patients

Standardized Patient Roles and Scripts			
Role	Description of role, expected behavior, and key moments to intervene/prompt learners. Include any script required (including conveying patient information if patient is unable)		

Section 5: Scenario Progression<u>Modifiers</u>: Changes to patient condition based on learner action
<u>Triggers</u> For progression to next state

		Scenario States, Modifiers	s and Triggers
Clinical	Patient Status	Learner Actions, Modifiers & Triggers to Move to Next State	
Stage			
/Vitals 1. Time		Expected Learner Actions	<u>Modifiers</u>
point 1		Expected Learner Actions	Triggers
minutes			
into case			
HR:			
BP:			
RR:			
O_2SAT :			
T: 2. Time		Expected Learner Actions	<u>Modifiers</u>
point 2		Expected Learner Actions	Triggers
minutes			
into case			
HR:			
BP:			
RR:			
O_2SAT :			
T:			
3. Time		Expected Learner Actions	<u>Modifiers</u>
point 3			<u>Triggers</u>
minutes			Triggers
into case			
HR:			
BP:			
RR:			
O ₂ SAT:			
T:			
4 Ti		Expected Learner Actions	<u>Modifiers</u>
4.Time point 4		· ———	
point r			<u>Triggers</u>
minutes			
into case			
IID			
HR:			
BP: RR:			
O_2SAT :			
T:			

Appendix A: Laboratory Results (as needed)

<u>CBC</u>	<u>Cardiac/Coags</u>
WBC	Trop
Hgb	INR
Plt	аРТТ
<u>Lytes</u>	<u>Biliary</u>
Na	AST
K	ALT
Cl	ALP
HCO ₃	TBili
AG	Lipase
Urea	•
Cr	
Glucose	
<u>VBG</u>	
pH	
pCO_2	
p0 ₂	
HCO ₃	
11003	

Equipment List

Sample Debriefing Questions:

Summarize the case:

- 1. Decompress: Go around the room and ask if anyone needs to talk about anything distracting to decompress before beginning the case.
- 2. Can you (team leader) please summarize the case for us?

Medical management:

Teamwork and Communication:

- 1. We were looking for clear role assignments and task delegations. How were roles assigned in this case? How were tasks delegated between the team members?
- 2. Provide an example of effective communication between team members.
- 3. Provide a specific example of a time when communication could have been improved.
- 4. What critical information is necessary to communicate to the team

Appendix B: ECGs, X-rays, Ultrasounds and Pictures

References: