

Simulation Design Template

(revised May 2019)

(Sharon Rose_ Adult Telehealth) Simulation

Date: XX-XX-XX

Discipline: Nursing

Expected Simulation Run Time:

Location: Virtual/telehealth

Today's Date: XX-XX-XX

File Name: Adult Telehealth

Student Level: multi-level prelicensure

Guided Reflection Time: Twice the amount of time that the simulation runs.

Location for Reflection: Virtual prebriefing/debriefing

Brief Description of Client

Name: Sharon Rose

Date of Birth: October 20-xx

Gender: **Age:** 65 years old **Weight:** 130 pounds **Height:** 5 "1"

Race: African American **Religion:** Christian

Major Support: Daughter **Support Phone:** overseas

Allergies: Environmental allergies

Immunizations: up to date

Attending Provider/Team: Dr. Boateng

Past Medical History: Asthma

History of Present Illness: patient experienced severe abdominal pain and called 911; rushed to the ED and had an emergency laparoscopic surgery.

Social History: lives alone in her house

Primary Medical Diagnosis: Gall bladder stones

Surgeries/Procedures & Dates: Laparoscopic Cholecystectomy 10 days ago

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Psychomotor Skills Required of Participants Prior to Simulation

(list skills)

- Assessment of the adult patient
- Assessment of post-operative laparoscopic incisions

Cognitive Activities Required of Participants Prior to Simulation

(textbooks, lecture notes, articles, websites, etc.)

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- Review Patient History and Health Assessment of the adult:
<https://raquelbertiz1969.pressbooks.com/>
 - Complete Active Learning Templates:
 - a. Health History and adult assessment
 - b. Disease process: Cholecystitis/ Cholelithiasis:
<https://www.facs.org/~media/files/education/patient%20ed/cholesys.ashx>
 - c. Care Management: Cholecystectomy-post operative care:
<https://www.facs.org/~media/files/education/patient%20ed/cholesys.ashx>
 - d. Concept: Telehealth : [About Telehealth | CCHP Website \(cchpca.org\)](http://www.cchpca.org)

Simulation Learning Objectives

General Objectives (Note: The objectives listed below are general in nature and once learners have been exposed to the content, they are expected to maintain competency in these areas. Not every simulation will include all of the objectives listed.)

1. Conduct assessments appropriate for care of patient in an organized and systematic manner.
2. Provide priority nursing actions/education based on assessment and clinical data.
3. Communicate with patient and family in a manner that illustrates caring, reflects cultural awareness, and addresses psychosocial needs.
4. Communicate appropriately with other health care team members in a timely, organized, patient-specific manner.
5. Make clinical judgments and decisions that are evidence-based.
6. Practice within nursing scope of practice.
7. Demonstrate knowledge of legal and ethical obligations.

Simulation Scenario Objectives (limit to 3 or 4)
During the telehealth visit, the nurse will:

1. Obtain health history in a telehealth environment.
 2. Conduct post-operative assessment in a virtual environment.
 3. Educate patient on post-operative care.
 4. Collaborate with the healthcare team to provide post-operative care.
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For Faculty: References, Evidence-Based Practice Guidelines, Protocols, or Algorithms Used for This Scenario:

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References:

American College of Surgeons (2015). Cholecystectomy. Surgical removal of the gallbladder. <https://www.facs.org/~/-/media/files/education/patient%20ed/cholesys.ashx>

Badowski, D. M., Rossler, K. L., & Gill-Gembala, L. T. (2019). Telehealth Simulation With Motivational Interviewing: Impact on Learning and Practice. *The Journal of nursing education*, 58(4), 221–224. <https://doi.org/10.3928/01484834-20190321-06>

Cady, R. G., & Finkelstein, S. M. (2014). Task-technology fit of video telehealth for nurses in an outpatient clinic setting. *Telemedicine journal and e-health : the official journal of the American Telemedicine Association*, 20(7), 633–639. <https://doi.org/10.1089/tmj.2013.0242>

Center for Connected Health Policy (2021). What is telehealth. Public Health Institute. [About Telehealth | CCHP Website \(cchpca.org\)](#)

Centers for Medicare & Medicaid Services. (2020). Medicare telemedicine healthcare provider fact sheet. <https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet>

Mataxen, P.A. & Webb, L.D. (2019). Telehealth nursing: More than just a phone call. *Nursing*, 49(4), 11-13

Merritt, L. S., Brauch, A. N., Bender, A. K., & Kochuk, D. (2018). Using a Web-Based e-Visit Simulation to Educate Nurse Practitioner Students. *The Journal of nursing education*, 57(5), 304–307. <https://doi.org/10.3928/01484834-20180420-10>

M. Lister, J. Vaughn, J. Brennan-Cook, M. Molloy, M. Kuszajewski, R.J. Shaw (2018). Telehealth and telenursing using simulation for pre-licensure USA students, *Nurse Education in*

Practice, Volume 29,59-63,

Smith, T.S., Watts, P., & Moss, J.A. (2018). Using Simulation to Teach Telehealth Nursing Competencies. *Journal of Nursing Education, 57(10) 624-627.*

Setting/Environment

<input type="checkbox"/> Emergency Room <input type="checkbox"/> Medical-Surgical Unit <input type="checkbox"/> Pediatric Unit <input type="checkbox"/> Maternity Unit <input type="checkbox"/> Behavioral Health Unit	<input type="checkbox"/> ICU <input type="checkbox"/> OR / PACU <input type="checkbox"/> Rehabilitation Unit <input type="checkbox"/> Home <input type="checkbox"/> Outpatient Clinic <input type="checkbox"/> Other: virtual/telehealth/e visit
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Equipment/Supplies (choose all that apply to this simulation)

Simulated Patient/Manikin/s Needed: virtual zoom meeting links; standardized patient

Recommended Mode for Simulator: script/training for SP- see attached script

(i.e. manual, programmed, etc.)

Other Props & Moulage:

<p>Equipment Attached to Manikin/Simulated Patient:</p> <input type="checkbox"/> ID band <input type="checkbox"/> IV tubing with primary line fluids running at ___mL/hr <input type="checkbox"/> Secondary IV line running at ___mL/hr <input type="checkbox"/> IVPB with _____ running at mL/hr <input type="checkbox"/> IV pump <input type="checkbox"/> PCA pump <input type="checkbox"/> Foley catheter with ___mL output <input type="checkbox"/> O2 <input type="checkbox"/> Monitor attached <input checked="" type="checkbox"/> Other: abdominal steri strips	<p>Equipment Available in Room:</p> <input type="checkbox"/> Bedpan/urinal <input type="checkbox"/> O2 delivery device (type) <input type="checkbox"/> Foley kit <input type="checkbox"/> Straight catheter kit <input type="checkbox"/> Incentive spirometer <input type="checkbox"/> Fluids <input type="checkbox"/> IV start kit <input type="checkbox"/> IV tubing <input type="checkbox"/> IVPB tubing <input type="checkbox"/> IV pump <input type="checkbox"/> Feeding pump <input type="checkbox"/> Crash cart with airway devices and emergency medications <input type="checkbox"/> Defibrillator/pacer <input type="checkbox"/> Suction <input type="checkbox"/> Other: medications taken by patient-post operative prescriptions: Cefazolin; Advil
<p>Other Essential Equipment:</p>	
<p>Medications and Fluids:</p> <input type="checkbox"/> Oral Meds: <input type="checkbox"/> IV Fluids: <input type="checkbox"/> IVPB: <input type="checkbox"/> IV Push: <input type="checkbox"/> IM or SC:	

Roles

<input type="checkbox"/> Nurse 1 <input type="checkbox"/> Nurse 2- charge nurse <input type="checkbox"/> Nurse 3 <input type="checkbox"/> Provider (physician/advanced practice nurse) <input type="checkbox"/> Other healthcare professionals: (pharmacist, respiratory therapist, etc.)	<input type="checkbox"/> Observer(s)- virtual or face to face <input type="checkbox"/> Recorder(s) <input checked="" type="checkbox"/> Family member #1- SP <input type="checkbox"/> Family member #2 <input type="checkbox"/> Clergy <input type="checkbox"/> Unlicensed assistive personnel <input type="checkbox"/> Other
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Guidelines/Information Related to Roles

Learners in role of nurse should determine which assessments and interventions each will be responsible for, or facilitator can assign nurse 1 and nurse 2 roles with related responsibilities.

Information on behaviors, emotional tone, and what cues are permitted should be clearly communicated for each role. A script may be created from Scenario Progression Outline.

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Pre-briefing/Briefing

Prior to report, participants will need pre-briefing/briefing. During this time, faculty/facilitators should establish a safe container for learning, discuss the fiction contract and confidentiality, and orient participants to the environment, roles, time allotment, and objectives.

For a comprehensive checklist and information on its development, go to <http://www.nln.org/sirc/sirc-resources/sirc-tools-and-tips#simtemplate>.

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Report Students Will Receive Before Simulation

(Use SBAR format.)

Time: start of shift

Person providing report: clinic nurse manager

Situation: The patient needs a post-operative follow up visit but because of COVID 19 concerns, this is going to be a telehealth visit with the health care team.

Background: S. R. is a 65 years-old retired educator. Her husband died a year ago and her only child, an adult daughter, lives in Europe. Mrs. Rose was discharged home one day ago following an emergency laparoscopic cholecystectomy.

Assessment: The patient was discharged with 3 small abdominal incisions; healed with report of some discharge; was discharged to home on stable conditions 24 hours after the surgery. Today is the 10th post-operative day.

Recommendation: Complete a post-operative assessment and medication reconciliation. Provide post-operative health teachings, as necessary.

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Scenario Progression Outline- See attached script

Patient Name:

Sharon Rose

Date of Birth: 10/20/XX

Timing (approx.)	Manikin/SP Actions	Expected Interventions	May Use the Following Cues (SP)
0-5 min	<ul style="list-style-type: none"> Responds to verbal greetings by the RN Provides patient identifiers. 	<p>Learners should begin by:</p> <ul style="list-style-type: none"> Introducing self Confirming patient ID 	<p>Role member providing cue: Patient: Cue: If nurse does not ask for identifiers, and reason for visit, or introduce self: “Who are you”? “What will we discuss today?”</p>
5-10 min	<ul style="list-style-type: none"> Provides information on emergency surgery and eventual discharge to home. 	<p>Learners are expected to:</p> <ul style="list-style-type: none"> -review patient history -obtain relevant post-operative data that patient can provide 	<p>Role member providing cue: Patient: Cue: If nurse does not review history, patient will recall how horrifying the ER and surgical experience was.</p>
10-15 min	<ul style="list-style-type: none"> Provides information on social support, self-care and post-operative care. 	<p>Learners are expected to:</p> <p>Provide patient education.</p>	<p>Role member providing cue: Patient: Cue: If nurse does not provide education, ask about diet, exercise, wound care and bathing</p>
15-20 min	<ul style="list-style-type: none"> Indicates understanding of teaching and asks for clarifications. 	<p>Learners are expected to:</p> <p>Direct patient to next steps and next follow- up.</p> <p>Closes nurse-patient transaction.</p>	<p>Role member providing cue: Patient: Cue: If nurse does not direct patient to next steps, will ask “What’s next?”</p>





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Debriefing/Guided Reflection

Note to Faculty:

We recognize that faculty will implement the materials we have provided in many different ways and venues. Some may use them exactly as written and others will adapt and modify extensively. Some may choose to implement materials and initiate relevant discussions around this content in the classroom or clinical setting in addition to providing a simulation experience. We have designed this scenario to provide an enriching experiential learning encounter that will allow learners to accomplish the listed objectives and spark rich discussion during debriefing. There are a few main themes that we hope learners will bring up during debriefing, but if they do not, we encourage you to introduce them.

Themes for this scenario:

- Post-operative care
- Social Support during the COVID pandemic
- Telehealth Nursing

We do not expect you to introduce all of the questions listed below. The questions are presented only to suggest topics that may inspire the learning conversation. Learner actions and responses observed by the debriefer should be specifically addressed using a theory-based debriefing methodology (e.g., Debriefing with Good Judgment, Debriefing for Meaningful Learning, PEARLS). Remember to also identify important concepts or curricular threads that are specific to your program.

1. How did you feel throughout the simulation experience?
2. Give a brief summary of this patient and what happened in the simulation.
3. What were the main problems that you identified?
4. Discuss the knowledge guiding your thinking surrounding these main problems.
5. What were the key assessment and interventions for this patient?
6. Discuss how you identified these key assessments and interventions.
7. Discuss the information resources you used to assess this patient. How did this guide your care planning?
8. Discuss the clinical manifestations evidenced during your assessment. How would you explain these manifestations?
9. Explain the nursing management considerations for this patient. Discuss the knowledge guiding your thinking.
10. What information and information management tools did you use to monitor this patient's outcomes? Explain your thinking.
11. How did you communicate with the patient?
12. What specific issues would you want to take into consideration to provide for this patient's unique care needs?
13. Discuss the safety issues you considered when implementing care for this patient.
14. What measures did you implement to ensure safe patient care?
15. What other members of the care team should you consider important to achieving good care outcomes?
16. How would you assess the quality of care provided?
17. What could you do improve the quality of care for this patient?
18. If you were able to do this again, how would you handle the situation differently?
19. What did you learn from this experience?

- 20. How will you apply what you learned today to your clinical practice?
 - 21. Is there anything else you would like to discuss?
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