***COMMON STRUCTURE FOR HIGH FIDELITY SIMULATION SCENARIO***

SCENARIO TITLE

Supporting a patient who asks for help to communicate bad news to her family

SCENARIO OVERVIEW

DUMMY TYPE:

HEALTHCARE SERVICE: oncology

TARGET GROUP[[1]](#footnote-1): graduated nurses / BLOC 3 / 4 learners

ESTIMATED SCENARIO DURATION: 7 minutes

SCENARIO SUMMARY[[2]](#footnote-2):

Women, 69, mastectomy g post-op D3 – Communicating bad news to family: need of chemotherapy.

EDUCATIONAL OBJECTIVES

GENERAL OBJECTIVES:

* To communicate, orally, not verbally, taking into account the patient’s and her family’s needs, the situation, and the context.
* To communicate professionally, orally or in writing, with the purpose to cooperate with the different members of the multidisciplinary team, to ensure healthcare continuity.

SCENARIO-SPECIFIC OBJECTIVES:

PARTICIPANTS’ ROLE

|  |  |  |  |
| --- | --- | --- | --- |
| STUDENT | Frontline |  |  |
| PROFESSIONAL | Observers |  |  |
| TRAINERS[[3]](#footnote-3) | Trainer 1: facilitatorTrainer 2: participant |  |  |

EQUIPMENT LIST[[4]](#footnote-4)

Medical supplies:

 - Circulation[[5]](#footnote-5):

 - Ventilation[[6]](#footnote-6):

 - Miscellaneous[[7]](#footnote-7): thermometers, hand sanitiser

Medicines and solutes: PO, DIV

Documents[[8]](#footnote-8): nursery file

Accessories[[9]](#footnote-9):

* Suitcase
* Clothes for suitcase
* Tissues
* Artificial tears

Environment[[10]](#footnote-10):

* Patient’s armchair
* Bed
* Magazine
* Water bottle

SCENARIO PREPARATION

SIMULATION TYPE:

DUMMY TYPE:

SIMULATOR PREPARATION: standard patient

 - Setting:

 - Positioning[[11]](#footnote-11): patient in armchair or bed.

 - Accessories[[12]](#footnote-12): water bottle, phone, tissue box, patient’s nursery file.

ENVIRONMENT PREPARATION[[13]](#footnote-13): patient in bed or armchair.

PREPARATION OF ADDITIONAL EXAMINATIONS[[14]](#footnote-14):

PREPARATION OF STUDENTS/LEARNERS[[15]](#footnote-15): professional outfit and the student must have read the nursery file or patient file.

BRIEFING

TIME:

SITUATION[[16]](#footnote-16):

DOCUMENTS[[17]](#footnote-17):

PATIENT DATA[[18]](#footnote-18)

Surname: Age:

Name: Weight:

Date of birth: Height:

Allergies: Gender:

History:

Medical history:

Surgeries:

Ob/gyn:

Personal treatment:

FRAMES OF REFERENCE / EXPERTS RECOMMENDATIONS[[19]](#footnote-19)

DEBRIEFING IDEAS

SCENARIO PROGRESS

|  |
| --- |
|  |
| **Monitor setting** | **Patient dummy** | **Students’ interventions****(what we would like to see…)** | **Messages** |
| **Beginning time of scenario:** |
| **Initial state:** | Ex: patient standing, looking through the window.Announces that she fears telling her son she must undergo chemo.He is fragile, his dad has already been through this.I don’t know how to say it. How will he react?……………………………………………………………………………………………………………………………… | Empathic attitude (take time, sit down, touch her…)Active listeningNIC: 4920……………………………………………………………………………………………………………………………… |  |

SCENARIO EVALUATION

POSITIVE ASPECTS:

TO IMPROVE:

REALISM:

USED PROTOCOLS:

PROTOCOLS TO IMPLEMENT:

1. Skill level and number of participants [↑](#footnote-ref-1)
2. Scenario key words [↑](#footnote-ref-2)
3. Control of dummy setting / Debriefing/ Dummy voice/ Facilitator/ Disruptive element/ external stakeholder (phone speaker) [↑](#footnote-ref-3)
4. Prefer Check-list for quick check-up [↑](#footnote-ref-4)
5. Catheters, infusion lines, needles (IV, intraosseous, subcutaneous), blood collection tubes, tourniquet… [↑](#footnote-ref-5)
6. Nasal cannulas, non-rebreather masks, intubation supplies… [↑](#footnote-ref-6)
7. Capillary glycaemia, urinary catheter, thermometer, stethoscope, gloves, hand sanitizer…. [↑](#footnote-ref-7)
8. Patient medical file, transmission sheet, ECG, recommendation summary sheet [↑](#footnote-ref-8)
9. Pen, phone, diagnostic penlight for pupils, work outfits (white coats…) [↑](#footnote-ref-9)
10. Wig, basin, tissues with blood, patient’s suitcase… [↑](#footnote-ref-10)
11. Half sit-up, lying down [↑](#footnote-ref-11)
12. Presence of oxygen, of a drip tube, already scoped… [↑](#footnote-ref-12)
13. Raised bed rails, presence of patients belongings, tissues, needed information received

 (Displayed thermometer, glycaemia…) [↑](#footnote-ref-13)
14. If foreseen in the scenario, prepare additional examinations to display (chest radiograph, blood test…) [↑](#footnote-ref-14)
15. Preliminary analysis of documents if needed [↑](#footnote-ref-15)
16. Location where the scenario takes place, information before entering the simulation room [↑](#footnote-ref-16)
17. Document handed during the briefing/ care record, biological results, written transmissions … [↑](#footnote-ref-17)
18. Care record layout or if not necessary to the scenario, voice memo for the trainer [↑](#footnote-ref-18)
19. Quoted sources, bibliography [↑](#footnote-ref-19)