# 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<sup>1</sup>: graduated nurses / BLOC 3 / 4 learners

ESTIMATED SCENARIO DURATION: 7 minutes

SCENARIO SUMMARY<sup>2</sup>:

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:

<sup>&</sup>lt;sup>2</sup> Scenario key words





<sup>&</sup>lt;sup>1</sup> Skill level and number of participants

# PARTICIPANTS' ROLE

STUDENT	Frontline	
PROFESSIONAL	Observers	
TRAINERS <sup>3</sup>	Trainer 1: facilitator Trainer 2: participant	

# EQUIPMENT LIST<sup>4</sup>

Medical supplies:

- Circulation<sup>5</sup>:
- Ventilation<sup>6</sup>:
- Miscellaneous<sup>7</sup>: thermometers, hand sanitiser

Medicines and solutes: PO, DIV

Documents<sup>8</sup>: nursery file

Accessories<sup>9</sup>:

- Suitcase
- Clothes for suitcase
- Tissues
- Artificial tears

Environment<sup>10</sup>:

- Patient's armchair
- Bed
- Magazine
- Water bottle

# SCENARIO PREPARATION

SIMULATION TYPE:

DUMMY TYPE:

### SIMULATOR PREPARATION: standard patient

- Setting:
- Positioning<sup>11</sup>: patient in armchair or bed.

nali sit-up, iying down





<sup>&</sup>lt;sup>3</sup> Control of dummy setting / Debriefing/ Dummy voice/ Facilitator/ Disruptive element/ external stakeholder (phone speaker)

<sup>&</sup>lt;sup>4</sup> Prefer Check-list for quick check-up

<sup>&</sup>lt;sup>5</sup> Catheters, infusion lines, needles (IV, intraosseous, subcutaneous), blood collection tubes, tourniquet...

<sup>&</sup>lt;sup>6</sup> Nasal cannulas, non-rebreather masks, intubation supplies...

<sup>&</sup>lt;sup>7</sup> Capillary glycaemia, urinary catheter, thermometer, stethoscope, gloves, hand sanitizer....

<sup>&</sup>lt;sup>8</sup> Patient medical file, transmission sheet, ECG, recommendation summary sheet

<sup>&</sup>lt;sup>9</sup> Pen, phone, diagnostic penlight for pupils, work outfits (white coats...)

 <sup>&</sup>lt;sup>10</sup> Wig, basin, tissues with blood, patient's suitcase...
<sup>11</sup> Half sit-up, lying down

- Accessories<sup>12</sup>: water bottle, phone, tissue box, patient's nursery file.

ENVIRONMENT PREPARATION<sup>13</sup>: patient in bed or armchair.

PREPARATION OF ADDITIONAL EXAMINATIONS<sup>14</sup>:

PREPARATION OF STUDENTS/LEARNERS<sup>15</sup>: professional outfit and the student must have read the nursery file or patient file.

## BRIEFING

TIME:

SITUATION<sup>16</sup>:

DOCUMENTS<sup>17</sup>:

# PATIENT DATA<sup>18</sup>

Surname: Name: Date of birth: Allergies: History: Medical history: Surgeries: Ob/gyn: Personal treatment: Age: Weight: Height: Gender:

#### FRAMES OF REFERENCE / EXPERTS RECOMMENDATIONS<sup>19</sup>

# DEBRIEFING IDEAS

# SCENARIO PROGRESS

Monitor setting	Patient dummy	Students' interventions (what we would like to see)	Messages		
Beginning time of scenario:					

<sup>&</sup>lt;sup>19</sup> Quoted sources, bibliography





<sup>&</sup>lt;sup>12</sup> Presence of oxygen, of a drip tube, already scoped...

<sup>&</sup>lt;sup>13</sup> Raised bed rails, presence of patients belongings, tissues, needed information received (Displayed thermometer, glycaemia...)

<sup>&</sup>lt;sup>14</sup> If foreseen in the scenario, prepare additional examinations to display (chest radiograph, blood test...)

<sup>&</sup>lt;sup>15</sup> Preliminary analysis of documents if needed

<sup>&</sup>lt;sup>16</sup> Location where the scenario takes place, information before entering the simulation room

<sup>&</sup>lt;sup>17</sup> Document handed during the briefing/ care record, biological results, written transmissions ...

<sup>&</sup>lt;sup>18</sup> Care record layout or if not necessary to the scenario, voice memo for the trainer

Initial state:	Ex: patient standing, looking through the window.	Empathic attitude (take time, sit down, touch her)	
	Announces that she fears telling her son she must undergo chemo.	Active listening NIC: 4920	
	He is fragile, his dad has already been through this. I don't know how to say it. How will he react?		

# SCENARIO EVALUATION

POSITIVE ASPECTS:

TO IMPROVE:

REALISM:

USED PROTOCOLS:

PROTOCOLS TO IMPLEMENT:



