

Respiratory system

Research Staff:

- Participants should be asked to arrive dressed as they would for clinical placement. That is, in uniform, hair and jewellery appropriate, note pad, pen, watch, stethoscope, etc.
- Ask participant not to discuss the scenarios with their colleagues until study is complete.
- Ensure pre-assessment forms are complete
- Ensure eye tracking is working
- Ask SA questions at the end of the scenario
- Check equipment is available and correct for the scenario
- Run through scenario with participants and ask them to repeat it back.
- Emphasize the need to record observations regularly and verbalise thoughts and actions
- You will be scoring and acting as a junior inexperienced assistant (nurse/paramedic as applicable)

Briefing Notes

Nursing student: You are on a shift as a nurse on a medical ward. As your 'patient' is an actor you are required to take observations as per normal but results will be revealed by the researcher. The patient is alone in their room.

Paramedic student: You are into your shift as a primary response paramedic in a response car and have been called to a patient at home. As your 'patient' is an actor you are required to take observations as per normal but results will be revealed by the researcher. The patient is alone in their room.

The patient: Brian is a 65 year old complaining of shortness of breath, you are the first responder.

The scenario will be run in 'real time'. There will therefore be gaps in activity, (*this does not mean you are doing anything wrong*). You have an observation chart to document vital signs. Talk out loud about what you are thinking and doing. You can ask for the patient's status at any point and you can expose him down to his underwear.

At the end of the simulation you will be stopped and asked about specific aspects of the situation, as you perceive them, at that time. The questions should be answered as rapidly as possible – it is Ok to use your instinct.

Researcher

DO NOT PROMPT at any point but assist each participant as applicable (as an inexperienced nurse/paramedic). Give information as requested after an applicable action, i.e. only indicate the BP or HR after it has been taken. Please rate performance on the following scale during or immediately after each scenario.

Patient scenario

You are Mr Brian Reed, 65 years of age, employed as a storeman at a local Bunnings store. You are married with two children; 20 and 22 years. **You have a fear of doctors and hospitals and rarely seek treatment. This is the first time you have been in hospital/called for help**

You are 175 cm tall and a little overweight

Presenting complaint (if asked)

In the last day or so you have developed a productive cough and have been breathless at rest. (During the scenario short of breath, cough, wheeze, fast breathing, use accessory muscles – lift shoulders up and down)

History of presenting complaint

- Short of breath for many years but worsening over the last few days
- You have had a cough since a recent cold that will not go away.

If asked:-

- The cough produces thick sticky yellow phlegm and can be described as harsh and chesty.
- Your mum said you were always a “wheezy, snotty child”
- When breathless you feel you can’t fill up your lungs with air
- In the past, the symptoms have subsided within 2-3 minutes if you stop what you are doing
- You know its not your heart but you are frightened it may be lung cancer because of your smoking
- **You have not coughed up any blood ***
- **You have no chest pain, no leg pain and no periods of immobility. You have not travelled recently***
- **Your legs have not been swollen***
- **You voice has not been hoarse***

* Key negative features

Past medical history

- Tonsils and adenoids removed as a child
- **If asked**
 - **you do not suffer with hay fever**
 - **You have never had eczema**

Drug history

- No current prescribed medication
- If asked –
 - you take a daily multivitamin
 - you have no known drug allergies
 - you get an itchy rash if you sit on newly mown grass

Social history

- You started smoking 50 years ago (now 20 a day)
- You drink 5 cans of beer most weekends
- You are a little overweight and eat a lot of take-away meals.
- Married to Lyn with two children. Your family are fit and well
- You don’t take regular exercise but feel your job keeps you fit.
- You have not been exposed to occupational pollutants at work

Family history

- Both your parents are alive and well but your father has high blood pressure
- You have one younger sister who is asthmatic and has eczema

Moulage – cyanosis – blue lips

At 4 minutes - patient rapidly deteriorates: short of breath, cough, wheeze, fast breathing, use accessory muscles – lift shoulders up and down

Participant No =

Date=

Respiratory (Scenario 3)

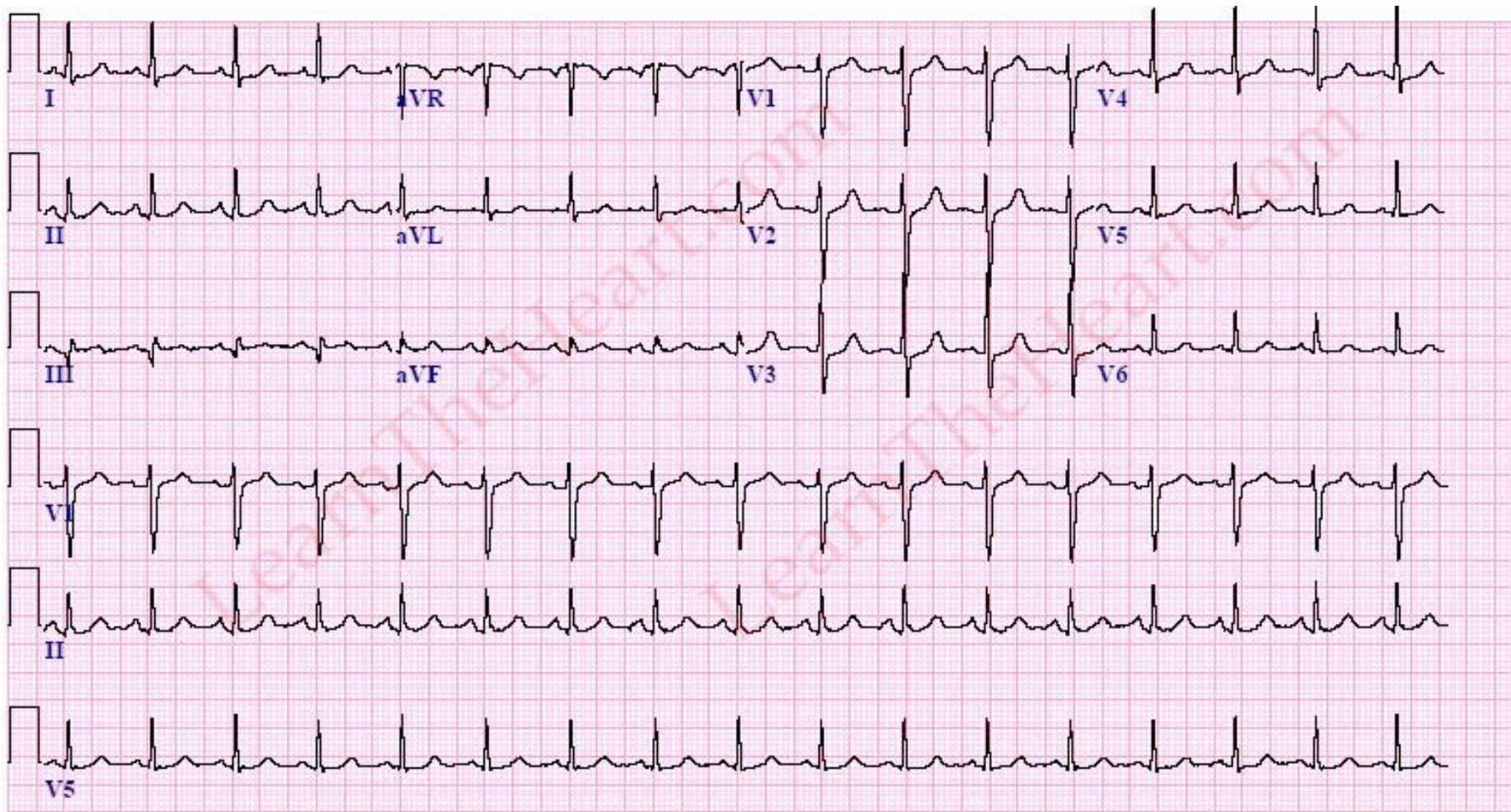
Aprox Time (mins)	Observations	Action	Correct/incorrect	Points at debrief
On arrival 1-4		Obtain immediate history	Y/N	Discuss 'Blue Bloater' (Chronic bronchitis) Dyspnoea, cyanosis, cough, wheeze
		Record/request obs		
	BP 135/95		Y/N	
	HR 100		Y/N	
	RR 28		Y/N	
	CRT – 2 secs		Y/N	
	O ² Sats 90%		Y/N	
Temp 38.8		Y/N		
		Investigate current medication usage	Y/N	Prescription, over counter, recreational
		Identify symptoms/negative features	Y/N	Heart failure, blood expectoration, leg pain/oedema, travel.
	Bilateral basal Wheeze and coarse crackles	Auscultate Chest	Y/N	
		Administer Oxygen	Y/N	Discuss O ₂ levels – objective 90% sats etc

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Patient rapidly deteriorates short of breath, cough, wheeze, fast breathing, use accessory muscles – lift shoulders up and down

4-7.5	BP 170/110	Record/request Obs.	Y/N	Emphasise systematic ABCs. Time critical Aim for O2 sats of 90%
	HR 150		Y/N	
	RR 35 +accessory ++ wheeze		Y/N	
	CRT – 2 secs		Y/N	
	O ² Sats 82% (despite O ² if on)		Y/N	
		Call for applicable emergency assistance	Y/N	Orthopnoeic position [Paramedics only/performed by nurse assistant] [Prescribed on medication sheet for nurses]
		Position appropriately	Y/N	
		IV cannulation	Y/N	
		Nebuliser (beta2-agonist, anticholinergics)	Y/N	
7.5-8 mins?	BP 140/80 HR 145 RR 32 CRT – 2 secs O2 Sats 89%	Instructor Note: Where requested - unless majority of above have been missed - indicate these observations and initial stabilisation in last 30 secs of scenario		Stabilisation may be temporary

End scenario with SA questions



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