**1. SCENARIO OVERVIEW**

**Warning: Do not share this information with the participants**

|  |  |  |
| --- | --- | --- |
| **Scenario Name** | **Reference**  (if applicable) | **Duration** (estimated) |
|  |  |  |
| **Development by** (names and date): | | **Last Updated by:**  (name and date) |
|  | |  |

|  |  |
| --- | --- |
| **Target audience and Learning objectives** | |
| **Participants profile** (include number) | |
|  | |
| **Clinical Skills** | **Non-Technical Skills (NTS)** |
|  |  |

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| --- | --- | --- |
| **Patient Quick Reference**  In a Multi-Patient Scenario, add as many Patient Quick Reference modules as needed | | |
| **Name** | **Gender/Ethnic** | **Date of birth (Age)** |
|  |  |  |
| **Main complain** | | **Hospital Patient Number** |
|  | |  |

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| --- | --- |
| **Setting Quick Reference**  For sequential simulation, add as many Setting Quick Reference modules as needed | |
| **Location** | **Time of Day/Hour** |
| □ Pre-Hospital □ Transport □ Emergency Room □ Operating theater □ Post-op Unit |  |
| □ ICU □ Ward □ Consultation office □ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Modality**  For hybrid simulation select all modalities used | |
| □ Standardized Patients #\_\_\_\_ □ Standardized Relatives #\_\_\_\_ □ Standardized healthcare personal #\_\_\_\_ | |
| □ Task-trainers #\_\_\_\_ □ Computer –based #\_\_\_\_ □ VR/AR #\_\_\_\_ □ Simulators #\_\_\_\_ | |
| □ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

**2. SETTING PREPARATION**

Adjust these tables to local standards. Only major items should be listed. Add pictures of the setting, if possible.

|  |  |  |  |
| --- | --- | --- | --- |
| **Clinical Equipment and Materials** | | | |
|  | E.g. Stethoscope, Pulse Oximeter, Defibrillator,, Obstetric bed,… |  |  |
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| **Drugs and Fluids** | | | |
|  | E.g. Epinephrine, Saline solution, Universal Blood, … |  |  |
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| --- | --- | --- | --- |
| **Others** | | | |
|  | E.g. Phone, computer,… |  |  |
|  |  |  |  |
|  |  |  |  |

**3. SIMULATED PATIENT(S) AND OTHER INTERVENIENT(S) PREPARATION**

|  |  |
| --- | --- |
| **Intervenient(s) and Role(s)** | |
| **Technicians** | E.g. simulator operator |
| **Instructors** | E.g. Facilitator |
| **Standardized patients/relatives/HCP\*** | E.g. Confederate as a surgeon |
| **Participants**  (if applicable) | E.g. Participant as a relative |

*\*HCP – healthcare personal*

*Add as many Individual Preparation modules as needed. Should be included modules for standardized patients/relatives/HCP, simulators, and other intervenient. Add pictures of the setting, if possible.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Individual Preparation** | | | |
| **Type** | □ SP □ Simulator □ Other: \_\_\_\_\_ | **Role** |  |
| **Characterization/specific features** (e.g. *moulage*, clothing) | | | |
|  | | | |
| **Instructions** (e.g. behavior, complaints, specific verbal cues, etc) | | | |
|  | | | |

**4. BRIEFING OF THE SIMULATION ENVIRONMENT**

**This section is to be shared with participants**

|  |  |
| --- | --- |
| **Room Briefing** | |
| **Equipment/Material location and functions** |  |
| **Simulator Briefing** | |
| **Can do** | E.g. Can be monitored |
| **Cannot do** | E.g. Cannot be intubated |
| **Cues from outside** | E.g. Skin color, blood gases results will be provided by the instructor |
| **Environment briefing** | |
| **Expect vs reality** |  |
| **Basic simulation rules**  (if not previously introduced) | E.g. Fiction contract, relevant learning environment, … |

**5. SCENARIO BRIEFING**

**This section is to be shared with participants**

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| **Disclosure**  *If faculty/confederates have specific roles in the scenario* |
| E.g. “I (instructor) will be in the scenario as a nurse assistant.” |

|  |  |
| --- | --- |
| **Participants and Roles** | **Briefing** |
| E.g. Team with the patient | E.g. Patient registry, specific data/information |
| E.g. Crash team | E.g. Wait in the staff room. You may be called. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| States | Vital Signals | Physical  Signs | Notes and speech lines for the Operator | Change stageTriggers  (time or action based) | Other notes and cues |
| **Basal (initial)** | E.g.  NIBP: 110/65mmHg  SatO2: 97%  Pulse: 73 bpm  ECG: sinus rhythm | E.g.  Respiratory sounds: normal  RR: 12  Eyes: open and blinking | E.g. “I am fine.”  E.g. If sedated, do not reply. | E.g. After 1 min go to state 1  E.g. If monitored go to state 2 | E.g. Nurse (confederate) indicates rash on the chest.  E.g. If requested blood, send to the room after 3-4 min |
| **State 1** |  |  |  |  |  |
| **State 2** |  |  |  |  |  |
| **Final State** |  |  |  |  |  |

**6. SCENARIO PROGRESSION AND PROMPTS**

*Vital signals can include HR, SpO2, NIBP and other relevant signals related with the scenario.*

*Patient charts, lab results, x-rays and other medical documentation should be included in this section, preferably in a print-ready format (each document on a separate page).*

|  |
| --- |
| **Medical Documentation** |
| E.g. gasometry results, X-ray, … |

|  |  |
| --- | --- |
| **Scenario life-savers**  *If applicable* | |
| **“Too Fast” Resolution** | E.g. second problem arises |
| **“Too Slow” Resolution** | E.g. Relative or phone call provides information |
| **Wrong interpretation** | E.g. Offered information by confederate.  E.g. Time-out and review the case. |

**7. ANNOTATIONS AND DEBRIEFING TOPICS**

*Based on Learning Objectives*

|  |  |
| --- | --- |
| **Clinical Skills** | **Non-Technical Skills (NTS)** |
|  |  |

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| --- |
| **Observation/Assessment Tools** |
|  |
| **Debriefing Topics** |
|  |
| **Notes and Key Moments** |
|  |