ACCURATE: Our Next Generation of Experiential Learning

William Rex Patty, MSN, APRN, RN-BC
Josh Ault, BSN, BS, RN, EMT-P, CCRN
Objectives

• Describe the benefits of an intensive, simulation-based program that promotes nursing excellence, leadership and critical thinking

• Identify innovative methods of instruction to promote clinical decision making

• Demonstrate unfolding clinical case scenarios utilizing a high-fidelity human patient simulator
Our Simulation Lab
Week of Intense Nurse Group Simulation
OUR APPROACH

• One week intensive class
• Experiential and participative in nature
• Limited to 6 participants with mixed background/experience
• Accommodates real time needs
• Simulation based
• Incorporates self reflection
• Honest feedback
Wings To-Date

- Since August 10, 2009
- 89 Sessions
- 465 Participants
Problem

Sanjivani Hospital, Sevashram Chouraha, Udaipur, India
Working Collaboratively

Critical Care New RN/Grad Residency Program

- **Weeks 1 & 2**
  - HR & PCS Orientation
  - Basic Dysrhythmia
  - 12 Lead EKG
  - Basic Hemodynamics

- **Weeks 3-15 (13 wks)**
  - Med/Surg Residency
  - SICU: 7S, SC, 7N
  - MICU: 5N, 6N, IMC
  - Weeks 3-15: M-F 0700-1530

- **Weeks 16-27 (12 wks)**
  - ICU Residency
  - Weeks 16-20: M-F 0700-1530
  - Weeks 21-27: 12 hr shifts
  - Advanced Hemodynamics
  - Code Blue
  - IABP
  - Shadow Experience: OR, Cath Lab, Pulm Lab/RT

- Experienced RNs will have ability to test out of classes (i.e. basic hemo, basic dys, etc)

TenNix Productions ©
Working Collaboratively

Adult
Critical
Care
Urgent
Recognition
And
Treatment
Essentials
FOUR PILLARS OF ACCURATE

- VIGILANCE
- CRITICAL THINKING
- PATHOPHYSIOLOGY
- SHOCK
### Scenario #8

**Event:** Patient with MI and Cardiogenic Shock post PTCA

**Admit**
Anterior MI with STENTS

**PNCI**
Cardiogenic Shock Secondary to Acute MI

**State 1**
Initial Assessment 2 hours post PTCA

**State 2**
Condition Deteriorates Non-Stemi with PVC

**State 3**
Condition continues to deteriorate

**State 4**
Cardiogenic Shock

**State 5**
Improves with Inotropes

---

**FOUR PILLARS OF ACCURATE**

- SHOCK
The Body Response to HELP! Part 6
AKA Compensatory Stage

- Tachypnea
- Tachycardia
- Vasoconstriction
- Decreased Urine Output
- B/P Normal
### Scenario #3

<table>
<thead>
<tr>
<th>Event:</th>
<th>Patient with Paraplegia Fracture Right Arm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admit</td>
<td>Post-Surgery S/P ORIF Right Arm</td>
</tr>
<tr>
<td>PNIC</td>
<td>Sepsis, Septic Shock and Multiple Organ Dysfunction Syndrome</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State 1</th>
<th>Initial Assessment Altered LOC</th>
</tr>
</thead>
<tbody>
<tr>
<td>State 2</td>
<td>Condition Deteriorates further</td>
</tr>
<tr>
<td>State 3</td>
<td>Transfer to ICU full Hemodynamics</td>
</tr>
<tr>
<td>State 4</td>
<td>Initiate Sepsis/Septic Shock Protocol</td>
</tr>
<tr>
<td>State 5</td>
<td>Improves with Fluids/Vasopressors</td>
</tr>
</tbody>
</table>
Scenario #11

Event: Code #3, Renal Failure
Admit: Lower Extremity Cellulitis, Confusion
PNCI: Acute Renal Failure
State 1: Initial Assessment Confused, ECG Hyperkalemia
State 2: Condition Deteriorates
State 3: V-Tach
State 4: V-fib
State 5: Asystole
Scenario #9
Event: Code #1, Over Sedation
Admit: ETOH with CIWA
PNCI: Cardiopulmonary arrest
State 1: Agitation initiate Precedex
State 2: Respiratory rate of 4
State 3: Condition Deteriorates Moderate Ischemia with PVC’s
State 4: V-FIB
State 5: Resolves IF GOOD CPR/ACLS
State 5: Asystole if NOT GOOD CPR/ACLS
Journal 1/16

I felt like I got a lot out of today and learned a lot. I loved how after the scenario we get into a lot more of the practical side of things. It helps me a lot to know what is going on with a patient especially in learning what to expect and do in the future.

Simulation itself is a little frustrating to me because it doesn’t feel a whole lot like real life. It feels very awkward and chaotic and it seems the process of things in real life would be a lot different. Overall, it was a great experience and I got a lot out of it.
Today went very well. At the end of it I had learned a lot and felt confident in what I had learned. It went quickly and I couldn’t believe how many scenarios we went through in that short time. It began to feel less awkward and more comfortable. I feel like my instincts and my critical thinking skills are improving to where I can more quickly recognize that there is a problem and what to do about that problem.
Journal 4/18

Today was much better. I am starting to feel more and more confident in knowing what I'm seeing and why. I am seeing how I can apply what I'm learning to real patients as well as knowing where to go or how to find out what I don't know. I'm excited to see how I can apply this to real situations.
Journal Entry 1

My first day in the accurate class was actually a great experience. I was one of the ones who was terrified of sim and yesterday helped to lessen that fear. The first exercise was very beneficial, I realized how much I need to improve my assessment skills and also how much I needed other nurses. The second sim experience was fun & I didn't feel as much of that intimidation. I never have said that I enjoyed sim before, but I can actually say I did in the very first day. I'm excited to see what the rest of this week brings!
Journal Entry 2

My second day in accurate was a bit more challenging. I still felt more calm than I ever thought possible, but there was still some nervousness. I need to become more confident and I think this class is helping with that tremendously. I’m still enjoying the class, although today was hard. I learned so much! I will be such a better nurse from this class!
Analytical Results cont...

Journal Entry 3

My third day in accurate was probably my favorite day. I feel like the group as a whole had made so much improvement. We worked great as a team & started thinking outside the box. I loved all of the discussion between us. I learned so much today & my confidence is increasing everyday. The only thing that I would change is when I took this class, I wish I would have had it early in my orientation. I’m currently about 1 month post orientation & I think I would have really benefitted from this class before getting off orientation. Never the less, I’m really enjoying this class!
So...
Questions / Comments / Thoughts / Concerns?

William (Rex) Patty II, MSN, APRN, RN-BC
Education and Development Specialist
Stormont Vail Health, Topeka, KS
785-354-5828
wpatty@stormontvail.org

Joshua Ault, BSN, BS, RN, EMT-P, CCRN
Education and Development Specialist
Stormont Vail Health, Topeka, KS
785-354-6595
joault@stormontvail.org