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Infusion: IV Start and Blood

Instructor Information

Patient Name: Manuel Garcia

Simulation Developer(s): Melissa Brickner, Bridgett Everett, Debra A. Mosley, Beverly Snyder-Desalles, and Judy Young

Scenario Purpose:

- To assist nursing staff to effectively initiate intravenous access and blood infusion therapy

Learner(s):

- Registered Nurses (RN), Licensed Practical Nurses (LPN), Unlicensed Assistive Personnel (UAP)
- Others as desired, depending on facility protocols
- Recommend no more than 6 learners (3 of which can be observers)

Time Requirements:

- Setup: 5 minutes
- Scenario: 25 minutes
- Debrief: 25 minutes
- Reset/Breakdown: 5 minutes

Scenario Prologue:

- Seventy-seven (77) year old male four (4) hours status post colon resection for removal of a sigmoid colon mass 4 hours ago by Dr. Moore. Vital signs are stable and he is on 2 liters of oxygen via nasal cannula. He has a midline abdominal incision with a dry sterile dressing. Bowel sounds are hypoactive. His hemoglobin was 6.8 mg/dL and hematocrit 21 mg/dL. Dr. Moore is aware. He just examined him and is entering orders. His IV needs to be restarted.
- The simulation begins when the learners are receiving report from the nurse**

Patient information:

- General:** Sleepy but arousable
- Weight/Height:** 75kg (165lbs) 172.7cm (68in)
- Vital Signs:** BP 96/60, Temp 97.3, HR 100, RR 22, O2 Sat 95%
- Pain:** 6/10 abdominal incision
- Neurological:** Unremarkable
- Respiratory:** Eupneic
- Cardiac:** Unremarkable
- Gastrointestinal:** Bowel sounds hypoactive
- Genitourinary:** Unremarkable
- Musculoskeletal:** Unremarkable
- Skin:** Pale. Midline abdominal dressing dry and intact
- Past Medical History:** Hypertension, hemorrhoids, constipation, and rectal bleeding
- Past Surgical History:** Hemorrhoidectomy

Medications:

- Lisinopril 2.5 mg one time a day
- Docusate sodium 100mg one time a day

Allergies:

- Sulfa

 Green Text Confederate

 Red Text Physiology Change

Learning Objectives

Patient Name: Manuel Garcia

Simulation Developer(s): Melissa Brickner, Bridgett Everett, Debra A. Mosley, Beverly Snyder-Desalles, and Judy Young

Scenario Purpose:

- Assist nursing staff to effectively initiate intravenous access and administer blood transfusion therapy

Pre-Session Activities:

- Complete pertinent training on initiating intravenous blood transfusion therapy
- Review any policies and protocols on initiating blood transfusion therapy

Potential Systems Explored:

- What standardized protocols currently exist to establish safety with initiating and monitoring blood transfusion therapy?
- When should the healthcare provider consider stopping blood transfusion therapy?
- What factors are important to consider prior to initiating blood transfusion therapy?
- Which staff members are qualified to initiate blood transfusion therapy?
- How long should the outpatient be monitored after a blood transfusion before discharge?
- What facility specific documentation is required when initiating and/or monitoring blood transfusion therapy?
- What are potential contraindications and complications for the outpatient receiving blood transfusion therapy?

Scenario Specific Learning Objectives (Knowledge, Skills, and Attitudes = K/S/A):

**The learner will apply ICARE principles throughout the scenario

Learning Objective 1: Initiate intravenous therapy

- a. *K- Demonstrate knowledge of facility specific intravenous therapy protocol*
S- Initiate intravenous access using aseptic technique per facility protocol

Learning Objective 2: Demonstrate the steps required to initiate intravenous blood infusion therapy

- a. *K- Discuss facility specific protocol for the outpatient receiving blood transfusion therapy*
S- Perform facility specific patient identification for the outpatient receiving a blood transfusion
- b. *K- Identify and collect supplies necessary for blood transfusion therapy*
S- Initiate blood transfusion therapy per protocol

Learning Objective 3: Demonstrate effective communication when caring for the patient receiving blood transfusion therapy

- a. *S- Perform patient/family teaching in a language and educational level they can understand*
A- Stress the importance of following instructions to the patient/family with a calm demeanor
- b. *S- Complete facility specific documentation of actions taken for the outpatient receiving blood transfusion therapy*

Debriefing Overview:

- Ask the learner(s) how they feel after the scenario
- Have the learner(s) provide a summary of the scenario from a healthcare provider/clinical reasoning point of view
- Discuss the scenario and ask the learners what the main issues were from their perspective
- Ask what was managed well and why.
- Ask what they would want to change and why.
- For areas requiring direct feedback, provide relevant knowledge by stating "I noticed you [behavior]..." Suggest the behavior they might want to portray next time and provide a rationale. "Can you share with us?"

- Indicate closing of the debriefing but provide learners with an opportunity to voice one or two take-aways that will help them in future practice
- Lastly, ask for any outstanding issues before closing the debrief

Critical Actions/Debriefing Points:

1. Verify orders
2. Perform patient education
3. Perform hand hygiene
4. Put on PPE
5. Check for allergies
6. Use aseptic technique
7. Prime blood administration tubing with normal saline without fluid dripping from the end
8. Initiate IV with a catheter no smaller than a 20 gauge, secure, and label per policy
9. Obtain baseline vital signs prior to obtaining the blood
10. Perform blood verification per policy with another registered nurse per policy
11. Initiate infusion at 5 mL/min for 15 minutes or per policy (utilize pump if required)
12. Inform the patient to notify the nurse of any adverse reactions
13. Document what was done and how patient tolerated it per facility protocol

Simulation Set-Up

Patient Name: Manuel Garcia

(ALS Mannequin and IV task trainer)

Simulation Developer(s): Melissa Brickner, Bridgett Everett, Debra A. Mosley, Beverly Snyder-Desalles, and Judy Young

Room Set-up:

- Set up like an inpatient room

Patient Preparation:

- The patient is wearing a hospital gown (inpatient)
- Midline abdominal dressing (ABD)
- Monitoring Device 3 Wave form
 - ECG Sinus rhythm, O2 Sat 95%, BP 110/72, Temp 97.3, HR 100, RR 22

Have the following equipment/supplies available:

- Gloves
- IV catheters (22g or 20g)
- IV start supplies (tourniquet, tape, clear occlusive dressing, label, antiseptic skin prep, 2x2 gauze pads, etc.)
- Blood administration tubing
- 500 mL bag of normal saline
- Medication label for intravenous (IV) Ceftriaxone 2 G
- Unit of blood (see label in supplements)
- IV saline flush
- ABD dressing
- Surgical tape
- IV pump (if applicable)
- Bedside table

Note: 5.8 Simpad software update is required to load scenarios

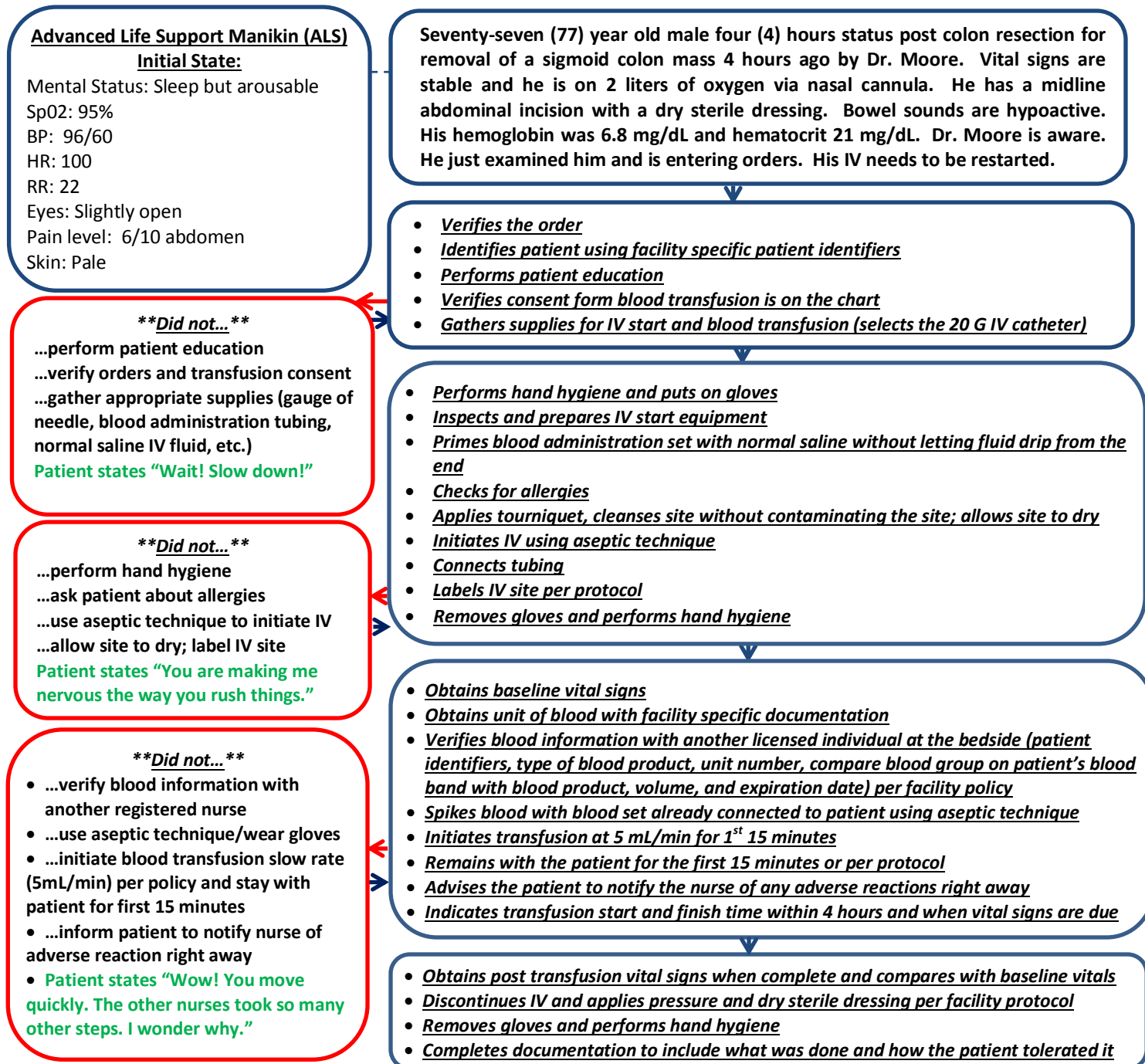
(<http://cdn.laerdal.com/downloads/f4343/simpad-upgrade.vs2>)

Scenarios may be used with Laerdal or LLEAP software

Scenario Supplements:

- Confederate scripts
- Confederate name tags
- Patient identification and blood bank bands for the ALS Mannequin and task trainer (if applicable)
- Nurses notes
- Orders
- Blood label
- Blood transfusion consent
- ZZ test patient/Demo patient in CPRS (if desired)

Flowchart



Critical Actions/Debriefing Points:

- Verify orders
- Perform patient education
- Perform hand hygiene
- Put on gloves
- Prime blood administration tubing with normal saline without fluid dripping from the end
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- Inform the patient to notify the nurse of any adverse reactions
- Document what was done and how patient tolerated it per facility protocol

- Confederate
- Change in physiology
- Red border incorrect action

Supplements

Confederate Scripts

Confederate Name Tags

Patient Identification and Blood Band

Nurses Notes

Orders

Blood Label

Consent

Confederate Scripts

Manuel Garcia: Patient

- **Medical/Surgical History:** Hypertension, hemorrhoids, constipation, and rectal bleeding hemorrhoidectomy
- **Medications:** Lisinopril 2.5 mg one time a day and docusate sodium 100mg one time a day
- **Allergies:** Sulfa

- If the learner(s) do not perform patient education; verify orders per protocol; gather appropriate supplies, **the patient will state “Wait! Slow down!”**
- If the learner(s) do not perform hand hygiene; verify allergies with the patient; utilize aseptic technique; follow facility specific protocol; allow site to dry; label IV site, **the patient will state “You are making me nervous the way you rush things.”**
- If the learner(s) do not verify orders with another nurse; utilize aseptic technique; wear PPE; initiate infusion at ordered rate; inform patient to notify nurse/ring call bell in case of any adverse reaction, **the patient will state “Wow! You move quickly. The other nurses took so many other steps. I wonder why.”**

Patient Identification Band and Blood Band

Patient Identification Bracelet

Garcia, Manuel
Age 77
123-45-6789

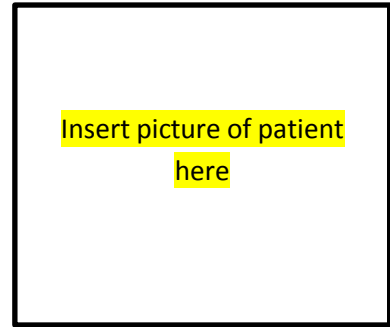
Dr. G. Moore
Allergic: Sulfa

Blood Bank

Garcia, Manuel SS # 123-45-6789 Type: A Positive Unit # 63278

Nurses Notes

Date: Today
Patient Name: Manuel Garcia
Mode of Arrival: Personally owned vehicle
Accompanied by: Self



Chief Complaint: Seventy-seven (77) year old male four (4) hours status post colon resection for removal of a sigmoid colon mass 4 hours ago by Dr. Moore. Vital signs are stable and he is on 2 liters of oxygen via nasal cannula. He has a midline abdominal incision with a dry sterile dressing. Bowel sounds are hypoactive. His hemoglobin was 6.8 mg/dL and hematocrit 21 mg/dL. Dr. Moore is aware. He just examined him and is entering orders. His IV was not working and needs to be restarted.

Active Problems: S/P colon resection for removal of sigmoid colon mass.

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- Docusate sodium 100mg one time a day

Allergies:

- Sulfa

SCREEN FOR ABUSE/NEGLECT: N/A

Does the patient show any evidence of abuse? No
 Does the patient feel safe in his/her current living arrangements? Yes
 Suicidal or Homicidal Ideation in the past two weeks? No
 Is the patient currently enrolled in primary care? Yes

Diagnostic Procedures Ordered:

- () X-Ray
- () Labs
- () None
- () EKG
- () Head CT without contrast
- () Other

Triage Classification: Emergency Severity Index

Patient Disposition: Medical-Surgical Unit

Signed by: /DM/

Blood Label

Blood Label

Garcia, Manuel

SS# 123-45-6789

Type: A Positive

Unit # 63278

Expires: Tomorrow

Volume: 220 mL

Baseline vital signs: BP 97/60; Temp 97.3; HR 100; Resp 22; SpO2: 95%

Verified: Nurse #1 James Harris, RN #2 Mable Scott, RN

Started: 15 minutes ago Complete: _____

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