Medication Interruption
Instructor Information

Patient Name: Right, Donna
Simulation Developer(s): Melissa Brickner and Debra A. Mosley

Scenario Purpose:
• To assist nursing staff with preventing medication errors associated with interruptions

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

Confederate(s):
• Staff nurse

Scenario Prologue:
• 34 y/o female receiving intravenous antibiotic infusion for treatment of osteomyelitis of the right tibia positive for staphylococcus aureus. Several interruptions take place while the nurse is attempting to administer medications.
• The simulation begins when the learners are receiving report from the nurse

Patient information:
• General: Alert, oriented and calm
• Weight/Height: 75kg (165lbs) / 172.7cm (68in)
• Vital Signs: BP 140/80; Temp 97.3; HR 86; RR 20; O2 Sat 98%
• Pain: 2/10 in right lower extremity
• Neurological: Unremarkable
• Respiratory: Eupneic
• Cardiac: Unremarkable
• Gastrointestinal: Unremarkable
• Genitourinary: Unremarkable
• Musculoskeletal: Osteomyelitis in the right lower extremity
• Skin: Pin point wound on right lower extremity
• Past Medical History: Asthma, osteomyelitis of the right tibia Positive for staphylococcus aureus
• Past Surgical History: Tonsillectomy with adenoidectomy, s/p open reduction of a fracture of the right tibia related to motor vehicle accident

Medications:
• Ipratropium bromide inhaler 2 puffs 3 times a day
• Multivitamin daily

Allergies:
• Sulfa

Green Text Confederate
Red Text Physiology Change
Learning Objectives

Patient Name: Donna Right

Simulation Developer(s): Melissa Brickner and Debra A. Mosley

Scenario Purpose:
- To assist nursing staff with preventing medication errors associated with interruptions

Pre-Session Activities:
- Complete pertinent training on prevention of medication errors associated with interruptions
- Review any pertinent policies and protocols

Potential Systems Explored:
- What standardized protocols currently exist to prevent interruptions during the administration of medications?
- What factors have been identified as potential causes of medication interruptions leading to medication errors?
- What factors are important to consider

Scenario Specific Learning Objectives (Knowledge, Skills, and Attitudes = K/S/A):
**The learner will apply ICARE principles throughout the scenario**
1. Learning Objective 1: Recognize factors that could potentially lead to medication errors
   a. S- Follow facility specific protocol for medication administration
   b. S- Recognize extraneous conversation as a distraction potentially leading to medication errors
   c. S- Recognize the confederate nurse rushing as a risk leading to medication errors
   d. S- Recognize the music playing as a potential distraction leading to medication errors

Learning Objective 2: Implement measures to prevent errors associated with interruptions during medication administration
   a. S- Implement facility protocol to prevent interruptions and distractions during medication administration

Learning Objective 3: Demonstrate effective communication when implementing measures to prevent medication errors associated with interruptions
   a. S- Notify team members when preparing to administer medication
   b. S- Provide patient/family education when implementing measures to prevent interruptions and distractions during medication administration

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 hand hygiene
3. Recognize distractions (staff nurse/patient conversation, staff nurse being in a rush, and music)
4. Implement measures to minimize distraction
5. Recognize wrong dose of medication
6. Complete rights of medication administration; check for allergies
7. Prepare to administer medication
**Simulation Set-Up**

**Patient Name:** Donna Right  
(ALS Mannequin and IV task trainer)

**Simulation Developer(s):** Melissa Brickner and Debra A. Mosley

**Room Set-up:**
- Set up like an outpatient or inpatient room

**Patient Preparation:**
- The patient is wearing street clothes (outpatient)
- The patient is wearing a hospital gown (inpatient)
- Saline lock is in place
- Place a Band-Aid or 2 x 2 dressing with tape to cover a pin point wound on the right shin

**Have the following equipment/supplies available:**
- Gloves
- Stretcher/recliner
- Saline lock with luer-lock female adapter
- IV primary tubing
- Luer-lock male adapter
- Labeled 100mL pre-mixed piggyback bag with Ceftriaxone 10 G
- Labeled 100mL pre-mixed piggyback bag with Ceftriaxone 2 G
- Working cell phone with music playing
- IV saline flush
- Band-Aid or 2 x 2 dressing and tape
- Bedside table

**Medications:**
- Ceftriaxone 2 G IV
- Ceftriaxone 10 G IV
  - **Calibration will be required if using radiofrequency identification (RFID)**

Note: 5.8 Simpad software update is required to load scenarios  
Scenarios may be used with Laerdal or LLEAP software

**Scenario Supplements:**
- Confederate scripts
- Confederate name tags
- Patient identification bands for the ALS Mannequin and task trainer
- Nurses notes
- Orders
- Ceftriaxone 2 G medication label
- Ceftriaxone 10 G medication label
- ZZ test patient/Demo patient in CPRS (if desired)
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**Initial State:**
- Mental Status: Alert and oriented
- SpO2: 98%
- BP: 140/80
- HR: 86
- RR: 20
- Eyes: Open
- Skin: Pin point wound on right shin covered with small dressing

**Did not:**
- ...recognize staff nurse’s conversation as a distraction and/or implement measures to minimize distraction... The patient will state “Can you save the chatter for later?”
- ...recognize the patient’s conversation as a distraction and/or implement measures to minimize distraction... The patient will continue conversation.
- ...recognize the staff nurse’s attempt to rush as a distraction and implement measures to minimize distraction... The staff nurse will wait with arms crossed attempting to further rush the learner(s).
- ...recognize the music as an additional distraction and implement measures to minimize distraction... The patient will begin to sing to the music.

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**Flowchart**

34 y/o female receiving intravenous antibiotic infusion for the treatment of osteomyelitis of the right tibia positive for staphylococcus aureus.

- The staff nurse enters the room and states “pharmacy just delivered this for your patient,” hands the learner(s) the Cephalexin 10 G piggyback bag and initiates conversation about the weekend
- Implements measures to minimize distraction during medication administration per policy
- Verifies orders
- Gathers supplies for medication administration per protocol
- Recognizes the medication is the wrong dose

- The staff nurse states “That one is for my patient. Here’s yours. Sorry about that” and hands the correct dose to the learner
- Performs hand hygiene
- The patient distracts the learner(s) by initiating a conversation
- Recognizes patient’s conversation as an additional distraction
- Implements measures to minimize distraction

- The staff nurse distracts the learner(s) by asking the learner(s) if they are going to be much longer because they need to leave early and haven’t passed meds yet
- Recognizes confederate nurse’s conversation as an additional distraction
- Implements measures to minimize distraction

- The patient distracts the learner(s) by playing music loudly on her cell phone
- Recognizes music as an additional distraction
- Implements measures to minimize distraction

- Verifies medication information
- Completes rights of medication administration; checks for allergies
- Prepares to administer medication

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**Critical Actions/Debriefing Points:**
- Verify orders
- Perform hand hygiene
- Recognize distractions (staff nurse/patient conversation, staff nurse being in a rush, and music)
- Implement measures to minimize distraction
- Recognize wrong dose of medication
- Complete rights of medication administration; check for allergies
- Prepare to administer medication

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Supplements

Confederate Scripts
Confederate Name Tags
Patient Identification Band
Nurses Notes
Orders
Medication Labels
Confederate Scripts

Donna Right: Patient

Medical/Surgical History: Asthma, osteomyelitis of the right tibia positive for staphylococcus aureus. Tonsillectomy with adenoidectomy, s/p open reduction of a fracture of the right tibia related to motor vehicle accident

Medications: Multivitamin daily and Ipratropium bromide inhaler 2 puffs 3 times a day
Allergies: Sulfa

- The staff nurse enters the room and states “pharmacy just delivered this for your patient,” hands the learner(s) the Cephalexin 10 G piggyback bag and initiates conversation about the weekend
- If the learner(s) did not recognize staff nurse’s conversation as a distraction and/or implement measures to minimize distraction … The patient will state “Can you save the chatter for later?”
- The learner(s) will perform hand hygiene
- The staff nurse states “That one is for my patient. Here’s yours. Sorry about that” and hands the correct dose to the learner
- The patient distracts the learner(s) by initiating a conversation
- If the learner(s) did not recognize the patient’s conversation as a distraction and/or implement measures to minimize distraction… The patient will continue conversation.
- The staff nurse distracts the learner(s) by asking the learner(s) if they are going to be much longer because they need to leave early and haven’t passed meds yet
- If the learner(s) did not recognize the staff nurse’s attempt to rush as a distraction and implement measures to minimize distraction… The staff nurse will wait with arms crossed attempting to further rush the learner(s)
- The patient distracts the learner(s) by playing music loudly on her cell phone
- If the learner did not recognize the music as an additional distraction and implement measures to minimize distraction… The patient will begin to sing to the music

Medication Interruption

Staff Nurse

- The staff nurse enters the room and states “pharmacy just delivered this for your patient,” hands the learner(s) the Cephalexin 10 G piggyback bag and initiates conversation about the weekend
- If the learner(s) did not recognize staff nurse’s conversation as a distraction and/or implement measures to minimize distraction … The patient will state “Can you save the chatter for later?”
- The learner(s) will perform hand hygiene
- The staff nurse states “That one is for my patient. Here’s yours. Sorry about that” and hands the correct dose to the learner
- The patient distracts the learner(s) by initiating a conversation
- If the learner(s) did not recognize the patient’s conversation as a distraction and/or implement measures to minimize distraction… The patient will continue conversation.
- The staff nurse distracts the learner(s) by asking the learner(s) if they are going to be much longer because they need to leave early and haven’t passed meds yet
- If the learner(s) did not recognize the staff nurse’s attempt to rush as a distraction and implement measures to minimize distraction… The staff nurse will wait with arms crossed attempting to further rush the learner(s)
Confederate Name Tags

Staff Nurse

Donna Right: Patient
Nurses Notes

Date: Today
Patient Name: Donna Right
Mode of Arrival: Personally owned vehicle
Accompanied by: Self

Chief Complaint: 34 y/o female requiring intravenous antibiotic infusion for treatment of osteomyelitis of the right tibia positive for staphylococcus aureus
Active Problems: Asthma. Osteomyelitis of the right tibia positive for staphylococcus aureus.

Patient Information:
- **General:** Alert, oriented and calm
- **Weight/Height:** 75kg (165lbs) / 172.7cm (68in)
- **Vital Signs:** BP 140/80; Temp 97.3; HR 86; RR 20; O2 Sat 98%
- **Pain:** 2/10 in right lower extremity
- **Neurological:** Unremarkable
- **Respiratory:** Eupneic
- **Cardiac:** Unremarkable
- **Gastrointestinal:** Unremarkable
- **Genitourinary:** Unremarkable
- **Musculoskeletal:** Osteomyelitis in the right lower extremity
- **Skin:** Pin point wound on right lower extremity
- **Past Medical History:** Asthma, osteomyelitis of the right tibia Positive for staphylococcus aureus
- **Past Surgical History:** Tonsillectomy with adenoidectomy, s/p open reduction of a fracture of the right tibia related to motor vehicle accident

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/

Medications:
- Ipratropium bromide inhaler
  2 puffs 3 times a day
- Multivitamin daily

Allergies:
- Sulfa
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Orders

Patient Information

| Right, Donna |
| Dr. M. Santana |
| Age: 34 |
| Social Security #: 000-00-0000 |
| Allergies: Sulfa |
| Weight: 75kg (165lbs) |
| Height: 172.7cm (68in) |

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Osteomyelitis of the right tibia</th>
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</thead>
<tbody>
<tr>
<td>Condition</td>
<td>Stable</td>
</tr>
<tr>
<td>IV Therapy</td>
<td>Saline Lock</td>
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<tr>
<td>Medications</td>
<td>Ceftriaxone 2G IVPB over 30 minutes</td>
</tr>
</tbody>
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DO NOT WRITE IN THIS SPACE
References


Guidelines for the prevention of intravascular catheter-related infections. *Clinical Infectious Diseases*, 52(9), e162-e193. doi:10.1093/cid/cir257

