Simulation Committee Meeting Minutes

Date: 10/1/18, 5pm-6pm

Attended:

Jennifer Calzada (Sim Center Director) jcalzada@tulane.edu

- Dr. Chris DuCoin (Surgery; Sim Center Medical Director) cducoin@tulane.edu
- Dr. Mary Mulcahey (Orthopaedics)
- Dr. Jonathan Weed (Anesthesiology)
- Dr. Jim Caridi (Radiology)
- Dr. Rebecca Schroll (Surgery)
- Dr. Olugbenga Akingbola (Pediatrics)

Leah Ott (T4 medical student)

Simulation Dashboard overview

- Discussion of dashboard of simulation activity for 2017-18. (Included at end of minutes)
- Highlight what days are most available for scheduling. We can find availability on any desired day and time, but based on popularity, certain days will be easier than others.
 - Tuesday and Wednesdays are busiest days for simulation.
 - Fridays have most availability.
- Simulation session teaching highlighted that 35% of facilitators for simulation sessions are not faculty. Both residents and 4th year medical students are frequently utilized to help extend capacity of a department's faculty.

Skills done in simulation

• Report was passed out (included at the end of minutes) listing the top skills done in simulation, both over all 10 years and for the last year.

Curriculum Plan Reviews

- Jenny and Dr. Chris DuCoin will review established and new curriculums to help faculty ensure we are addressing all the skills gaps they want to teach and make sure that training opportunities are not being missed.
- Dr. DuCoin mentioned that his Surgery Clerkship curriculum has changed multiple times over the last two years and been a two year work in progress with changes and additions as opportunities change.
- We also want to work with departments that are not utilizing simulation to find out why and see if there are any opportunities.
- Dr. Mulcahey mentioned that her department's delay in starting a curriculum has been identifying faculty who can facilitate, as they feel relying on residents will be difficult with time pressures and clinical responsibilities at some many different facilities.
- Intro to Clinical Skills Teaching Elective was brought up as an option for T4 students to be utilized as facilitators. Leah is part of the elective and confirmed they must facilitate a minimum of 4 per year and students are looking for more opportunities.
- Pre-recording procedure videos is also an option to help trainings run more smoothly, even when facilitated by different people.
- Sim Techs and Standardized Patients are also available to help with sessions at the Sim Center.

- Sim Techs are utilized to help run a sessions when high fidelity manikins are used for cases.
- Sim Techs can also be used to help proctor certain procedure trainings (or assessments), as long as the procedure can be broken down to a detailed checklist and is not based on subjective observing by an expert.
- Sim Center has a Paramedic on staff who can also help with many skills.
- SPs can also be utilized at the Sim Center, with prior planning.

Tour Highlight Notes:

- U/S guided procedures can be done on various task trainers designed for u/s. A link to the primary vendor is included in the follow up notes.
- **AbSim is a new simulator** that teaches both abdominal exam palpation and includes various abdominal abnormalities as case based diagnostic sessions. We have two and the simulators can be used for both facilitator lead sessions and individual self-guided practice. More information on AbSim <u>http://absim.businesscatalyst.com</u>
- New to the Sim Center CMAC video laryngoscope with adult and pediatric blades. This can now be utilized with any of our manikins during cases or with airway intubation heads for practice.
- **Improving video demos and skills presentations.** 4K TVs with Apple TVs are being added to many rooms and two will be on rolling stands. Presentations, imaging, pictures, or videos will be able to be shared from any computer, tablet, or even your phone with AirPlay, all right next to the simulator for immediate demo and practice.
- **BioMedical Engineering Lab**. A single room lab was built in the Sim Center in 2016 and we have trained staff and frequent BME student interns ready to help make low cost training models for your curriculums. Silicone based models and 3D printed models (we have a 3D scanner and 3D printer) can be worked on based on requests. Currently we are working on perfecting silicone models for needle biopsy practice.

Follow-up Notes from Meeting:

Intro to Clinical Skills Teaching Elective

There are approximately 50 students in the elective and they are each required to facilitate at least 4 sessions throughout the year. As Leah mentioned, they are all looking for more opportunities. The purpose of these opportunities is for students to facilitate or lead sessions for underclassmen, so participating with residents as confederates would not fit this elective. Although students who are interested in a certain specialty might be interested in resident participant opportunities, but faculty should start with students who were in their clerkship or elective.

Dr. Jessica Debord (jdebord@tulane.edu) is the faculty for this elective. She requests faculty funnel any teaching opportunities through her to get students to help facilitate any teaching, which does not have to just be in the Sim Center, it can happen in any teaching environment. She must approve sessions for credit prior to students signing up.

U/S Guide Procedures

Both ultrasound technique training and u/s guided procedures can be done at the Sim Center across many specialties. There are two main options for u/s training. The U/SMentor is a VR simulator with both technique training and case based training. Faculty can receive individual learner reports with performance metrics. The second option is using one of our two u/s machines along with various task trainers with special inserts.

The Sim Center does budget some funds each year for additional simulators and also money held for potential repairs, which if not used by Spring, can be used for purchases. We prioritize all requests based on potential use by more than one specialty and the presence of a planned training curriculum from the requesting program.

Option 1: U/SMentor Case options:

Details on features - https://simbionix.com/simulators/us-mentor/us-features-and-benefits/

Library of Modules, with "yes" next to ones we currently have. The cost of adding modules ranges from \$5k-\$10k, depending on the module. Modules have approximately 10-12 training tasks or cases in each. <u>https://simbionix.com/simulators/us-mentor/us-library-of-modules/</u>

- Sonography Basic Skills yes
- Bedside Echocardiography yes
- Advanced Echo
- TEE yes
- eFAST and RUSH yes
- Abdominal yes
- Basic GYN
- OB First Trimester
- OB Second Trimester
- Fetal Neurosonography
- Fetal Echo
- Lung u/s
- Neck u/s (new)

Option 2: U/S machine and task trainers:

There are a few others, but Blue Phantom is the primary vendor for task trainers that can be utilized to teach u/s guided procedures. They are highly durable and we have found can withstand hundreds if not thousands of needle sticks and show no signs. We have not heavily used the biopsy model, so I can't say about the durability of any mass substance.

Blue Phantom. The cost of most task trainers range from \$1500-5000. - http://www.bluephantom.com/category/By-Specialty.aspx

Currently we have paracentesis, femoral vascular access, subclavian vascular access, and breast models for needle biopsy.

FUTURE MEETING DATES:

Monday, January 16 @ 5-6pm Monday, April 15 @ 5-6pm

SINCENTER FOR ADVANCED MEDICAL SIMULATION & TEAM TRAINING



LEARNERS 5,427 total

A.Y. 2017-18 Courses + Assessments

300











LEARNER TRENDS

LEARNER HOUR TRENDS





COURSE NEEDS



INSTRUCTORS





BY SPECIALTY



SKILLS AT SIM CENTER

| SKILL | # COURSES | 2017-2018 |
|-------------------------------------|-----------|-----------|
| CPR, adult | 626 | 335 |
| Chest tube insertion | 204 | 105 |
| Lumbar puncture | 198 | 28 |
| CPR, infant | 183 | 188 |
| CVC insertion, subclavian | 166 | 9 |
| Airway, ET intubation | 158 | 47 |
| IV insertion | 130 | 46 |
| Simple interrupted suture | 130 | 53 |
| Laparoscopy skills | 106 | 28 |
| Primary and secondary trauma survey | 171 | 45 |
| Foley placement (M/F) | 95 | 74 |
| Airway assessment and management | 94 | 44 |
| Knot tying | 94 | 28 |
| Airway, cricothyrotomy | 93 | 28 |
| Paracentesis | 82 | 18 |
| Fundoscopic exam | 75 | 22 |
| Anesthesia crisis management | 67 | 17 |
| Code team training | 66 | 14 |
| Pelvic exam, female | 62 | 17 |
| Pediatric critical care scenarios | 59 | 7 |
| Thoracentesis | 57 | 4 |
| Phlebotomy | 56 | 21 |
| Heart sounds auscultation | 52 | 4 |
| NG tube placement | 50 | 11 |
| Neonatal resuscitation, NRP | 49 | 8 |
| Team training | 48 | 11 |
| Delivery, vaginal | 44 | 14 |
| Epidural placement | 40 | 2 |
| Ultrasound FAST exam | 40 | 28 |
| Endovascular cases | 39 | 1 |
| Differential diagnosis for case | 35 | 18 |
| Delivering bad news | 32 | 6 |
| Nerve block | 32 | 1 |
| Ultrasound technique | 32 | |
| Endoscopy, upper | 30 | 0 |
| Delivery, difficult | 27 | 4 |
| Pelvic exam, male | 26 | 12 |
| Intraosseous access | 18 | 6 |
| Breast exam | 16 | 10 |
| TEE | 11 | 9 |
| OORAM | 6 | 6 |