

Scenario 1

Handout: Adult heart care (x29927)

- SCENARIO PATIENT: Betty Miller
- SCENARIO LOCATION: Inpatient room
- SCENARIO SYNOPSIS: Betty is a 57 y.o. female. She was admitted 2 days ago. She came in with sudden onset of chest pain and profuse sweating. Her history includes a previous MI in 2022 where she had a stent placed. She was started on a Nitro drip and Heparin immediately. They also gave her Tylenol and Mylanta as part of the chest pain workup. However, the chest pain persisted, and her troponins continued to increase. They took her to cath lab yesterday and found that her previous stent was patent, however, they did find a thrombus in her Left Descending Artery. She was started on an Integrilin drip following the initial bolus. They plan to take her to cath lab to check on the thrombus later today or early tomorrow. Patient was previously on a beta blocker however this was stopped. She was also taking Synthroid, Lipitor, Aspirin and some vitamins prior to admission. It is the middle of the afternoon.
- LEARNER READINESS CUES: You walk into the room and patient is reading a book, chatting with her husband. She talks about going to cath lab later and how she is thankful they were able to find the clot and treat it. She tells you about her job as a high school teacher and how much she has missed her students.
- SCENARIO OBJECTIVES: Identify appropriate visual tool to use • Identify and respond to the patient's readiness to learn • Identify the appropriate medications for education • Engage patient/support in education through effective teach-back
- PARTICIPANT ROLES: Primary RN • Patient • Support person(dependent on situation)

Simulation Lab Scenario 2

Handout: Adult heart care (x29927)

- SCENARIO PATIENT: Jack Lemmens
- SCENARIO LOCATION: Inpatient room
- SCENARIO SYNOPSIS: Jack is a 72 y.o male who is a retired neurosurgeon. He was admitted 8 days ago with complaints of tachycardia where he was found to be in new onset Atrial Flutter. History includes NSTEMI, coronary artery disease, diabetes on insulin, and heart cath with stent. History also includes significant joint pain following his NSTEMI in June after being placed on a Rosuvastatin; patient has been using Ibuprofen at home to treat pain. Workup for joint pain was completed which did not find anything acute. Patient was given Cardizem on admission, however, started on Amiodarone subsequently for rate control. Despite ongoing amiodarone since admission, patient continues to be in Atrial flutter with acute heart failure. The provider has ordered Lasix and Spirinolactone to manage this acute heart failure. Home meds for this patient include Metoprolol, Amlodipine, Aspirin, Brilinta, and Metformin.
- LEARNER READINESS CUES: You walk into the room. Patient's wife is sitting at the bedside. You notice that the patient is pleasant but a few things that he says seem to be off. Wife mentions that he hasn't been sleeping well and that it has been a long road.
- SCENARIO OBJECTIVES: Identify appropriate visual tool to use • Identify and respond to the patient's readiness to learn • Identify the appropriate medications for education • Engage patient/support in education through effective teach-back
- PARTICIPANT ROLES: Primary RN • Patient • Family member(dependent on situation)

Scenario 3

Handout: Adult general care (x28522)

- SCENARIO PATIENT: Bob Jones
- SCENARIO LOCATION: Inpatient room
- SCENARIO SYNOPSIS: Bob is a 72 y.o. male with known coronary artery disease, hypertension, type 2 diabetes and a current COVID 19 infection(symptom onset 3 days ago). He presented to the emergency department yesterday afternoon after a syncopal episode following a bloody bowel movement with lightheadedness, nausea and abdominal pain. GI and general surgery have been consulted. There is currently no plan for surgery though patient has had another bout of bloody stools and abdominal pain. Hemoglobin has dropped, currently 9.6 from 12. Patient was initially started on Zosyn for the bowel perforation along with insulin for blood sugar management. Just today he was started on Protonix, Rocephin and Flagyl. Previous medications included Metformin, Jardiance, Ozempic, Carvedilol, Imdur and Aspirin. He is continuing his own Paxlovid for the remainder of the 5 day course while here in the hospital for COVID 19.
- LEARNER READINESS CUES: You walk into the room at 11am, patient seems very frustrated. As you begin talking to the patient he explains that he hasn't seen the provider yet today and doesn't understand why he isn't just going for surgery at this point since he had another episode of bloody stools.
- SCENARIO OBJECTIVES: Identify appropriate visual tool to use • Identify and respond to the patient's readiness to learn • Identify the appropriate medications for education • Engage patient/support in education through effective teach-back
- PARTICIPANT ROLES: Primary RN • Patient • Family member(dependent on situation)

Simulation Lab Scenario 4

Handout: Adult general care (x28522)

- SCENARIO PATIENT: Sally Jackson
- SCENARIO LOCATION: Inpatient room
- SCENARIO SYNOPSIS: Sally is an 80 y.o. female with known COPD, hypertension, diabetes, and Parkinson's. She is a current smoker. She came in for difficulty breathing and increased oxygen needs at home. She was admitted 3 days ago. They are hoping to discharge her either later this evening or tomorrow morning. She was placed on Solumedrol IV on admission along with Pulmicort. A nicotine patch was also ordered to control any potential withdrawal symptoms and Trazadone ordered for sleep. Home meds include Duoneb, Lipitor, Coreg, Levodopa and Farxiga, all of which were continued here in the hospital. Plans for discharge are for Sally to continue Pulmicort and transition IV Solumedrol to oral Prednisone.
- LEARNER READINESS CUES: Patient has had many care team members in her room, preparing her for discharge. You walk into the room at 2pm. Pulmonary rehab is in the room doing an assessment for home oxygen needs.
- SCENARIO OBJECTIVES: Identify appropriate visual tool to use • Identify and respond to the patient's readiness to learn • Identify the appropriate medications for education • Engage patient/support in education through effective teach-back
- PARTICIPANT ROLES: Primary RN • Patient • Family member(dependent on situation)

Simulation Lab Scenario 5

Handout: Adult general care (x28522)

- SCENARIO PATIENT: Jackson Huit
- SCENARIO LOCATION: Inpatient room
- SCENARIO SYNOPSIS: Jackson is a 32 y.o. male who presented with abdominal pain. He has known history of hypertension, pulmonary embolism with IVC filter placement, and sarcoidosis. CT scan showed acute perforated appendicitis on admission. Patient is being treated with bowel rest and IV antibiotics, Rocephin and Flagyl. Norco and Robaxin have been used to manage pain throughout the admission. Plan is to pursue surgical treatment 6-8 weeks from admission. Patient has been admitted for 9 days now and has developed an abscess with a plan for intervention. buprofen is the only home medication we have on file though it was difficult to determine home medications. Patient has also received gabapentin to manage nerve pain related to his sarcoidosis during the admission.
- LEARNER READINESS CUES: Patient is a construction worker who has very little medical knowledge. He is from the East side of the state and does not have anyone close for support. It is 3 in the afternoon and you come in to do education. Patient is having increased amounts of pain and sudden onset nausea.
- SCENARIO OBJECTIVES: Identify appropriate visual tool to use • Identify and respond to the patient's readiness to learn • Identify the appropriate medications for education • Engage patient in education through effective teach-back
- PARTICIPANT ROLES: Primary RN • Patient • Support person(dependent on situation)

Simulation Lab Scenario 6

Handout: Adult women's and newborn care (x29863)

- SCENARIO PATIENT: Renisha Sandhoven
- SCENARIO LOCATION: Inpatient room
- SCENARIO SYNOPSIS: Renisha Sandhoven is a 32 y.o. female who is 39 weeks pregnant. She presented with spontaneous rupture of membranes reported 24 hours ago. Patient is 12 hours into her stay and has recently spiked a fever. Patient is on Pitocin to help augment her labor contractions. She received a dose of Fentanyl earlier today for pain. They just recently started her on Ampicillin and Gentamicin after a diagnosis of chorioamnionitis.
- LEARNER READINESS CUES: Patient is requesting something for her pain as her contractions have started to pick up. She is visibly uncomfortable. The anesthesiologist was contacted to place an epidural but has not yet arrived. Spouse is at bedside and is very supportive.
- SCENARIO OBJECTIVES: Identify appropriate visual tool to use • Identify and respond to the patient's readiness to learn • Identify the appropriate medications for education • Engage patient in education through effective teach-back
- PARTICIPANT ROLES: Primary RN • Patient • Support person(dependent on situation)

Simulation Lab Scenario 7

Handout: Adult women's and newborn care (x29863)

- Patient generally has had a very no care attitude, explaining that the daughter manages her medications at home. They don't seem to care to know much about her medications in the hospital, explaining that she trusts us to make sure she is getting everything she should.
- Patient is primarily Spanish speaking. They can speak some broken English, but it is not very clear. Teenage child is at the bedside who does speak English fluently. This is the first time the patient has ever been in the hospital setting.
- You are a female caregiver. Male patient comes from a culture where there is clear hierarchy between men and women. Patient has not been comfortable receiving care from female caregivers and seems to respond better and be more engaged with his care with male team members. Patient is sitting comfortably, doesn't seem to be experiencing any pain or discomfort right now.
- Patient comes from a culture that practices holistic medicine and is very concerned about the medications they are taking here in the hospital that they do not align with her cultural practices, but also want to be sure that they follow the doctor's orders.