

Medical emergency simulation practice report (send to: <input])<="" td="" type="text" value="I/S"/>			
Scenario: (which pre prepared scenario was used if applicable)			
Scenario theme: (in terms of primary clinical presentation, i.e. hypovolemia, hypoxia, cardiac event)			
Staff facilitating scenario:		Date:	Ward:
Alarm set off at time		Time first responder arrived	
Did a Dr initially respond within 3 minutes?		Did a qualified nurse initially respond within 3 minutes?	
Wards/Teams responding			

Management of environment (facilitators observations)
Staff member leading the incident identified. Patient and staff Safety observed. Tasks allocated. Ambulance called and Member of staff designated to meet ambulance Member of staff designated to complete Resuscitation Event Report

Finding the Patient	Achieved	Comments
	Yes / No	
Assess environment, check safety		
Check response verbally/ shake		
Check for a pulse/breathing – <10 seconds –		
pull pinpoint - call emergency services		
Ask for resus' bag		
Question asked, is there a DNACPR in place		

Use of Equipment – emergency / resus' bag		
Time taken to get resus' bag to the scene		
Time taken to get AGP PPE to the scene		
ALL other staff to Don AGP PPE (if indicated)		

Use of AED		
AED accessed		
Turned on first		
Pads attached correctly		
Safe use of AED, stand clear when shocking		
Time first shock delivered		
Minimal delay restarting chest compressions		

START COMPRESSIONS		
First member of staff: start chest compressions until other staff arrive		
Bag valve and mask used (unconscious patient)		

Oxygen during CPR		
Black regulator one full turn		
Connected to Bag Valve and Mask		
Correct litres via numbered dial (15lt/min)		
Safe use during shock (1 meter away)		

Airway management		
Correct IGEL selected		
Lubricated back side only		
Correct insertion		
Self-inflating bag correctly connected		
Checked for effective ventilation / breaths		
Suction potential fluid/vomit/ Mcgills		
Suction device set up correctly		
Airway opened, McGills used correctly		
Suction used correctly		

Oral/ Nasal Pharyngeal airway (OP/NP)		
Measure correctly		
Insert correctly		

Non-rebreathe mask(self-ventilating patient)		
Inflated correctly before application		
Correct O2 flow used (15 litre/mins)		
Secured properly on patient		
Patient reassessed		

Handover to ambulance staff		
Staff identified to handover information (not performing CRP role at the time)		
SBARD handover system used		
Synchronised CPR handover if applicable		
Documentation completed / copied		

Human Factors (facilitators observations)
Communication(SBARD) Leadership -followership Decision making Situation awareness Task Management

Points for discussion during the learning conversation.

Attended	Print Name	Job Role	Comments
1			
2			
3			
4			
5			
6			
7			
8			

