**Simulation- Rapid Sequence Intubation**

Points to hit on essential equipment, monitoring, medication, adequate oxygenation, RT access,

Patient presents with respiratory failure, is getting tired. Dec. LOC. But rouses to loud verbal stimuli, RR 60 HR 144 BP 168/66 T 36.7 SpO2 93% 100%NRB.

Nurse to identify patient demonstrating signs of increasing failure and to notify MD,

Physician has decided that patient needs to be intubated.

Nurse to call RT; assemble medications (will use propofol, rocuronium)

MD to intubate, nurse assisting in checking placement, connecting tube to BVM, completing respiratory assessment, end-tidal discussion, discussion re: maintenance of sedation

**Observer 1 Checklist: RSI**

Learning Objectives:

1. Complete respiratory assessment in patient with respiratory complaint
2. Recognize respiratory failure and initiate appropriate interventions
3. Demonstrate indications for and understanding of rapid sequence intubation, including equipment, medications, staff
4. Demonstrate appropriate nursing care during and post RSI.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Y** | **N** | **Comments** |
| Hand hygiene |  |  |  |
| Completed full set of vital signs  Attached pulse oximetry |  |  |  |
| Respiratory assessment including listening to lung sounds |  |  |  |
| Identified respiratory failure |  |  |  |
| Notified MD immediately re: failure |  |  |  |
| Notified RT re need to intubate |  |  |  |
| Gathered required equipment |  |  |  |
| Drew up requested medications |  |  |  |
| Respiratory assessment post  Intubation & placement check |  |  |  |
| Documentation complete as per LHSC |  |  |  |
| Post intubation vital signs completed |  |  |  |

**Observer 2: Team Communication Checklist**

Objectives:

1. Demonstrates clear communication with team members including closed loop communication
2. Demonstrates understanding and use of team resources

|  |  |  |  |
| --- | --- | --- | --- |
| **Team Members** | **Y** | **N** | **Comments** |
| Communication is concise, clear and specific |  |  |  |
| Seeks information from all resources, including patient/family and RT |  |  |  |
| Verifies that information is correct |  |  |  |
| Notified MD and was able to give report of patient using SBAR tool: |  |  |  |
| Situation |  |  |  |
| Background |  |  |  |
| Assessment |  |  |  |
| Recommendations |  |  |  |
| Additional observations |  |  |  |

**Observer 3: Team dynamics**

1. List examples of effective communication you observed during this scenario (including closed loop communication).
2. Have you observed times in which communication was unclear and you did not observe closed-loop communication? If so, provide examples and explained how the closed loop communication would have improved the scenario.
3. Were appropriate resources utilized well and in a timely fashion?

Give examples.

**Observer 4: Assessment Observations of RN 1**

1. Were key assessment and interventions organized and prioritized appropriately?
2. Describe collaboration efforts of RN 1 with RN 2
3. Describe the interactions with family member/significant other
4. Describe the interactions with RT and physician