



Emergency Department at the University of Calgary  
Adult Teams in Essential Simulation

### **Staff Interdisciplinary Simulation** **Pre- arrival Information letter**

Your session will take place at the **Foothills Emergency Department “Learning Commons” (F pod or “old 70’s area) from 09:00 till 11:30**. You are expected to arrive in the clothes that you would normally wear during your shift in the Emergency department. Please bring the items that you would normally use for work such as stethoscopes and medical information resources. We typically run through 3 scenarios for each session with a debrief after each scenario. Your team will include 2 physicians who will each rotate through the roles of team leader and bedside physician. The 3- 4 nurses attending will all be expected to divide up their duties as either documentation nurse, fluids nurse, medications nurse or other roles as they see fit. One to two respiratory therapists will be present and a pharmacist may also be attending. No Emergency Medicine residents or medical students attend these sessions.

The objectives of our scenarios are to improve teamwork and communication skills, practice procedural skills in real time working conditions and work through complex patient presentations. When you run through each scenario, you will be performing as if you are treating an actual patient with the usual medications, fluids and procedures. The scenarios are specifically run in the Emergency department with our usual therapies so that we truly learn how to best manage our patients in our own environment. This means during the scenarios we will be running mostly at “real time”. When you order fluids as a bolus over 10 minutes, it will take 10 minutes to administer. When you order epinephrine 1mg IV, you actually give epinephrine 1 mg IV (and the mannequin will respond appropriately). Even defibrillation requires you deliver an actual 200J of power. Also available to you are lab work, EKG’s, X-rays, ultrasound and other imaging – just ask for what you would normally order in the ED. Consultants are available to call if you want to talk to ICU, PADIS, the cardiac interventionalist etc. You will function essentially how you would normally work in the Emergency department.

There will be an Emergency physician and nurse educator facilitators to help facilitate these scenarios. The facilitators will do everything possible to make the scenario as real as possible within the resource and technology constraints. We ask the learners to act as if the situation is real. The more real you treat this simulated environment, the more likely the skills learned will transfer to the clinical environment.

After each scenario, we will have a debriefing session to discuss where the team performed well and how the team can improve. We have 3 very important elements for each debriefing. First, everything that happens in simulation stays in simulation. Confidentiality is a vital part of our sessions and we want everyone to feel comfortable that how we perform during simulation sessions is kept within our group and not discussed outside of the sessions. Second, we hold the basic assumption that everyone participating in our simulation session is intelligent, capable, cares about doing their best and wants to improve. Thirdly, these sessions are for educational purpose only. They are not part of your performance evaluations and are not meant to intimidate participants. Our goal is to construct a safe environment where we can all learn from each other and ultimately improve patient care.

If you have any questions or concerns, please email your Emergency physician facilitator or Meaghan Mackenzie ([meaghan.mackenzie2@ucalgary.ca](mailto:meaghan.mackenzie2@ucalgary.ca)) at your convenience.

See you soon,

Your Emergency Medicine Staff Interdisciplinary Simulation Team