

**Stephen F. Austin State
University DeWitt School of
Nursing Simulation Center
Procedure Manual**

Stephen F. Austin State University DeWitt School of Nursing

Simulation Center Procedure Manual

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1. General Information

- a. The mission of the simulation lab is to provide holistic experiential learning experiences in order to enhance critical thinking, clinical skill development, encourage leadership opportunities in the clinical setting, and establish ongoing collaboration with area interdisciplinary health care entities and educational institutions.

b. Goals

- i. Enhance clinical learning and performance for nursing students and rural healthcare professionals.
- ii. Provide guidance and leadership to facilitate ongoing use and development of simulation technologies and simulation research.
- iii. Serve as a clinical site for undergraduate nursing students.
- iv. Improve health outcomes for client safety.
- v. Promote data collection and research for ongoing growth and validation of simulation as an effective teaching strategy.

c. Administrative Information and Contact Information

- i. Rebecca Self, Simulation Coordinator
Office Phone: 7706; Office: Room 133; Please contact for cell phone number as needed
- ii. Erin Bailey, MSN Coordinator and Operations Coordinator
Office Phone: 7733; Office: Room A111; Please contact for cell phone number as needed
- iii. Tammy Harris, Director of the DeWitt School of Nursing
Office Phone: 7719; Office: Room 110A; Please contact for cell phone number as needed

d. Hours of Operation

- i. Simulation lab activities are to be scheduled **Monday- Friday between 0830 and 1630.**
- ii. If your activities fall outside of these hours, please contact the simulation coordinator to make arrangements.

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e. Code of Conduct

- i. Instructors, students, and staff are expected to act professionally and abide by all rules.
- ii. Please treat the Simulation Center as a clinical setting. This will provide for a more realistic clinical experience.
- iii. Students must abide by rules in the student handbook and follow the directions of their instructors and Simulation Center staff.
- iv. Student cell phones should be turned off when entering the Simulation Center unless otherwise directed by the instructor.
- iv. The course instructor and simulation staff have the right to remove any participant from the Simulation Center.
- v. No food or beverages are allowed in the Simulation Lab. The only exception is instructors or staff participating in simulation scenarios may have a snack or beverage in the control room. However, please clean up after yourself and be respectful of the fact students are not allowed to have food or beverages in the lab.
- vi. Pens and ink are NOT allowed in the Simulation Center. Please only use pencils.
- vii. Students may not enter the Simulation Center without an instructor or staff member present unless approved by the Simulation Lab Coordinator.
- viii. Prior to utilization of the Simulation Center all semesters of nursing students, must sign the Simulation Confidentiality Agreement and the Video/ Audio/ Photography Agreement.

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2. General Procedures

a. Reservations

- i. Simulation lab room reservations are to be completed at the end of each semester for the next semester.
- ii. Simulation lab space is issued based on the level of fidelity of the simulation. If there is a time conflict, the Sim Lab coordinator will meet with the coordinators of the courses involved to reach a resolution.
- iii. Simulation Lab Room Set-Up Forms are to be completed for ALL activities one week prior to the simulation.

b. Instructor Training

- i. New faculty members will be orientated to the simulation lab, mannequins, and equipment prior to using the lab for the first time.
- ii. New faculty members will be sent via email an Orientation to the Simulation Lab packet prior to using the lab for the first time.
- iii. Course instructors that will be utilizing equipment must be properly trained on such equipment BEFORE using it. Please contact the Simulation Lab Coordinator to schedule training on equipment

c. Course Instructors

- i. All simulations in which students are performing as RNs and providing care to patients must have a completed simulation template and mapping form (on the Y drive) on file prior to instituting the simulation.
- ii. All simulations in which students are performing as RNs and providing care to patients will be evaluated by the students using the Typhon system.
- iii. Any chart paperwork will be completed by faculty using the Electronic Medical Health Record forms located on the Y drive, or charts maybe created using the Evolve SimChart software.
- iv. All simulations and skills activities must be checked by faculty the day before the simulation or activity for accuracy.
- v. Faculty will provide simulation lab personnel with a student schedule.

d. Simulation Lab Personnel

- iv. Simulation lab personnel will be responsible for setting up charts, rooms, equipment, and supplies for all activities. Simulation lab personnel may ask for assistance from faculty on an as needed basis.
- v. Simulation lab personnel will be responsible for setting up course lab kits.

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- vi. Simulation lab personnel will track student lab hours and community lab hours each semester.
 - vii. All SimMan 3G, SimMan Essential, Sim Mom, Newbie, Hal, and Susie mannequins are not to be removed from the bed.
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- e. Students**
 - i. All students will wear approved uniforms and name identification tags while in the Simulation Lab. If a student is not dressed appropriately, he or she will be asked to leave the Simulation Lab.
 - ii. All students will bring necessary clinical equipment to the Simulation Lab such as stethoscope, penlight, paper, and pencil.
 - iii. **NO PENS** are allowed in the Simulation Lab.
 - iv. Students may not have open food containers or beverages in the Simulation Center.
 - v. Students must wait on their instructor to enter the Simulation Center. The only exception is students practicing skills that are scheduled through the Acuity Scheduling System. These students may enter the Simulation Lab independent of an instructor at their scheduled time.
 - vi. All student cell phones should be turned off when entering the Simulation Center unless otherwise directed by the instructor.
 - vii. All students are to remain quiet and respectful in the Simulation Center. Any student who is noisy, disruptive, or disrespectful will be asked to leave.
 - viii. After simulation or skills practice, clean up the room and leave the room as you found it.
 - ix. Place all trash in the appropriate containers. Sharps containers are only for needles, syringes, lancets, broken glass, and other sharp objects contaminated with blood. Red biohazard boxes are only for items that are saturated with medical waste and saturated non-sharps objects. All other items may be disposed in the trash can.
 - x. The Simulation Lab is considered a clinical site. As such, students should follow all instructions given by course faculty in the event of a late or missed day.
 - xi. Treat all simulations and skills activities as real situations.
 - xii. Supplies needed for each simulation will be provided. Personal clinical supplies such as stethoscopes and penlights are the responsibility of the student.

- f. New Scenario Development**

- i. This procedure is for simulations in which students are placed in a realistic environment and are required to perform the job duties of an RN.
- ii. Faculty will meet with the lab coordinator to discuss new supplies needed as soon as a new simulation is decided upon.

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- iii. Faculty will complete the Simulation Template (on the Y Drive) and return it to the Lab Coordinator prior to performing the simulation.
 - iv. The Simulation Lab Set-Up Form will include all supplies needed, a detailed description of the room, and a detailed description of the manikin.
 - v. Faculty will complete any needed chart paperwork. Simulation lab personnel will be responsible for putting charts together.
 - vi. Simulation lab personnel will make every effort to have simulation rooms ready at least 24 hours before the start of the simulation, so faculty may review the rooms.
 - vii. Simulation lab personnel will keep master copies of all paperwork related to each simulation in the course binder and on the Y drive. If changes are made to a simulation, an updated copy of all paperwork shall be submitted to the simulation lab coordinator to replace the current master copy.
- g. Simulation Pre-brief and Debriefing**
- i. Please ensure that all simulations have a prebrief prior to simulation. Prebriefing may include preparatory work for the simulation.
 - ii. Debriefing should occur immediately following each simulation in a separate location from the actual simulation.
- h. Evaluations**
- i. All students should complete a survey on Typhon following each high fidelity simulation.
 - ii. Student feedback from the evaluations will be used by faculty to identify areas of opportunity and improvement with each simulation experience.
- i. Confidentiality**
- i. All activities and information regarding and surrounding the clinical simulation(s) shall be confidential until such time that all students in the current class have completed the simulation.
 - ii. All students in a simulation scenario are to be treated in a professional manner. No student performance information shall be discussed outside of the Simulation Lab by students.
 - iii. A confidentiality form will be signed by each student at the beginning of the first and third semesters of nursing school. The student understands if the agreement is violated he/ she is subject to disciplinary action.

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3. Lab and Equipment Usage

a. Community Usage

- i. A SFA Facilities Use Agreement must be on file for any outside entity using simulation equipment prior to use of the simulation lab.
- ii. The Facilities Use Agreement is only valid for the dates specified in the contract.
- iii. The Facilities Use Agreement must be approved and signed by SFA General Counsel, Dean of the College of Science and Mathematics, and the Director of the School of Nursing.
- iv. A copy of the Facilities Use Agreement must be sent to the Purchasing Department and the Simulation Lab Coordinator will keep a copy of the original document.
- v. A copy of insurance (liability coverage) from the outside entity must be sent to General Counsel for approval. A copy of the insurance will be sent to Purchasing.
- vi. All participants that are involved with the outside entity must sign a Waiver of Liability form. The original copy will be kept by the Simulation Lab Coordinator.
- vii. Simulation lab personnel must be either on site or on call anytime lab equipment will be used.
- viii. Simulation lab personnel will be compensated for any time spent in the lab outside regular working hours due to community use. Compensation can be money or time.
- ix. Simulation lab personnel will work with community entities to determine equipment and supplies needed for the activity.
- x. If a conflict arises between the School of Nursing and community activities, the School of Nursing will be given priority.

b. Disaster Usage of the Lab

- i. In the event of a disaster, county officials will notify the Director of the School of Nursing if the Simulation Lab is needed.
- ii. The Director of the School of Nursing will notify the Simulation Lab Coordinator of the community's need.
- iii. The Simulation Lab Coordinator will notify all other lab personnel and/ or faculty members as needed in order to convert the Simulation Lab.
- iv. All equipment with a Stephen F. Austin State University ID tag will be kept behind locked doors during the community's use of the Simulation Lab.

c. Off-Site Use of Simulation Lab Equipment

- i. Faculty may check out simulation lab equipment for off-site use.

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- ii. Faculty and simulation lab personnel must complete a Removal of Property from Campus Request form prior to removing any equipment.
- iii. The original document will be kept in Simulation Lab Coordinators office, and a scanned copy will be emailed to the purchasing department.
- iv. Simulation lab personnel will complete the Removal of Property from Campus Request form when the item is returned.
- v. The completed form will be emailed to the purchasing department.
- vi. All off-site simulation equipment must be returned at least once a year for annual inventory.

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4. Supplies and Equipment

a. Latex Allergy

- i. Some equipment in the simulation lab does contain Latex.
- ii. Students or faculty with a known Latex allergy should contact the lab coordinator.
- iii. Every effort will be made to replace equipment with latex-free substitutions.
- iv. All users that suffer with latex allergies should take proper precautions when using the simulation lab.

b. Mannequin Lubrication

- i. Do not introduce any fluids (except approved airway lubricant in small amounts to lubricate the airway) into the esophagus or trachea of the mannequin.
- ii. Prior to using various airways, spray the inside of the pharynx, nostrils, and all air management devices to be inserted with a liberal amount of approved lubricant.
- iii. Do not use KY or other water soluble lubricant. This dries and forms an obstruction in the mannequins.
- iv. Use a small amount of clear liquid dish soap for urinary catheter insertion, vaginal exam, and NGT insertion.
- v. Use water as the cleaning agent for any procedure. Do not use iodine/ betadine agents as these permanently stain the mannequins.
- vi. Do NOT use povidone iodine, activated chloraprep, or ink (label dressings with pencil prior to placing on the mannequin) on the mannequin.

c. Defibrillation

- i. De fibrillation should be performed on the defibrillation connectors only. If performed over one or more of the ECG connectors, high voltages may be present on the remaining connectors during the shock.
- ii. To prevent overheating, do not provide more than three defibrillator discharges (maximum 360J) in a sequence. Do not exceed an average of two discharges per minute during the session.
- iii. The mannequin must not be in contact with electrically conducting surfaces or objects during defibrillation. A flame supporting atmosphere, such as high oxygen content, should be avoided during defibrillation.
- iv. To prevent chest skin electrode pitting, do not apply conductive gel or conductive defibrillation pads intended for patient use.

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d. Endotracheal (ET) Intubation

- i. ET tube size should be 7 to 7.5.
- ii. Spray the inside of the pharynx, nostrils, and all management devices to be inserted with a liberal amount of approved lubricant.
- iii. A malleable stylette should be used. Do not extend the stylette beyond the end of the ET tube.

e. Laryngeal Mask Airway (LMA)

- i. LMA size 4.0 should be used.
- ii. Spray the inside of the pharynx, nostrils, and all management devices to be inserted with a liberal amount of approved lubricant.
- iii. Please discuss the procedure with the Simulation Lab staff if you plan to use an LMA on the manikin.

f. IV Access and Drug Administration

- i. Use 20 or 22 gauge IV needles. This will prolong the use of the IV arm.
- ii. Do not use iodine to prep the site. This will cause permanent staining.
- iii. Never write on a label after it is applied. If a label is needed, write on it with a pencil prior to application. Pre-printed ink on labels should be removed prior to application.
- iv. If using IV fluids or medication in the IV arm, the arm should be completely drained at the end of the session.

g. IM/ Subcutaneous Injections

- i. Use 22 gauge or smaller needle to prolong the life of the injection pad and skin.
- ii. Use the insert pads or injection pads. These are foam-filled and can be injected with fluid.
- iii. The pad should be removed, squeezed out, and allowed to air dry immediately following the session.

h. Needle Decompression

- i. Use a 22 gauge needle to prolong the life of the chest skin and bladders.

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i. Urinary Catheterization

- i. Use a 14 French catheter or smaller to preserve the integrity of the manikin.
- ii. Do Not use povidone iodine or activated chloraprep to clean the site