vSim for Nursing

MARCH 2017
Aims

- Demonstrate the student experience in a blended learning environment
- Identify where this could be used as part of the nursing program
- Participate in the blended learning process
- Visualise some of the reports, analysis that is possible as part of the system.
The Blended learning experience...
vSim Fundamental Cases
63 year old male Total Knee Arthroplasty however is known MRSA positive with contact precautions. You will need to apply appropriate protective clothing and complete a patient assessment.
Josephine Morrow

80 year old female with venous stasis ulcer admitted to an aged care assessment unit. She will need complete a basic nursing assessment and an dressing change.
Edith Jacobson....

85 year old female #NOF for surgery tomorrow. Requires pain relief, falls prevention and focused assessment and regular repositioning.
Kim Johnson

26 year old female paraplegic from T8 spinal cord injury new admission to Rehab. Requires assessment and IDC intermittent insertion and bladder management education
Marvin Hayes:

43 year old male yesterday had an abdoperineal resection and formation of permanent sigmoid colostomy. You need to assess the colostomy and empty the pouch and nursing assessment.
Rashid Ahmed

50 year old male admitted with dehydration and hypokalaemia secondary to food poisoning. IV orders and antibiotics need to be commenced.
Sara Lin

18 year old female 2 days post-op emergency appendicectomy. She need to be changed to oral antibiotics and pain management. She will also post-op patient education.
Vernon Russell

55 year old male admitted yesterday with stroke the resulted in mild left sided hemipleagia. You need to complete patient assessment, neuro assessment and medication administration.
Christopher Parrish

18 year old medical-surgical admission with Chronic disease for management of NG Tube feeds and nutritional assessment.
Mona Hernandez
Mona Hernandez is a 72-year-old female who has been admitted to an acute care unit with a diagnosis of pneumonia. The scenario begins as the patient reports shortness of breath after ambulation.

The students will be expected to recognise a change in the patient’s oxygenation status, perform a focused respiratory assessment, apply oxygen in response to findings, and encourage the patient to perform coughing and deep breathing exercises. Students should provide patient education on oxygen delivery, activity, incentive spirometry, and coughing and deep breathing exercises.
Mona Hernandez

Diagnosis: Pneumonia

Location: Medical Unit 4:00 PM
Report from day shift nurse:

Situation: Mona Hernandez is a 72-year-old Filipino female who was admitted to the medical unit yesterday afternoon with a diagnosis of pneumonia in her right lobe. Chest x-ray shows infiltrates in right lower lobe, indicative of pneumonia. She was started on antibiotics after a sputum specimen for Gram stain culture was obtained. We are monitoring her respiratory status closely.

Background: Mrs. Hernandez is a woman with hypertension, who was experiencing symptoms of dry cough, fever and malaise, and was diagnosed with influenza 14 days prior to admission. Her respiratory symptoms got progressively worse, and yesterday she had a temperature of 38.4°C, shakiness.

WARNING
This simulation contains realistic portrayals of patients in clinical settings. Patients may be fully exposed for the purpose of assessment and provision of medical care. Some settings include graphic representations of nursing interventions.

These images may not be appropriate for minors and non-healthcare providers.

HELPFUL TIPS

If you have to click the larger “Patient Handover” button at the bottom of the screen.
# Observation Chart

**Mona Hernandez**

<table>
<thead>
<tr>
<th>Admission</th>
<th>Pneumonia</th>
</tr>
</thead>
<tbody>
<tr>
<td>23/6/2016</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Height</th>
<th>Immunisations</th>
<th>Up to date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>168 cm</td>
<td></td>
<td>No known</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/5/1944 (72y)</td>
<td>78 kg</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Allergies</th>
</tr>
</thead>
<tbody>
<tr>
<td>No known</td>
</tr>
</tbody>
</table>

## Patient information

### General observation chart

**Resp Rate**
- > 35
- 31 – 35
- 21 – 30
- 9 – 20
- < 9

**MET RR**
- < 6 or
- > 36

**RR Score**
- 0
- 1
- 0

**Oxygen mode (l/min)**
- 3
- 2
- 2

**SpO2**
- > 92
- 90 – 92
- 85 – 80
- < 85

**SpO2 Score**
- > 95.5
- 90.6 – 95.5
- 86 – 90.5
- 85 – 86
### Medication Administration Record

#### Regular Medicine
- **Hydrocortisone**: 25mg orally once daily (QD)
- **Ceftriaxone**: 1000mg secondary infusion twice daily (08-20)
- **Heparin 5000iu**: subcutaneous twice daily (08-20)
- **Paracetamol**: 1000mg orally 4 times daily (06-12-18-24)

#### PRN Medicine
- **Guanethidine pil**: 100mg orally every 4 hours pm cough
Medical Officer’s Orders

Mona Hernandez
Admission: 23/6/2016
Gender: Female
Height: 168 cm
Weight: 78 kg
Immunisations: Up to date
Allergies: No known

23 JUN 16:30
Admit to medical unit
Vital signs every 4 hours
Activity: Up to toilet, encourage ambulation as tolerated.
Diet regular as tolerated and encourage fluid intake
Labs:
  - Full blood count
  - Arterial blood gas, urea and electrolytes on admission
Sputum specimen for Gram stain and culture
Incentive spirometry and cough and deep breathing exercises x10 every hour while awake
Titrate oxygen to maintain SpO2 >95%
Flush IV cannula every 8 hours

Medications:
- Hydrochlorothiazide 25mg orally once daily
- Ceftriaxone 1000mg secondary infusion twice daily
- Heparin 5000units subcutaneous twice daily
- Paracetamol 1000mg orally 4 times daily
- Guaifenesin elixir 100mg orally every 4 hours pm cough
Notify medical officer if:
  - HR less than 60 beats/min, greater than 120 beats/min
  - RR less than 10 breaths/min, greater than 30 breaths/min
Medical – Surgical Cases
Kenneth Bronson

- 27 year old male admitted to the Medical Unit with chest infection. The students will administer 2 grams IV Ceftriaxone, patient reacts to the antibiotics.
Jennifer Hoffman

- Jennifer has asthma and requires respiratory assessment and Salbutamol administration.
Vincent Brody

• 67 year old diagnosed with COPD, he will de-saturate over time and will require a chest drain to be inserted due to spontaneous pneumothorax.
Carl Shapiro

• 54 year old develops chest tightness and 5 minutes into the case has a cardiac arrest.
Skyler Hansen

• 18 year old presents to the Emergency Department with Hypoglycaemia.
Marilyn Hughes

• 45 year old female with Mid-shaft tib/fib fracture and develops compartment syndrome.
Stan Checketts

• 52 year old admitted to Emergency Department with abdominal pain and nausea.
• For NGT insertion and pain relief
Doris Bowman

• Doris Bowman is in PACU after TAH and SPO. She is complaining of pain and is given Morphine she will then develop narcosis which requires administration of naloxone.
Vernon Watkins

- Post-operative hemicolecotomy
- Develops a PE will need to start Heparin infusion.
Lloyd Bennett

• Patient is ordered a unit of Packed Red Blood Cells. After the commencement of the blood transfusion the patient develops a blood transfusion reaction.