BELMONT SIMULATION MANNEQUIN SET UP

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| Simulation Case | Mannequin Set up | What is wrong in the simulation | Corrective action needed  (debrief talking points) | What is right in the simulation  (debrief talking points) |
| Simulation Case 1   * Hospital day 4; * Nursing home patient admitted for infection related to an open stage III sacral decubitus; * Past history 30 year old paraplegic as a result of a motor vehicle accident 10 years ago | * Foley inserted into male patient (Medium to lo fidelity mannequin) with dependent loop, Securing device present, , tamper resistant seal intact, Drainage bag is below level of bladder and off floor, bag is off floor, no label and no date of insertion. | * Dependent loop * No label with time and date of insertion on the drainage bag | * Eliminate dependent loop * Determine date and time of insertion and lab; el drainage bag. Ask – *What if you are unable to determine?* | * Indwelling catheter is medically indicated as necessary * Securement device in place * Tamper evident seal intact * Drainage bag is below the level of the bladder * Drainage bag is off the floor * Drainage bag is less than ¾ full |
| Simulation Case 2   * Post-op day 3 following right hip arthroplasty; * Recovery uneventful & vs 88-20-110/70, 98.6°F, 98% O2 sat * Urine clear straw color; * Patient ambulating with assistive device (walker); * PCA pump pain med DC’d and on oral pain medication. | * Foley inserted in medium to low fidelity mannequin patient with VS and abduct ion pillow and dressing in place. Urine is straw color and bag is less than ¾ full no securing device on patient, tamper seal intact, bag is below bladder and bag labeled. . * MAR has oral meds | * Indwelling catheter is **NOT** medically indicated as necessary * Bag on the floor * Not secured | * Use nurse driven protocols (catheter should be removed) * Secure bag so that it is not on the floor * Place a catheter securement device on the patient | * No dependent loop * Tamper evident seal intact * Drainage bag is below the level of the bladder * Drainage bag is less than ¾ full * Label with date and time of insertion on the bag |
| Simulation Case 3   * 56 year old oncology patient with bladder outlet obstruction secondary to bladder cancer. * Ambulating without difficulty; vital signs normal; performs self-care * Exhibiting signs of depression (voicing hopelessness, crying, profound sadness) | * Medium to lo fidelity mannequin. Foley inserted and bag is > ¾ of the way full with straw colored urine. Tamper seal missing and bag is on the bed above the bladder. There is a securement device in place on the leg. No dependent loop but the bag is labeled with date of insertion and time. | * Tamper evident seal is broken or missing * Drainage bag is above the level of the bladder * Drainage bag is over ¾ full | * Replace catheter drainage system * Place drainage bag so that it is below the level of the bladder * Empty drainage bag | * Indwelling catheter is medically indicated as necessary * Securement device in place * No dependent loop * Drainage bag is off the floor * Label with date and time of insertion on the bag |
| Simulated Case 4: Insertion of Foley Catheter:  85 year old female (or male) Patient admitted with an acute fracture of right hip after a fall; Foley inserted in holding prior to OR. | Bladders placed in medium fidelity mannequin with urine for flashback.   * Have two Foleys. * Wash cloth and soap. * Gloves clean and xtra sterile. | * N/a * Sterile technique used following checklist * Video tape performance * See Debriefing questions and student checklist | * See debriefing tool | * N/a |