

PILOT PEDIATRIC PAIN

Estimated Time: 15 minutes • Debriefing Time: 30 minutes



Scan to Begin



Patient Name: Preston C. Adams

SCENARIO OVERVIEW

This scenario is one of the initial pilot ARISE scenarios on Pediatric Pain. The original documentation is contained in Appendix A.

The scenario involved a 7-year-old male patient with abdominal pain following a motor vehicle accident.

LEARNING OBJECTIVES

1. Complete a pediatric pain assessment using PQRSTU or OLDCART format
2. Accurately document the pain assessment in narrative format
3. Utilize therapeutic communication

CURRICULUM MAPPING

WTCS NURSING PROGRAM OUTCOMES

- Implement one's role as a nurse in ways that reflect integrity, responsibility, ethical practices, and an evolving professional identity as a nurse committed to evidence-based practice, caring, advocacy and quality care
- Demonstrate appropriate written, verbal, and nonverbal communication in a variety of clinical contexts
- Integrate social, mathematical, and physical sciences, pharmacology, and pathophysiology in clinical decision making
- Provide patient centered care by utilizing the nursing process across diverse populations and health care settings
- Minimize risk of harm to patients, members of the healthcare team and self through safe individual performance and participation in system effectiveness
- Use information and technology to communicate, manage data, mitigate error, and support decision-making

SIMULATION LEARNING ENVIRONMENT & SET-UP

ENVIRONMENT

Inside room: Patient lying in bed, mother on patient's right

Inside or outside room: Hand sanitizer or sink

Outside room: Charting documents

PATIENT PROFILE

Name: Preston C. Adams

DOB: 06/17/20xx

Age: 7 years

MR#: 0105

Gender: Male

Height: 121 cm (48 inches)

Weight: 25 kg (55 pounds)

Code Status: Full code

Primary Language spoken: English

Current Medications: None

Allergies: Amoxicillin (hives)

EQUIPMENT/SUPPLIES/SETTINGS

Patient

- Age/gender appropriate clothing
- No moulage
- ID band present with QR code
- Allergy band present






Monitor Settings

- No monitor displays

Supplies

- No Medications

QR CODES

<p>REPORT</p> 	<p>PATIENT</p> 	<p>PATIENT ID</p> 	<p>SANITIZER/SINK</p> 
<p>MOM</p> 			

TEACHING PLAN

PREBRIEF

The facilitator should lead this portion of the simulation. The following steps will guide you through Prebrief.

- Explain how the iPad works in the simulated learning environment including:
 - Explain how to use the iPad scanner and QR codes. Remind students that there are multiple QR codes in the simulation, but they should only scan them if they think it will provide data necessary for their assessment and evaluation of the patient.
 - For some scenarios, it may be helpful to tell students where the QR Code are located. For others, you may want students to “find” the QR Codes during their assessments. This is your choice.
 - As the facilitator, you should be aware that throughout the simulation some QR codes are necessary to the programming of the iPad content. Directions for which QR codes are required (to be scanned) in each state are listed under each state of the documentation below. The QR codes are also in **BOLD** type.
- Scan the **QR Code: “Scan to Begin”** while students are in Prebrief
 - A “Start” plaque appears with Patient information displayed (tap continue)
- Discuss the “Learning Objective(s)” displayed on the iPad (tap continue)
- Tap the menu icon in top left corner of screen, then tap “Scanner” to Scan **QR Code:Report** on iPad
 - Please Note: In these pilot scenarios, there is no EMR-like tabbed data on the iPad
 - Possible Facilitator Questions
 - What are your planned focused assessments based on the nurse report?

SCANNER

Use this tab to scan the QR codes

STATE 1

PATIENT ASSESSMENT

- Patient Overview
 - Students should enter the room and assess the patient.
- Expected Student Behaviors
 - Wash hands or use hand sanitizer. **Scan QR code: Santizer/Sink** to indicate this has been accomplished
 - Introduce self to the patient
 - Identify patient by scanning **QR Code: Patient ID** on the patient's armband while simultaneously asking for name and date of birth
 - Scan **QR Code: Patient** to gather patient information
 - Obtain information from mother by scanning **QR Code: Mother**
 - Communicate therapeutically with the mom and the patient
 - Perform hand hygiene upon leaving the room. **Scan QR code: Santizer/Sink** to indicate this has been accomplished
 - Document assessment findings accurately
- Technician Prompts
 - Child is crying and whiny. He cannot answer any questions about rating pain or describing pain.
 - If the student utilizes a FACES scale, he selects the face with the number 8.
- Facilitator Questions
 - How should a child's pain be assessed?
 - What tools are available to assess a child's pain?
 - How will you communicate therapeutically according to the child's age?
 - How will you communicate therapeutically with the mother?
 - What are important elements to include in your documentation?

EXIT

The Exit tab appears with a message: “Are you sure you want to exit? All data will be lost. Yes/No.” Students may exit the scenario when directed by the Facilitator that all Expected Behaviors have been met.

DEBRIEF

Nothing needed from the iPad.

QUESTIONS

1. How do you feel this scenario went?
2. Review learning objective: Complete a pediatric pain assessment using PQRSTU or OLDCART format
 - a. Review how you assessed Preston's pain.
 - b. What tools/methods can be used to assess a child's pain?
 - c. If you could "do over," how would you assess a pediatric patient's pain?
3. Review learning objective: Accurately document the pain assessment in narrative format
 - a. What elements are important to include in your documentation?
4. Review learning objective: Utilize therapeutic communication
 - a. What therapeutic techniques did you use with Preston?
 - b. What therapeutic techniques did you use with his mother?
 - c. If you could "do over," how would you communicate therapeutically with the child and the mother?
5. Tie the scenario back to the nursing process in a large group discussion. Concept mapping can be used to facilitate discussion.
 - a. Identify 3 priority nursing problems you identified.
 - b. Create a patient centered goal for each nursing problem you identified.
 - c. Discuss focused assessments for each nursing problem.
 - d. Discuss nursing interventions for each nursing diagnosis.
 - e. Re-evaluate the simulation in terms of the nursing process; what was actually accomplished? What could be improved in the future?
6. Summarize/Take away Points: "In this scenario you care for a 7-year-old patient being evaluated for abdominal pain following a motor vehicle accident. What is one thing you learned from participating in this scenario that you will take into your nursing practice?" (Ask each student to share something unique from what the other students share.)

NOTE: Debriefing technique is based on INASCL Standards for Debriefing and NLN Theory-Based Debriefing by Dreifuerst.

APPENDIX A: ORIGINAL PILOT DOCUMENTATION



ACT FOR HEALTHCARE

Preston C. Adams

**Pediatric Pain
Level One, Nursing
Low Fidelity**

Estimated Time: 15 min
Debriefing Time: 30 min

AUGMENTED REALITY INTEGRATED SIMULATION FOR EDUCATION

OVERVIEW OF SCENARIO

Developer: Kasey Carlson, RN MSN MA – Simulation Curriculum Specialist

Original Date: 4/6/15

Alpha version: 6/9/15

Beta version:

Piloted:

Pre-Simulation Learning Activities

Review prior to participating in the scenario:

- *Subjective and objective assessment of pain*
- *Age appropriate therapeutic communication*
- *Documentation in a narrative note*

Preston C. Adams is a 7 year old male presenting to the ER with severe abdominal pain worsening over the last 24 hours. Preston's mother states they were in a car accident early yesterday in which she rear ended a car. Preston was seat-belted in the back seat. She states Preston complained of feeling "achy" last night and gave him Tylenol. This morning the pain was worse. He is allergic to Amoxicillin and has no other health issues.

LEARNING OBJECTIVES

Learning Outcomes

1. Integrate principles of a pain assessment with understanding of the pediatric patient
2. Assess the level of pain in a pediatric patient using PQRSTU or OLDCART format
3. Accurately record a pediatric pain assessment in narrative format
4. Appreciate the importance of therapeutic communication in working with pediatric patients and their families

Key Performance Actions

1. Collect data regarding pain from patient and mother
2. Accurately document the pain assessment
3. Demonstrate proper therapeutic communication with patient and family

Preston C. Adams

SCENARIO SET-UP

Scenario Cast

Patient – Low fidelity
(high fidelity optional)

Mother – Can be
confederate/actor or
low fidelity
representation

Nurse (male) – Can be
confederate/actor or
low fidelity
representation

RN – Learner/Student

Environment

Inside room: Patient lying in bed, mother on patient's right
Inside or outside room: Hand sanitizer or sink
Outside room: Charting and End code

Patient Profile

Name: Preston Christopher Adams
DOB: 06/17/XXXX
Age: 7
MR#: 0105
Gender: Male
Ht: 48 inches
Wt: 55 lbs (25 kg)

Code Status: NA
Spiritual Practice: Unknown
Ethnicity: Caucasian
Primary Language spoken: English

Current Medications: None
Allergies: Amoxicillin Reaction: Hives

Equipment/Supplies/Settings

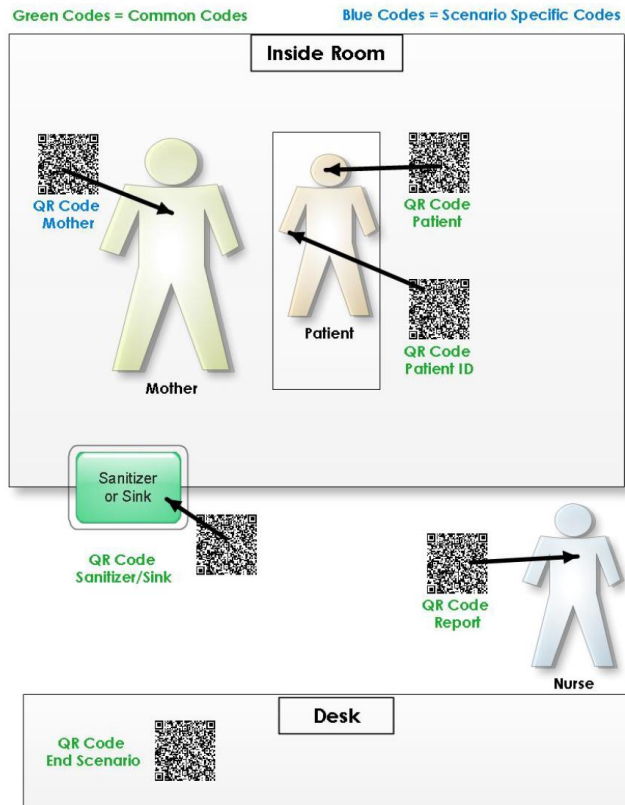
Patient

- Age/gender appropriate clothing
- No moulage
- ID band present with QR code
- Allergy band present with Amoxicillin on it

Monitors

- No monitor display

Location of QR Codes



Preston C. Adams

Scenario Script

Pre - State	Events	Expected Student Behaviors
Title: Report/Entrance of room	ARISE Prompts: Objectives Instructed to get report Nurse instructs to get pain assessment Will not let student progress unless sanitizer or sink is scanned Will not let student progress unless patient is verified.	Scan Nurse for report Write report down Enter room Introduce self Scan sanitizer or sink to indicate the washing of hands Scan patient ID to verify patient

State	Events	Expected Student Behaviors
State 1 Title: Pain Assessment	ARISE Prompts: Will not let student progress unless patient and mother are scanned Will not let student progress unless sanitizer or sink is scanned	Scan patient for objective information Scan mother for subjective information Communicate therapeutically Scan sanitizer or sink to indicate the washing of hands Leave room and accurately chart data on a narrative note. May reference pain tools (See Resources)

May repeat with multiple students.
 Proceed to Debriefing.

Preston C. Adams

Suggested Topics for Debriefing (See Guide in Resources)

- How did you assess child's pain? What was noted?
 - How do you assess pain if patient cannot rate the pain on a numeric scale?
- How did you choose to document the pain?
 - What tools are available to assess pain?
 - If repeated with multiple students, compare documentation or notes
- Describe communication techniques used
 - How did you feel about patient? Mother?
 - What would be the next step in the child's plan of care?

REFERENCES

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