SIMulatED

Royal Darwin Hospital Emergency Department

Author:

# Scenario Run Sheet: A Preterm Precipitous Delivery

## Scenario Overview

**Estimated Scenario Time:**  10mins

**Estimated Guided Reflection Time:** 10-15mins

**Target Group**: ED and Paeds Registrars, ED nurses

**Brief Summary**: A 38 year old female has had a precipitous labour and torrential PPH (to theatre\_. P4, G5. No prior antenatal care. Thinks she was “7 months” pregnant. Known previously to be an IVDU. Preterm baby born in ED, flat, low APGAR score of 4 (activity/tone = flexed, Pulse = 80, Grimace= Flaccid, Appearance = blue extremities, Resp = slow and irreg). Est weight of 2kg. Use of neonatal resus algorithm and resuscitaire.

## Learning Objectives

**General –**

Interdepartmental communication

**Scenario Specific**

– Assessment of newborn with APGAR scores

- Use of resuscitaire

- Neonatal resus algorithm

- Umbilical vein catheters

## Equipment Checklist

**Equipment**

Newborn dummy

Resuscitaire

Paed airway equipment in resuscitaire drawer

Umbilical vein catheter equipment

Normal saline for boluses

Warm towels

**Diagnostics Available**

Capillary blood

CXR

**Monitoring**

I Simulate rather than Hal for obs

## Scenario Preparation/Baseline Parameters

**Initial Parameters**

HR 70

BP 60/40

Sats 75%

**Initial Progress**

Sats slowly rise over 10 minutes to 88%

Heart rate will drop to <60 and require a period of CRP 3:1

Once 1x adrenaline and 1x fluid bolus given HR will rise to above 100 and respirations will improve

Expect intubation to be an end point of the scenario

## Participants

**Staff**

1x Paed Reg

2 x ED Reg

3 x Nurses

Confererate in room

* To give info on colour/tone/exam findings

## Additional Information/Medical History

**Demographics;** Indigenous baby, mother having PPH and taken to theatre so unable to give nay Hx

## Proposed Scenario Progression

If neonatal resus algorithm followed and patient is correctly managed, will improve HR to >100 after 1x fluid bolus, 1x adrenaline and intubation have occurred

## Debriefing/Guided Reflection Overview

**General Opening Questions**

* How was the scenario? (each team member reflects)
* What happened in the scenario – i.e. relay the story to a workmate who wasn’t there

**Scenario Specific Questions**

* What was wrong with the patient?
* What medications/investigations may be required?
* Where does the patient need to go?

**General Wrap-Up Questions**

* What did you find most beneficial about this scenario
* What was the most challenging point in this scenario?
* What would you do differently next time?

## Case Considerations