



**Children's Hospitals and Clinics of Minnesota Pediatric Simulation Scenario Examples**

<p><b>Team Communication Skills</b></p>	<p><b>These skills are used in every scenario as appropriate:</b></p> <ul style="list-style-type: none"> <li>○ Recognize a patient's worsening condition</li> <li>○ Call for help early</li> <li>○ Communicate the situation using the SBAR protocol</li> <li>○ Work as a team when patient condition deteriorates:             <ul style="list-style-type: none"> <li>○ Know and assume roles</li> <li>○ Everyone remains aware of the situation – think out loud</li> <li>○ Give and take emotional and technical support</li> <li>○ Communication with closed loop feedback</li> </ul> </li> <li>○ Manage the distraught parent if present</li> </ul>	
<p><b>Scenario</b></p>	<p><b>Applicable PALS guidelines</b></p>	<p><b>Appropriate Technical Skills</b></p>
<p><b>Cardiac</b></p> <ul style="list-style-type: none"> <li>• Bradycardia</li> <li>• SVT</li> <li>• Myocarditis</li> <li>• CHD - ductal dependant anomaly - cardiogenic shock</li> </ul>	<p>Assessment and treatment of shock PALS Cardiac Algorithms</p> <ul style="list-style-type: none"> <li>○ Bradyarrythmias</li> <li>○ Tachyarrythmias</li> <li>○ Cardiac Arrest</li> </ul>	<p>Synchronized cardioversion Defibrillation IV/IO placment Medication administration CPR</p>
<p><b>Neuro/Trauma</b></p> <ul style="list-style-type: none"> <li>• Head Injury</li> <li>• Non-accidental trauma</li> <li>• Multiple trauma</li> <li>• Near drowning</li> </ul>	<p>Altered mental status Neuro evaluation Impending respiratory failure Hypovolemic/Hemorrhagic shock Hypothermia guidelines</p>	<p>Spine stabilization Airway management O2/Monitor/IVs Primary/Secondary surveys RSI for protective cerebral purposes Intubation Fluid resuscitation Warming measures Medication administration CPR</p>
<p><b>Respiratory</b></p> <ul style="list-style-type: none"> <li>• Bronchiolitis/RSV</li> </ul>	<p>Respiratory Distress – lower airway disease</p> <ul style="list-style-type: none"> <li>○ Assessment of infant in respiratory distress</li> <li>○ Early recognition of infant's deteriorating condition</li> <li>○ Responding to Respiratory Failure</li> </ul>	<p>O2 delivery Suctioning Medications</p> <ul style="list-style-type: none"> <li>○ Nebulization</li> <li>○ Rapid sequence drugs</li> </ul> <p>IV placement Intubation</p>





Scenario	Applicable PALS guidelines	Appropriate Technical Skills
<b>Respiratory</b> <ul style="list-style-type: none"> <li>Asthma</li> </ul>	Respiratory Distress – lower airway disease Mod-Severe NIH asthma guideline interventions Respiratory Failure	O2 delivery Medication administration <ul style="list-style-type: none"> <li>Nebulizer</li> <li>Asthma medications</li> <li>RSI</li> </ul> Endotracheal intubation
<b>Respiratory</b> <ul style="list-style-type: none"> <li>Seizure</li> </ul>	Disordered breathing points <ul style="list-style-type: none"> <li>Decision to BVM</li> <li>Intubation or prolonged BVM trial</li> </ul>	Suction/positioning (airway adjuncts) O2 delivery Monitoring IV Blood glucose Medication administration
<b>Shock</b> <ul style="list-style-type: none"> <li>Dehydration/Hypovolemia</li> </ul>	Early Recognition of Shock Fluid resuscitation algorithm	O2/monitors IV/IO access Fluid resuscitation Blood glucose Medication administration
<b>Shock</b> <ul style="list-style-type: none"> <li>Diabetic Ketoacidosis</li> </ul>	Recognition of DKA and shock Ongoing assessments	Blood glucose Rehydration Insulin therapy Home insulin pump
<b>Shock</b> <ul style="list-style-type: none"> <li>Anaphylaxis/Distributive Shock</li> </ul>	Upper Airway Obstruction Distributive Shock	Airway establishment Monitors Medication administration Difficult intubation Fluid resuscitation Sepsis evaluation

**Note: We can create customized scenarios to fit your needs, these are just examples...**

