

Subject Topic	EdWISE PROGRAM – T8 Multiple Trauma
Framework Profile	Programme: EdWISE T8: Multi-Trauma Patient
Associated E-Learning tutorials	All the previous E-learning topics and modules in EdWISE are relevant and important.
Simulation learning objectives	<ul style="list-style-type: none"> • To rehearse an approach to assessment and management of trauma patients with multiple injuries • To consider prioritising management of different injuries • To demonstrate an approach to the deteriorating patient • •To review and rehearse the 7 non-technical team tasks
Target Group	Middle to Senior medical and nursing staff
Delivery method	Brief Power-point followed by 2 immersive scenarios
Timeframe	60 mins
Resources for session	<ul style="list-style-type: none"> • EdWISE trauma box and extras • Local clinical documentation – resus charts, observation charts etc • Blood pre-made

This project was possible due to funding made available by Health Workforce Australia

Session Structure - EdWISE PROGRAM –T3: Trauma Skills		
Timing	Welcome and Introduction	Resource
2.5 mins	<p><i>Welcome and Introduction</i></p> <ul style="list-style-type: none"> • Provide Housekeeping – Fire Exits, mobile phones on vibrate • Provide a summary of what the workshop will involve and the expectations from the participants • Introduce yourselves - facilitation team, host team and participants. Include experience of trauma patients • EdWISE staff to write down the names of the participants and where they are sitting so that names can be more easily used to engage the participants. 	<p>Video conferencing unit</p> <p>Enough seats for the participants and arranged in a horseshoe facing the VC unit and camera.</p> <p>Led by the team over VC but with host team supplying information on the fire exits/toilets/etc.</p>
Timing	Presentation and Videos	
10 mins	Presentation on the Non-Technical tasks of team response to trauma.	
Timing	Familiarisation to Mannequin & equipment	
2.5 mins	Introduce students to mannequin & capabilities: for this workshop it is important to point out the ability of the manikins and the role of the faculty nurse.	Local faculty to familiarise the students to the environment/ mannequin/actors. Can use the

Timing	Simulation	
10 mins	<p>Participant Briefing: BAT CALL 35yr male passenger in high speed MVA GCS 14 HR 128 BP 136/78 RR 28 sats 99% ETA 1 minute</p>	<p>Scenario Outline: Bruce Wayne, a 35 year old man, is an intoxicated, unrestrained passenger in high speed rollover into a tree. He had a prolonged extrication of 30 minutes. There were 3 other passengers. The driver died on scene. Bruce complains of abdominal and back pain, he has a bruise on his forehead and smells of alcohol. Initially tachycardic, collared with Hartman's running and unco-operative. His primary survey reveals a very tender throaco-lumbar spine with bruising at T12-L2. He becomes haemodynamcially unstable during the scenario, with a negative FAST scan. The cause of his haemodynamic instability is unclear (? Retro peritoneal hematoma) and a management plan to seek the source must be devised.</p>
Timing	Debrief	
10 mins	<p>Key clinical issues (Select 2 clinical topics to debrief *=suggested) Structured approach to the trauma patient Spinal precautions and approach to spinal trauma Host site specific transfer of patient issues Causes of hypotension in a trauma patient</p>	<p>Key non technical issues: 7 - Non technical team tasks Chose 2 max assemble the correct team plan and prepare manage resources communication monitor and evaluate support each other</p>

Timing	Simulation	
10 mins	<p>Participant Briefing</p> <p>BAT call 72yr male fall from a ladder GCS 15 HR 100 BP 120/78 RR 24 sats 95% ETA 2 minutes</p> <p>Scenario Outline</p>	<p>Mohammed Ali, 72 year old man. Fall from ladder, 3 m high, whilst cleaning the gutters. PMHx - IHD, HT, DM, High-cholesterol. Last used his GTN spray this morning. His fall was unwitnessed, with ?LOC. He has a bruise on the left side of his head, his right upper arm is bruised and swollen, and he complains of all over body pain especially the right side. He has a right sided pneumothorax, which will tension during the scenario and a lateral compression fracture of the pelvis, his proximal humerus is also fractured In the meantime they will resuscitate Mohammed with warmed fluids and blood products. The pelvic XR will reveal a lateral compression fracture and likely source of bleeding. Ortho consultation and transfer to OT or angiography for definitive management</p>
Timing	Debrief	
10 mins	<p>Key clinical issues (Select 2 clinical topics to debrief *=-suggested)</p> <p>Structured approach to the trauma patient Approach to the deteriorating patient ICC insertion and when appropriate to perform it Host site specific management of pelvic fracture stabilization and management</p>	<p>Key non technical issues</p> <p>Planning, preparation and trauma team role allocation Teamwork and communication. 7 non technical team tasks</p>
Timing	Summarise	
5 mins	<ul style="list-style-type: none"> •Structured approach to multiple trauma patients to avoid missing injuries •Co-ordinated team approach to enable improved patient care outcome •Prioritising management of different injuries •7 non-technical team tasks 	

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