

Covenant School of Nursing Instructional Module (IM6)
SIMULATION LEARNING GUIDE
Topic/Concept: OB Simulation

Needs Analysis Documentation
<ul style="list-style-type: none"> Students have limited OB clinical experience and may not have the opportunity to assist in the care of a high-risk OB patient.
Learning Goals/Outcomes
<p>Upon completion of this simulation learning activity, you will be able to:</p> <ul style="list-style-type: none"> Identify, prioritize and implement appropriate nursing interventions based on a focused OB assessment for the high-risk OB patient such as the prolapsed cord, postpartum hemorrhage, PIH with magnesium toxicity, etc. Incorporate family-centered care throughout your assessments, interventions and education as you provide care to the mother, newborn and family based on the maternal, newborn, and family identified needs. Demonstrate use of SBAR communication when collaborating with other members of the health care team to promote optimal care the childbearing family.
Scenario(s) Used
<ul style="list-style-type: none"> Gestational Diabetic OB patient Hypoglycemic Newborn Group B Strep OB patient Septic Newborn Pregnancy Induced Hypertensive (PIH), Magnesium Toxic Postpartum patient Breech Scheduled Cesarean Section patient No Prenatal Care 28-week gestation patient in active labor
Schedule of Activities
<p>OB Sim Day One</p> <ul style="list-style-type: none"> OB Room, Manikins orientation Leopold's activity and 1st Delivery OB Assessment activity FHM Strip Review OB Scenarios <p>OB Sim Day Two</p> <ul style="list-style-type: none"> Group B Strep OB Patient Septic Newborn Pregnancy Induced Hypertensive (PIH), Magnesium Toxic Postpartum patient Breech Schedules C-Section patient No Prenatal Care 28-week gestation active labor patient
Pre-Simulation Learning Activity Preparation (Pre-Briefing)
<p>On-Line/ Out of Class</p> <ul style="list-style-type: none"> Review the following section in your Foundations of Maternal-Newborn and Women's Health Nursing textbook <ul style="list-style-type: none"> Induction of labor, cervical ripening, and labor augmentation pgs. 404-410 Diabetes and pregnancy pgs. 232-242 Pregnancy induced hypertension pgs. 215-228 Complete Case Studies question prior to OB simulation and be prepared to discuss. <ul style="list-style-type: none"> Induction or Labor Diabetes in Pregnancy Pregnancy Induced Hypertension (PIH) Complete the Maternal and Newborn Medication work sheets for the common medications you might encounter in your scenario <p>Simulation Center Activities</p> <ul style="list-style-type: none"> OB Skills Lab <p>Lecture(s)</p> <ul style="list-style-type: none"> Antepartum Fetal Heart Monitor

- Intrapartum
- Postpartum
- High Risk OB

Simulation Learning Activities

Simulation Activities:

- Orientation to room, manikins and first delivery
- FHM strip review
- Case study discussion (including information needed for the care of the high-risk OB patient's which have not yet been covered in lectures due to the student's clinical rotation assignment)
- Scenarios
 - o Role assignment for each student – TPCN, CN, Family member, Physician, Debriefers, additional RN, or family member
 - o Pre-Brief SBAR off going report
 - o Group discussion to establish plan of care for the patient
 - o Critical Thinking Worksheet for TPCN to use in planning of patient care
 - o Debriefers Evaluation tool

Online/Out-of-Class:

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Evaluation Methods (Debriefing)

- Plus &, Delta discussion base on students assigned scenario role
- Post SLA Survey in Red Cap

Other Appropriate Documentation

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Time Allotted	OB Sim Day One
0.50 hours	OB Room and Manikins orientation
0.50 hours	Leopold's Activity and 1 st Delivery
0.50 hours	OB Assessment Activity
0.75 hours	FHM Strip Review
0.75 hours	Case Study Discussion
2.00 hours	Gestational Diabetic OB patient – (High-fidelity scenario calculated 2:1) (Pre-brief 15 minutes, 30 minutes scenario, 15 minutes Post-brief)
2.00 hours	Hypoglycemic Newborn (High-fidelity scenario calculated 2:1) (Pre-brief 15 minutes, 30 minutes scenario, 15 minutes Post-brief)
7.00 hours	
Time Allotted	OB Sim Day Two
2.00 hours	Group B Strep OB Patient – (High-fidelity scenario calculated 2:1) (Pre-brief 15 minutes, 30 minutes scenario, 15 minutes Post-brief)
1.50 hours	Septic Newborn (High-fidelity scenario calculated 2:1) (Pre-brief 10 minutes, 20 minutes scenario, 15 minutes Post-brief)
2.00 hours	PIH Magnesium Toxic Postpartum patient– (High-fidelity scenario calculated 2:1) (Pre-brief 15 minutes, 30 minutes scenario, 15 minutes Post-brief)
1.50 hours	Breech Scheduled C-Section (High-fidelity scenario calculated 2:1) (Pre-brief 10 minutes, 20 minutes scenario, 15 minutes Post-brief)
2.00 hours	No Prenatal Care 28-week OB patient-(High-fidelity scenario calculated 2:1) (Pre-brief 15 minutes, 30 minutes scenario, 15 minutes Post-brief)
8.00 hours	

Texas DECs	QSEN Competencies
<p>Knowledge IA: 1 c, 2, 3, 4; IB: 1a-e, 2 a & b, 3, 7 a-c, 8; IC: 2, 3; ID: 3 IIA:1 a & b, 2 a-c, 3, 4; IIB: 1, 2, 3, 4, 5, 6, 7, 9, 10, 11, 12; IIC:1 a & b, 2 a & b, 3, 4 a & b, 5, 7, 8; IID: 1a-d, 2, 3a & b, 5a & b; IIE: 1a & b, 2, 3a & b, 4a & b, 5, 6a, 8, 9, 11a-c, 12, 13; IIF: 1, 2; IIG: 1 a & b, 2 a & b, 3 a & b; IIH: 3 c, 5, 6; IIIA: 2, 3, 4; IIIB: 1 a-c, 2, 4; IIID: 1a-c; IVA: 4a & b, 5a; IVB: 1a & b, 2a & b, 3 a & b, 4; IVC: 1, 2, 3, 4 a & b, 5, 6, 7, 8;</p> <p>Clinical Judgement and Behaviors IA:1, 2, 3 a & b; IB: 1, 2 a-c, 3a -c, 5 a & c, 6 a-c, 7, 8, 9; IC: 2, 4, 5, 6 a ID 1, 2 a-d, 3 b; IIA:1, 2a-c, 3, 4; IIB: 1, 2, 3 a & b, 4, 5, 6, 7, 8, 9 a & b; IIC: 1, 2, 3 a & b, 4, 5, 6, 7; IID: 1, 2 b & c; IIE:1, 2 a-c, 3 a & b, 4, 5 a & b, 6 a-d, 7 a-c, 8, 9,10, 11,12 a & b,13; IIF: 1a-c, 2 a & b, 3 a & b, 4, 5 a-c, 6; IIG: 1, 2 a & b, 3, 4, 5 a & b, 6, 7; IIH: 3, 6 IIIA: 2, 3, 4, 5a; IIIB: 1, 2, 3 a-c, 4, 5, 6; IIIC:1, 2 a & b; IIID:1; IIIE:1; IVA: 1, 2 a & b, 3; IVB: 1 a & b, 2, 3 a-c, 4 b, 5 a; IVC: 1 a-c, 2a-c; 3 a & b, 4; IVD: 4</p>	<p>Patient Centered Care, Teamwork & Collaboration, Evidenced Based Practice, Safety, Informatics</p>
IM Student Learning Outcomes	NCLEX Test Plan
1/2/3/4/5/6/7/8	Safe & Effective Care Environment, Health Promotion & Maintenance, Psychosocial Integrity, Physiological Integrity
Concepts	
<p>Education/Teamwork & Collaboration/Ethics & Legal Precepts/ Evidence-Based Practice/Health Information Technology/ Patient-Centered Care/Safety/Cellular Regulation/Clotting/Comfort/ Elimination/Fluid & Electrolyte Balance/Functional Ability/ Gas Exchange/Metabolism/Mobility/Nutrition/Perfusion /Reproduction/ Sleep/Thermoregulation/Coping/Grief/Human Development</p>	<p>Donna Neel, MSN, RNC-OB, C-EFM, CA/CP SANE, AFN-BC, SANE A, SANE P</p>
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