

**EXERCISE 3 – SETTING PRIORITIES
INJECTS**

Inject 1: Resources available

Each group will receive these cards with the resources available at their EMT (**NOTE:** cut the table into cards). The team will have 10 minutes to look at what resources they have in the facility.

Clarify this information to all team members:

- Morphine will comfort a patient for 30 minutes
- Referral hospital only accepts patients after a phone call

<p align="center">ER-bed: equipped with airway management stuff: 1 ambu-bag, suction, no ventilator</p>	<p align="center">1 minor surgery set: autoclaving after use takes 2 hours</p>	<p align="center">ER-bed: wound dressing equipment</p>
<p align="center">ER-bed: wound dressing equipment</p>	<p align="center">Hiking hospital: 1 burns bed available (adult and/or pediatric), 2 hour drive single way, only after phone call</p>	<p align="center">Hiking hospital: 1 neurosurgical bed, available 2 hour drive single way, only after phone call</p>
<p align="center">Hiking hospital: 1 burns bed available (adult and/or pediatric), 2 hour drive single way, only after phone call</p>	<p align="center">General Practitioner 1</p>	<p align="center">General Practitioner 2</p>
<p align="center">Nurse 1</p>	<p align="center">Nurse 2</p>	<p align="center">Nurse 3</p>

Morphine 1 (30 minutes)	Morphine 2 (30 minutes)	Morphine 3 (30 minutes)
Morphine 4 (30 minutes)	Morphine 5 (30 minutes)	Morphine 6 (30 minutes)
Morphine 7 (30 minutes)	Morphine 8 (30 minutes)	Morphine 9 (30 minutes)
Morphine 10 (30 minutes)	10 minutes phone call with Hiking hospital	10 minutes phone call with Hiking hospital
Ambulance: place for 1 patient, no nurse or paramedic (if needed, you need to allocate a staff member to accompany the patient)	Ambulance driver	Ambulance driver

Extra resources for EMT 2 and 3:

<p>OT: 1 surgical table, anesthesia-machine with integrated ventilator and oxygen concentrator, all anesthesia- and surgical equipment, NO SURGICAL SET, surgical procedure takes 2 hours</p>	<p>2 OT nurses, can't be separated</p>	<p>Surgeon</p>
<p>Anesthesiologist</p>		

Inject 2: First patients arrive

Each group will receive the cards of 3 patients arriving simultaneously at the EMT facility. They are brought in by people at the transit camp located close to the facility.

PATIENT 1:

49 year old female
60% burned
Unconscious, impaired airway
HR 130 bpm, BP 80/56 mmHg

PATIENT 2:

35 year old male (he is one of the EMT staff)
65% burned on torso, legs and arms
Breathing, airway is free, no signs of smoke inhalation of burns in the airway
Consciously, screaming in pain
HR 140 bpm, BP 78/50 mmHg

PATIENT 3:

8 year old female
50% burned
Crying in pain, scared
HR 158 bpm, BP 70/60 mmHg

Follow up during the exercise:

One of the trainers or facilitators will follow team decisions. If patients are treated sequentially and not in parallel, the condition of untreated patients will worsen and could eventually lead to death. The trainer can write the updated vital signs on patients cards as the exercise evolves.

Inject 3: Father of the child arrives

Around 15 minutes after inject 1, a role player will enter the room where each group is working and declare he is the father of the child patient who is being treated at the facility.

The father of the child is upset and very anxious because he doesn't know what happened to his child and why she was brought in to the hospital and had treatment without his consent.

He will have the following reaction towards the team:

- The father is in an anxious state and enters the room asking where is his child, and why he was brought in the facility without his consent. He wants to see the child and talk to the responsible person immediately
- The father states that in Montyland it is illegal to treat minors without parents consent. If he cannot get clear answers he will call the police.
- If the father is not getting any answer from the team members or is treated aggressively, he will increase his voice and show a more angry attitude.
- He will insist on seeing the child.
- Only if the team does not manage to calm down the father and give him reasonable arguments, the father will take out his phone to call the police and say he will sue the team for kidnapping his child.

The father should be around for 10 min at least, depending on the performance of the team (he will stay longer if the team does not manage to calm him down).

Inject 4: Next 2 patients arrive

Each group will receive the cards of 2 other patients arriving simultaneously at the EMT facility.

PATIENT 4:

41 year old male

Blunt trauma to the head, on palpation you can feel the impact as a hole in the skull

Gasping

GCS: 8/15, HR 100 bpm, BP 100/70, SaO₂: 97%

PATIENT 5:

38 year old male

Gun Shot Wound in Abdomen, entry 1cm, no exit

Conscious, shivering

Muscle resistance on palpation

HR 130 bpm, BP 80/60 mmHg

Inject 5: Worsening patient conditions

Around 5 minutes after inject 4, simulate that patient 5 is worsening.

Let each group know about the changes:

- Patient 5 develops tachycardia with a HR of 180 bpm
- (3 minutes after) Due to the blood loss, the patient has gone into cardiac arrest