

Instructions for Mock Patient Triage and Treatment Exercise

This exercise is designed to accomplish two objectives:

- Give participants experience in MCI triage of mock patients that are victims of a mass casualty incident (MCI)
- Allow a facilitated bedside discussion of medical management of selected mock patients, using the length-based resuscitation tape (Broselow™) to expedite decision-making

Materials:

- Training manikins or paper or cloth silhouettes to simulate mock patients, including infant, child and adult sizes, if available and as needed.
 - Place mock patients around room to allow orderly inspection by each participant.
- Manikin Visual Inspection profiles, numbered, one attached to each mock patient.
- Manikin clinical profiles, coordinated by number with visual inspection profiles.
 - Hide clinical profile under mock patient for future reference.
- Manikin triage score sheet on clipboard for each participant.
 - Fold sheet vertically so that correct answer columns are hidden from participant.
- EMS triage tape in green, yellow, red and black to tie on wrist of some manikins.
 - Simulate field triage with triage tape on various manikins.
 - Some field triage should conflict with triage indicated in this exercise, to emphasize need for reassessment (secondary triage).
- Length-based resuscitation tape (Broselow™).
- Clipboards and pens or pencils.

Staffing:

Exercise facilitator

“Bedside” patient discussion leaders, one per group of 5-6 or fewer participants, if possible

Part I – Mock patient triage (35 minutes max)

1. Session facilitator welcomes participants, states objectives of exercise and orients them to activities and their roles
2. Participants are expected to function as hospital triage officers for an influx of pediatric victims of an earthquake, some of whom have been triaged in the field. As triage officers, their job is to sort patients for priority for medical treatment in the ED.
3. Participants should check a triage designation for each mock patient on the score sheet:
 - a. green (minor) – ambulatory, alert
 - b. yellow (delayed) – nonambulatory, responsive to voice or pain
 - c. red (immediate) – respiratory distress, unresponsive or declining mental status
 - d. black (unsalvageable or “expectant”) – essentially, not breathing

4. Each mock patient will be labeled with visual inspection information only, giving the triage officer a first impression of a patient's status, prior to vital signs, lab or imaging studies.
5. Participants will start triage at any patient station and move consecutively through numbered patients, checking the box for their triage decision for each patient on the score sheet
6. When participants have moved to their chosen first patient station, the facilitator should ask participants to put an arrow to the left of their individual starting patient's number
7. The first station should be a practice station for participants. Facilitator should advise them to look at the information on their first patient, decide on triage designation/color, then ask any questions about the process before starting the timed exercise.
8. After this first practice station, participants will be given 60 seconds to make a decision about each patient, then nudged with "Time to move forward," until all patients have been triaged.
9. To encourage and maintain flow, facilitator should allow participants to move on if ready before the 60 sec time limit, if the next manikin is open for assessment.

Part II Mock patient treatment (15 min max)

1. Specific mock patients have been selected for a brief bedside group discussion, based on clinical profile; the number of patients will depend on number of discussion leads available.
2. Introduce discussion leaders to participant group.
3. Have participant group count off to form smaller groups, based on number of discussion groups planned, and to gather at "bedside" of a designated manikin/mock patient.
4. Discussion leads are provided with additional clinical information about the patient to share as appropriate or upon request and should encourage treatment suggestions and use of the Broselow™ Tape (provided) to color-code the patient and to make recommendations for medications, fluids and equipment.

Wrap-up (1 min)

1. At the close of the exercise period, the facilitator should reveal how to locate suggested responses for each mock patient on the score sheet and explain that additional clinical information (secondary triage) for each patient can be found under each manikin, if interested.
2. Request each participant to add up their "correct" answers and to enter the total on their Score Card.