

SAMPLE

Use Guidelines for Students, Faculty and Staff

Purpose: Teaching and learning with human patient simulation is an innovative educational strategy which provides students with guided experiences in clinical situations. High-fidelity patient simulators/manikins (such as SimMan®) are an expensive and sophisticated technology requiring special care from all users. By reading, signing and dating this form, you are acknowledging your understanding of the guidelines for use of SimMan® and for expected behaviors in the simulation area.

Guidelines:

1. No food or drink in the simulation room.
2. The following items **should not** be used near the manikin
 - a. Ink pens or markers (***INK FREE ZONE!***)
 - b. Newsprint
 - c. Adhesives
 - d. Chemical cleaners (soap and water only)
3. Latex-free **gloves** will be provided at all times in the simulation room and are **required** to handle the manikin.
4. SimMan® is equipped with areas for specific clinical interventions. It is important to utilize the correct site to avoid damage to the manikin.
 - a. “wet” arm (right) may be used for IV injections
 - b. “electrical” arm (left) is for palpating a pulse and taking a blood pressure. **DO NOT INJECT** fluids into the left arm.
 - c. Subcutaneous/intramuscular injection sites include the following areas
 - i. Right deltoid
 - ii. Left anterior gluteus (upper) and right posterior gluteus
 - iii. Left upper thigh
 - d. Do not give any type of injections into the abdomen.
 - e. CPR, defibrillation, intubation, external pacing, chest tubes, urinary catheterization and many other interventions may be practiced with SimMan®. You will be oriented to these functions during your scenarios and educational sessions.
5. Professional dress code as required by your department, unit or institution.
 - a. Doctor of Pharmacy students: PCL attire required
6. Professional behavior required at all times. (Please note: Human patient simulation scenarios frequently involve video-recording for debriefing purposes so everything you say and do may be captured on video.)

Please sign and date this form, indicating your understanding and agreement to comply with these guidelines for human patient simulation.

(Name, please print)

(Signature)

(Date)