



# **TEACHER'S MANUAL**

Course:

Patient Examination and Medical Equipment Onboard

















# **TEACHER MANUAL**

The purpose of the teacher's manual is to assist teachers in organizing and introducing course. It is not the intention of teacher's manual to present teachers with a rigid "teaching package" which they are expected to "follow blindly". The teacher manual has been designed to give ideas to use material done in OnBoard Med –project.

### The Patient Examination and Medical Equipment Onboard 5 ECTS

#### **OBJECTIVES: Student**

- know, how the patient examination is happening as a professional procedure and implementate that
- know, how to to assess the patient's needs of treatment and implementate that
- know, how to implement empowering evidence based patient quidance and implementate that
- know, how to act based the requirements of patient safety onboard and implementate that
- know, how to work in a multidisciplinary and multicultural working environment onboard and implementate that

#### **CONTENT**

- Introduction; Timetable, teaching methods, learning environment
- Nursing ethics briefly, for example Informed concent, privacy, asepsis
- History taking, anamnesis
- Patient examination techniques: inspection, auscultation, palpation, percussion
- Patient examination in medical emergencies (for all mariners)
  - ABCDE
- Patient examination step by step (For ship nurses)
  - General assessment
  - Respiratory system
  - Cardiovascular system
  - Abdominal system
  - Neurological system
- Medical equipment onboard (For all mariners)
  - Medical equipment as an concepts, international rules
  - Passenger and cargo vessel

#### **IMPLEMENTATION**

Lecture, tasks, workshops, simulation

#### **ASSESSMENT**

- Which parts are assessed (participate/non participate; done/not done)

#### **SUMMARY**

There is possibility for different kind of lectures. Some of this could arrange online in real time (Online lecture) or face to face with target groups. Different kind of learning material, etc. pretasks via learning environment



or Kahoot questions, discussion between international students in discussion platform etc. You will use mobile phone or computer. Workshops, where You will practice hands on-skills.

This is a exercise in so authentic environment than possible, where is short information (5-10 min), simulation (15-20min) and debriefing (30 min). In every simulation You have 2-3 learning objectives, technical and non-technical.

CONTENT	TIME	LEARNING METHODS and MATERIAL	ASSESSMENT
Orientation for	2 h	Contact lecture shortly from education	participate/not
education/Advertising		contact rectare shortly from education	participate
Task 1 before Day 1.		Task 1. : Patient safety onboard (individual)	Done/not done
Task 2 before Day 1.		Task 2. Discussion online with all participants	Done/not done
		Theme: patient safety onboard- shared	
		opinions	
2 weeks time till Day 1.			
Day 1.			
Orientation for different	1 h	Contact lecture, own computer and mobile	
teaching methods		phone with participants!	
Patient examination in	1 h	Active lecture	Active discussion
medical emergencies			done/not done
(ABCDE)			
		l	
Patient examination in	6 h	Workshops	
medical emergencies		- Auscultation	Active discussion
(ABCDE)		- Palpatation	done/not done
NOTEL For this surress		- etc.	
NOTE! For ship nurses, medical officers and			
mariners			
Task 3 before Day 2.		Task 3. (individual) Describe, how You	done/not done
Medical equipment		understand medical equipment.	done, not done
onboard		Task 4. (individual) List medical equipment,	done/not done
Silboara		that You have in Your working environment	done, not done
		in cases medical emergency.	
Task 5. before Day 2.		Task 5. Discussion online with all participant,	done/not done
Medical equipment		what kind of equipment in different vessels	,
passport		are.	
		Task 6. Plan together with participants check	
		list "medical equipment onboard" to own	
		vessel	
2 weeks time till Day 2.			
Day 2.			
Info	1h	Active lecture	Active discussion
Patient examination step	7h	Workshop:	Done/not done
by step		Task for workshop:	Active discussion
NOTEL For chin nurses		Cardiovascular assessment etc.	done/not done
NOTE! For ship nurses Task 7 before Day 3.	-	Task 7. Individual. Orientation for simulation	dono/not dono
•	1		done/not done done/not done
Task 8 before Day 3.		Task 8. Discussion online: Virtual patient scenarios.	done/not done
		Example:	
		Lyambic.	





#### **TIPS FOR TEACHER**

In this part You will found some examples in pretasks, workshops, simulations. All parts are suitable knowledge to debriefing too after simulation. As a teacher You could choose suitable materials based on Your course and target groups.

NOTE! You can use these pretask in learning environment for example as an individual task, so that participants could return their answers to return box, which is a folder between one participant and teacher. Or There is discussion platform possibility between all participants, where they can share knowledge, material, opinions etc. There is possibility too take video etc. As a teacher You can be innovative and choose different implementation based on Your course participants.

**Pretask 1.** Look the Patient Safety – Material link (WHO: Guide in Patient safety: Pages 92-104 and article: Leotsakos, A. etc. 2014. Educating future leaders in patient safety. After reading, describe what is patient safety onboard.

- Pretask 2. Discussion online with all participants. Theme: patient safety onboard- shared opinions
- Pretask 3. Describe, how You understand medical equipment.
- Pretask 4. List medical equipment, that You have in Your working environment in cases medical emergency
- Pretask 5. Discussion online with all participant, what kind of equipment in different vessels are.
- Pretask 6. Plan together with participants check list "medical equipment onboard" to own vessel

#### Pretask 7. Before simulations onboard

- Think Yourself first in which way You will solve this challange onboard. The question is how You will treat the patient and transfer him out from Upper bed in a little cabin. What are the the spisific steps to treat this patient?
  - a. The patient is not awake, but breathing in upper bed. Patient look to roof directly
  - b. The patient is not awake, not breathing in upper bed
- Then go to disucssion platform in Optima, where You can find platform where You can discuss with other medical officers or shipnurses.









# **Simulation bank**

#### Patient situation/simulation Bank

You can found the list of different scenarios in medical emergencies. You can choose any case You want, if it is suitable and relavant for Your course. In every case You will found patient, name, age, environment, main objectives in cases, main symptoms and diseases, findings after Patient examination, main nursing procedures and TRIAGE classification (red yellow green). In some topic You will found 2 cases, level 1 and level 2. Level 1 is not so complicated than case level 2.

#### Here is a few examples

Pasi Laakso	Assess patient	Multitrauma	A and B: Injury on	02.	
111188-1122	according to	patient	thorax with trouble	Cervical collar.	
	ABCDE.		to rising and falling	Intravenous	
			during inspiration	needle.	
			and expiration,	Stabilize hole	
				body.	
			C: Blood pressure 85-	Evacuation.	
			120/50-90, pulse		
outside on the			120, ST		
deck			D: Unconscious.		
			E: leg are in a		
The nearest port			different position. ,		
2 hours by boat			upper arm is blue		

Cecilia Eklund	Communication	Hip fracture,	Patient has a	O2.	
050228-198A	to patient.	left side.	shorter, efferent left	Intravenous	
	Assess patient's		leg. And pain in both	needle.	
	body.		hip and knee.	Painkiller.	
in Stairs	Assess ABCDE.			Stabilize leg in a	
				collar.	
The nearest port				Evacuation.	
4 hours by boat					

Raija Kaarina Ranta 110743- 1243	don't know where she is right now, no oriented	A and B: Breaths 16 /min, symmetry C: Bloodpressure	Health assessment	
in hall near the elevator	NOTE! No brain attack,	145/75, Pulse 85 D: No problems, symmetry		
The nearest port 4 hours by boat	dementia	E: No other injuries		



# Simulation scenario

You will found the specific description of every scenarios in simulation bank with different kind of learning objectives, patient's roles, summary of the scenario from the beginning to the end, equipment list and tips for debriefing too.

# Scenario. Alcohol poisoning

Scenario  Patient with acute alchohol poisoning onboard		Technical problem	No technical problem:	
		Alcohol poisoning Fluid imbalance Need for iv access	Communication with patient – hard, patient responsive but incoherent	
Learning objective		Technical objective	No technical objective	
Know what to do in this kind of situation, alcohol poisoning		know how to do the patient examination based on ABCDE, know what vital sign monitoring in this situation means, How to check and treat fluid imbalance	Communication with patient and his friend  Communication and leadership with other crew members, if these are available	
Patient Viktors Kalns 260596-111H Patient's friend		Viktors is a young man from Latvia, who had drunk too much at the bar.  Situation presents with a disoriented Viktors, who has slurred speech, then profuse vomiting.	Home medication	
Aleksander Ans				
Summary of the scenario and the situation in the beginning	speech. A fr much than a answer any understand When the s patient exam Patient tran member's.	riend of this patient is there too. This a other. The patient can still walk, is more, no eye contact; really drunk, where he is, but is not aggressive. hip nurse and security man will commination, patient start to vomiting hasfer to ship nurse's office. By whee Not vomiting in this moment. He is	but standing still. Viktors doesn't  ne near the patient and start to make neavily x 2.  Ichair or lifting with other crew nicely, not speaking at all.  when the ship nurse and security man	



In ship nurse's office; vital monitoring with equipment (Blood pressure, Pulse, SaO2, temperature, EKG, GCS, Breaths 14) and treatment with 28-40 % oxygen mask, iv. canyl).

The patient does't answer there in medical room. He sleeps only, Breaths 8-14.

**Step 1.** Blood pressure 105/65, Pulse 105, Sao2 92, temperature 36,4, GCS 14 (No orientated, no movements when asking, but with pain Yes, Both pupils ok, no differences between left or right) (First measurement in ship nurse's office) No iv-canyl or fluid or oxygen mask yet.

Step 2. Blood pressure 90/55, pulse 115, Temperature 36,4; GCS 12-13

Step 3. Blood pressure 110/60, Pulse 95, Sao2 94 (Iv-canyl and Nao, 9500->, Oxygen 28%) GCS 12-13, Like in step 2.

**Environment:** 1. Info desk onboard

Prematerial:

Patient's/Participant roles descriptions:

2. Ship nurse's office onboard in passenger vessel
Equipment if needed:
Emergency care bag (normal and Oxygen bag)
EKG monitoring system; blood pressure, Pulse, SaO2
Stethoscope
iv-canyl and other fluid balance equipment; Na0,9% 500ml-1000ml
Patient transfer equipment: wheelchair, red transfer blanket or green lifting blanket
Hand desinfection
Medication possibilities:
Check the ship pharmacy list based on STCW and company's list of other medication.
Medication for vomiting
Medication for something else
Extra material for sharing to participants:



STEP 1. Viktors walks with his friend, feels dizziness, cannot answer questions clearly. Strong alcohol smell on breath. He stands still. When the ship nurse and security man will come near the patient he starts to vomiting x 2. Normal, green fluid, no blood or food in this. Breaths 14. Normal lung sounds.

Friend Alexander helps his friend. He is drunk alcohol too, but not so much than Viktor. Aleksander would like to go to disco back as soon as possible, because there is other friends waiting for him still. The party is going on and he really would like to go there.

- a.If The ship nurse doesn't interrupt his action, A. will go to disco.
- **b.** If the ship nurse does interrupt and ask something from the friend, for example patient's name, medication, personal ID, preinformation etc. A. will stay there and ask questions. You know patient name, wallet with papers is in Viktors's pocket. No medication. Only alcohol, no drugs or other medication with alcohol. A. does not know Viktor's the allergies or diseases. Or relatives.
- **STEP 2.** Patient should be transferred to medical cabin. He could sit on wheelchair or if the crew members will transfer him by lifting, he will be really nicely, no aggressive, like sleeping all the time. Breaths 10. Normal lung sounds.
- a.If The ship nurse doesn't interrupt his action to go diaco, A. will go to disco.
- **b**. If the ship nurse does interrupt and ask Aleksander to come to ship nurse's office too, A. will go there still.
- **STEP 3.** Vital signs monitored now. He sleeps still. GCS 12-13. Not oriented, pupils both ok, movement only to pain, not answering or speaking. Participant should be able to recognize fluid loss and manage an iv access. Breaths 8-10. Normal lung sounds.

Aleksander will be there, but during the measurement asks still, that could he go back to disco.

#### TMAS doctor if needed

If ship nurse call to doctor, listen first the situation based on ISBAR.

Finally You could ask, if the patient has fallen down in stairs, is there some bruises or something? GCS situation more specific. Drugs? No evacuation if there is now nursing diagnosis, that some other problems is still in process, for example some kind of head injury etc.

#### Preinformation for those Who are going to simulator:

Patient examination ABCDE with equipment onboard (Bag 1 and 2). In corridor or near the info desk.

Patient monitoring in ship Nurse's office with available equipment.

Mobile phone if needed, contact to TMAS doctor

Nursing documentation paper, if needed

If You need more crew members to help, You can call.

Iv. canyl:

- a. Pretend that you will put this, but say the procedures in voice, So that everybody will hear that. (real patient)
- b. Put it to "fake" hand

#### Information to observators:



If the shipnurse in charge would like to have more "hands" to this case, You will be the other crew.

#### Tips for Briefing after simulation

- Follow the objectives in this scenario
- know how to do the patient examination based on ABCDE, know what vital sign monitoring in this situation (alcohol poisoning) means, How to check and treat fluid imbalance
- Communication with patient and his friend
- Communication and leadership with other crew members, if these are available

#### **Nursing procedures**

- Procedures as a professional way, ABCDE, Patient treatment after vomiting, asepsis, patient transfer and monitoring, Iv.canyl and fluid therapy, patient position in a recovery position

#### Co-operation, management and leadership

- Co-operation in team: What kind of roles? Who is the leader in this case?
- Speech? Eye contact? Nonverbalic communication
- Reporting by ISBAR to other crew members, Communication with patient and his friend, Communication onboard and ship to shore.

Teachers roles during simulation	Teachers 1&2 – debriefing afterwards	
Teacher 1: Follow specific the situation and medical procedures		
Teacher 2: Follow specific communication between ship nurses and crew members, and communication between patient and his friend		

#### Life savers

Director in this simulation could say TIMEOUT, so everybody know that Simulation scenario is over.

Participants in simulator can say TIMEOUT too, if they don't know how to act professionally in this situation.

#### **Ending criterias**

Patient examination ABCDE, Nausea and vomiting treatment, Patient transferring to ship nurse office, Vital signs monitoring, Intravenous access, Intravenous fluid infusion, Patient positioning in a recovery position, medical communication from ship to shore



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#### **Course leader**

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#### **Co-workers**

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#### **Picturers**

Picture 1. Cover page. Satu Haapalainen, Turku University of Applied Sciences 12.3.2019. Viking Line, Viking Grace

Picture 2-4. Tips for teacher. Pretask 7. Nina Rantalaiho-Kulo, Turku University of Applied Sciences 16.1.2019 Tallink Silja, Baltic Princess

















Own ideas for implementation	
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