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cum HKSSiH Annual Scientific Meeting 2016

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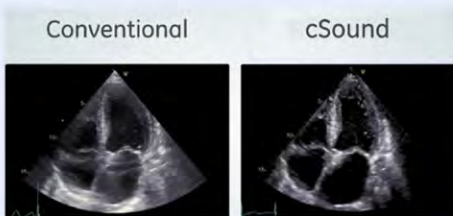
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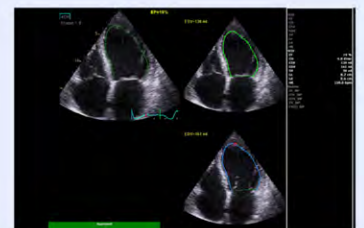
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Time	Theater 1	2/F Function rm. 1	2/F Function rm. 2	7/F Sim Centre
0845 - 0900	Registration			
0900 - 0920	Welcome address by HKSSiH Chairman (Dr. Tim Brake) and HKJC ILCM Director (Dr. PP Chen) and souvenir presentation to plenary speakers			
0920 - 1015	Opening Plenary - Beyond education, how to use simulation as a tool to answer different questions and challenges within healthcare systems (A/ Prof. Josh Hui , Society of Academic Emergency Medicine (SAEM)/ UCLA)			
1015 - 1045	G/F Tea break and visit exhibitor			
	Track 1: Education - -Curriculum design	Track 2: Research	Track 3: Debriefing	Track 4: Technicians
1045 - 1115	Immersing Human Patient Simulation (HPS) in Teaching and Learning Pedagogy (Ms. Baljit Kaur Gill, OUHK)	Workshop - Present your research ideas and turn them into workable projects (A/Prof. Josh Hui , SAEM / UCLA)	Workshop - Enhance your debriefing through self, peer and student feedback with the use of the DASH assessment tool (Dr Tim Brake, HKSSiH)	Workshop - Trauma Makeup (Casualty Simulation Team, A&E Training Centre)
1115 - 1145	Incorporation of simulation in physiotherapy education (A/Prof. Shirley Ngai, Poly U Rehab Science)			
1145 - 1215	ECMO training in ICU (Dr. Erick Cheng, QMH)			
1215 - 1345	Buffet Lunch @ 1/F Hall			
1315 - 1345	Lunch Presentation: Using video recording system for outcome measure (Mr. Sleiman El Murr , B Line medical) / Visit 7/F ILCM / Visit G/F Igloo XVR			
1345 - 1430	Afternoon Plenary - Design and development of the nursing simulation scenarios (Dr. Wang Ailing - Wuhan University HOPE School of Nursing)			
	Track 5: Teamwork and human factors	Track 1: Education -Scenario design	Track 6: (OSCE) Assessment by Simulation	Track 4: Technicians
1440 - 1510	Role of Simulation in CRM training (Dr. Ho Lap Yin, QEH MDSSC)	Workshop - Design and development of the nursing simulation scenarios (Dr. Wang Ai Ling)	Workshop - How to design checklist for Simulation Scenario (Dr Mark Wen, Taiwan Society of Simulation in Acute And Critical Care Medicine)	Workshop - Disassemble the simulator, trouble shooting and preventive maintenance (DL, Laerdal Medical)
1510 - 1540	Building A Simulation Educator Course (Dr. So Hing Yu, HKJC ILCM)			
1540 - 1610	A study of usability of medical devices through simulated use: a human factors and end user testing approach (Dr. Calvin Or, HKU)			
1610 - 1640	G/F Tea Break and visit exhibitor			
1640 - 1725	Closing Plenary –The Power of Simulation for emergency and critical care in Taiwan (Dr Mark Wen, Taiwan Society of Simulation in Acute And Critical Care Medicine)			
1725 - 1730	Closing & Lucky Draw (Dr Jacky Chan and Dr So Hing Yu, Conference co-chair)			
1730 -1800	Visit 7/F ILCM / G/F Igloo			

Conference ebook (workshop details / abstract / speaker intro can be download at <http://goo.gl/p9aFqb>



Message from conference chairmans



Dr. So Hing Yu
HKJC ILCM



Dr. Jacky Chan
HKSSiH

The healthcare system is a complicated one. Simulation is one way to allow us to explore this complicated system. Using simulation for training is certainly an effect way to allow healthcare professionals apply their knowledge and skill in a setting closer to their clinical setting than a traditional classroom. But of course effective learning in simulation demand the understanding of principles of education, especially those related to adult learning. There are certainly other ways we can use simulation to explore our complicated healthcare system, such as assessment, research and system integration. Those of us who have been using scenarios and simulation for assessment would realize the challenge of how to set scenarios and how to assess objectively to be fair to the candidates and there are certainly a lot to be learned. We may be facing similar challenges when we try to use simulation for research. When we talk about simulation and human factor, we often think about team training. That is no doubt one very important aspect of human factor but actually it is also possible to study other aspects of human factor- physical, psychological, and organizational – using simulation. Those are within the arena of system integration. By introducing all those elements mentioned above in this meeting, we can broaden the horizon of simulation.

Organizing Committee

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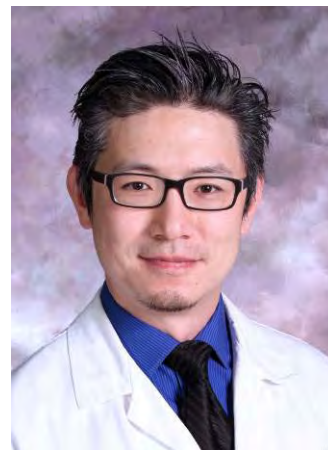
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0920 – 1015 Opening Plenary @ Theater

Beyond education, how to use simulation as a tool to answer different questions and challenges within healthcare systems

Joshua Hui, MD, MSCR, FACEP
UCLA-Olive View Emergency Medicine.
Director of Simulation



Abstract of the topic

The advances of simulation is evident in the past decade. Although it remains heavily rooted in educational and training aspects, numerous advances in technology and concepts allow simulation as a modality to extend beyond the educational realm. In his plenary speech, Dr. Hui will discuss the advances of simulation modality as a whole in the healthcare system, and particularly how simulation has been adopted to address and study various kinds of challenge and question beyond training and education.

1045 – 1215 Track 2: Research Workshop @ 2/F Rm 1

Present your research ideas and turn them into workable projects

Abstract of the workshop

Interactive roundtable discussion format that will focus on Dr. Hui's providing direct guidance and feedback to research ideas presented by the workshop participants. The methods will be both 1-on-1 as well as group setting. Interaction among peers are also encouraged. Those research or program projects currently in progress but need guidance are equally welcomed.

Brief intro of the speaker

- President, Society of Academic Emergency Medicine (SAEM) Simulation Academy, effective May 2016
- Immediate past chairman, Research Committee, the Society for Simulation in Healthcare, (2013-2014)
- Immediate past chairman, Scientific Contents Committee, International Meeting for Simulation in Healthcare. (2012 to 2015)
- Chair of its Annual Assembly for American College of Emergency Medicine California Chapter (2013 to 2015).
- Recipient of the 2015 Education Award recipient from American College of Emergency Medicine California Chapter.
- Recipient of the Best Implemented Patient Safety Project Award from Los Angeles County Department of Health Services, 2011

1045 - 1115 Track 1 Education @ Theater

Immersing Human Patient Simulation (HPS) in Teaching and Learning Pedagogy

Miss Baljit Kaur Gill, PhD Candidate (HKU)



Abstract of the topic

Nursing education evolves from the traditional lecture-based to clinical placement and later into the innovative Human Patient Simulation (HPS) laboratory session in the 21st century. By any means, the major challenges in nursing education is to enhance and develop the clinical competence among nursing students because it develop student's abilities to select the necessary elements from their own repertoire of resources and apply them in unique situations.

Human Patient Simulation (HPS) had been introduced and adopted in nursing education programs. It helps to provide undergraduate baccalaureate nursing students with immersive, reality-based clinical experiences (Bearnson & Wiker, 2005; Yeager, Halamek, Coyle, Murphy & Anderson 2004). HPS helps the learner to acquire essential skills in an environment closely representing reality which do not endanger the learner and the client.

HPS is an active teaching and learning strategy which is learner centered with the educator acting as a facilitator in the learning process. Learning through HPS demonstrates a higher level of knowledge acquisition, clinical judgement and critical thinking which are essential and important skills for nursing students and nurses to demonstrate clinical competence.

Educators should be able to implement and integrate HPS as a teaching and active learning strategy in the curriculum in all preparatory phase, implementation phase and post learning phase in terms of both at the faculty level and learner level.

Brief intro of the speaker

Miss Baljit Kaur Gill is a Senior Lecturer in the Open University of Hong Kong and a PhD candidate in The University of Hong Kong. She has extensive teaching and research experience in higher education institute. She is well equipped and knowledgeable of applying Human Patient Simulation (HPS) teaching and learning in different healthcare curriculum especially in nursing curriculum. She has expertise in designing various HPS scenarios for different level of learners and had also developed culturally specific simulation evaluation scales in Chinese for Asia simulation users. She has secured more than five researches funding on human patient simulation and has over 15 oral presentation and publication on simulation in both local and overseas conferences.

1115 - 1145 Track 1 Education @ Theater

Incorporation of simulation in physiotherapy education

Dr. Shirley Ngai
Assistant Professor,
Department of Rehabilitation Sciences,
The Hong Kong Polytechnic University



Abstract of the topic

Theoretical knowledge, practical skills and clinical experience are essential components in healthcare education. In particular, integration of knowledge acquired to critical thinking and hands-on practice is a key to success. Students express difficulties in transitioning the knowledge and skills learnt in class into clinical practice. Thus, it is essential for students to have early exposure to clinical cases and integrate the knowledge learnt from school into practice. Simulation practice, therefore, could play an important role here.

Simulation is widely used in the teaching curriculum of medicine and nursing programme. Previous studies suggest that simulation training not only improves the skills of performing specific tasks, it also uplifts other soft skills such as communication skills, self-confidence and self-perceived level of competency. Its usage in allied health education, however, is still at the developing stage. Other than part practice of skills, increasing usage of standardized patients and high fidelity models has been introduced in the physiotherapy education in Hong Kong and overseas. In this seminar, the incorporation of medical simulation as a teaching strategy will be discussed.

Brief intro of the speaker

Dr. Shirley Ngai is Assistant Professor of the Hong Kong Polytechnic University. Her expertise in teaching and research is in the field of Cardiopulmonary Physiotherapy. Shirley was the recipient of Australian Endeavour Research Fellowship in 2011 and Asian Pacific Society of Respiratory (APSR) short term research fellowship in 2013 for pursuing research studies at the Royal Prince Alfred Hospital and University of Sydney for research studies specialized in airway obstructive diseases. Shirley is enthusiastic in education and links up clinical research into academic teaching. She adopts innovative teaching pedagogies and incorporates medical simulation into undergraduate teaching to enhance students' learning and translation of knowledge and skills learnt in classroom into clinical practice. Shirley involved in different learning and teaching grants to promote active learning and using simulation in teaching. She was the awardee of the Faculty award for outstanding

1145 - 1215 Track 1 Education @ Theater

ECMO training in ICU

Dr Cheng King Lik, Erick

Abstract of the topic

ECMO crisis are high risk, low volume and rapidly fatal adverse events. Tradition didactic lecture type of training alone is not adequate because ECMO adverse events management requires not only knowledge, also involves stress management, teamwork, effective communication and hands on skills. ECMO simulation training program was therefore introduced to the Department of CardiothoracicSurgical Intensive Care Department for the above reason. The program was effective in terms of increasing confidence and satisfaction in managing ECMO patients and improvement in post-training test and regular audit results. The ECMO training program consists of lecture, skill workshop, immersive simulation training, post-training assessment and regular audit.

In the near future, we would like to modify our program in order to extend the training for pediatric, cardiothoracic and anesthetic doctors, in order to create a safer patient managementenvironment for the ECMO patients.

Brief intro of the speaker

Dr Cheng is an associate consultant of Department of Cardiothoracic Anesthesia of Queen Mary Hospital. He is especially interested in training and education by simulation. He is the departmental training instructor for the Extra-Corporeal Membrane Oxygenation (ECMO) simulation training program for the intensive care nurses. He took part in designing and conducting the trainingprogram since 2013. He is the instructor of Hospital Authority Central ECMO training program since 2014.

He is also instructors of PALS, Advanced and Difficult Airway Management for Anesthetist (ADAM - A), Advanced and Difficult Airway Management for Doctor (ADAM-D), Effective management of Anesthetic Crisis Course (EMAC)

Exposure to Anaesthesia Safety & Emergencies Course for New Anaesthesia Trainees (EASE), Enhancing Safety in Sedation Workshop for HA Staff (ESSW) and Teamwork for Improving Patient Safety in Operating Room (TIPS-OR).

Besides being a 'simulationist', he is also interested in mechanical circulatory support and clinical applications of ultrasound.

1440 – 1610 Track 4: Technicians @ 7/F ILCM OT

Enhance your debriefing through self, peer and student feedback with the use of the DASH assessment tool.

Brake, Timothy James

Abstract of the topic

Participants are encouraged to read the DASH Handbook on

<https://harvardmedsim.org/media/DASH.handbook.2010.Final.Rev.2.pdf>

Outline of the workshop

- 1440: Introduction and learning objectives
- 1450: Element 1 assessment
- 1500: Video 1 Assessment by elements 2-5 and feedback to team
- 1520: Video 2: Analysis of Frames Actions Results
- 1530: Round 1: Debrief/ Actor in role/ Observer Trios
- 1535: DASH 1: Self/ Student/ Peer, feedback from observer
- 1545: Round 2: Rotate Debrief/ Actor in role/ Observer Trios
- 1550: DASH 2: Self/ Student/ Peer, feedback from observer
- 1555: Round 3: Rotate Debrief/ Actor in role/ Observer Trios
- 1600: DASH 3: Self/ Student/ Peer, feedback from observer
- 1605: Summary: take home messages

Brief intro of the speaker

- President, SMO, Department of Anaesthesiology, United Christian Hospital
- Chairman, HKSSiH (2015 – 2017)

1045 – 1215 Track 4: Technicians Workshop @ 7/F Ward

Trauma Make up.

**Accident & Emergency Training Centre,
Hospital Authority Hong Kong**
aetc_rhtsk@ha.org.hk



Abstract of the topic

Simulation is a strategy to mirror, anticipate, or amplify real situations with guided experiences in a fully interactive way and it is increasingly being used as healthcare teaching methodology nowadays. Casualty simulation (CASIM) is the replication of trauma wounds on standardized patients using make-up technology for scenario-based training. It can enhance healthcare professionals' learning of assessment and treatment of casualties before they work on the real clinical cases. It also helps to increase learners' level of confidence and competence on trauma care during training. The implementation of CASIM requires the knowledge of anatomy, physiology and mechanism of injury and also the usage of different make-up materials. Therefore, CASIM training for instructors is required prior to its implementation.

Brief intro of the speakers

Casualty Simulation Unit (CASIM) is committed to provide the trauma makeup and standardized patient service for various courses. The unit setup for more than 6 years. They have monthly meeting and regular assessment. They are invited to Shanghai and Taiwan to conduct the 1.5 hours workshop in 2013 and 2015 respectively.



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1315 – 1345 Lunch presentation @ 1/F HALL

Using video recording system for outcome measure

Sleiman El Murr

(International Business Development

Manager

B-Line Medical

sleiman@blinemedical.com



Abstract of the topic

- demonstration on evaluation and outcome measure functions;
- Application of B-Line System referring to Hong Kong context;

Introduction of the speaker:

Sleiman joined B-Line Medical in 2011 and was involved in the design and implementation of simulation centers in the United States, Europe, Asia and Australia. B-Line Medical has been helping providers and educators manage healthcare simulation centers and enhance hospital quality improvement initiatives for over 10 years. The company's in-depth experience with simulation center design and management has helped many clients develop successful simulation programs in 450+ institutions in 24 countries.

1345 - 1430 Afternoon Plenary @ Theater

Design and development of the nursing simulation scenarios

Ailing Wang, PhD, Lecturer
Wuhan University HOPE School of Nursing, Director of the
Simulation Center



1440 – 1610 Track 1: Scenario design Workshop @ 2/F Rm 1

Abstract of the Plenary and workshop

The advances of simulation is evident in the past decade. Although it remains heavily rooted in educational and training aspects, numerous advances in technology and concepts allow simulation as a modality to extend beyond the educational realm. In his plenary speech, Dr. Hui will discuss the advances of simulation modality as a whole in the healthcare system, and particularly how simulation has been adopted to address and study various kinds of challenge and question beyond training and education.

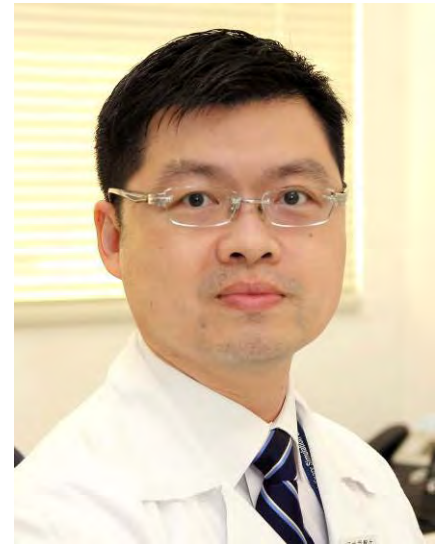
Brief intro of the speaker

Ailing is currently the Director of the Simulation Research Center at Wuhan University HOPE School of Nursing. She has 10 years of experience on simulation education. She developed and implemented simulation into the BSN curriculum of WU. She completed the design and opening of the Simulation Research Center in 2012. She and her team provided simulation workshops to train faculty of the nursing school and nursing educators outside agencies. She and her team applied to create the National Virtual Simulation Center and got approved by the Ministry of Education.

1440 - 1510 Track 5: Teamwork and human factors @ Theater

Role of Simulation in CRM training

Dr HO LAP YIN,
Director (MDSSC),
Consultant Urologist,
Queen Elizabeth Hospital



Abstract of the topic

CRM training has been recognized as a major factor for transforming aviation into one of the safest and reliable organization in the world. It is not only involving training of a skill-set but most importantly, a mindset. To improve our ability to work as a team, one basic prerequisite is to allow healthcare professionals to understand how human thinks, how human works, and how human mistakes are made—human factors.

Simulation is a powerful tool to help us understand ourselves. It allows mistakes to happen and a safe environment for everyone to talk about these errors. In the presentation, the speaker will share some exciting examples, the challenges faced and some hard lessons that were learned over the years.

Brief intro of the speaker

Dr Ho is currently the director of Multi-Disciplinary Simulation and Skills Center in Queen Elizabeth Hospital, and co-chairperson of the HAHO team-based simulation working group and KCC CRM training task force.

He actively involved in simulation-based medical education since 2008 and facilitated the development of many simulation based education program for KCC and HAHO. As one of the pilot sites for HAHO simulation based-CRM training and one of the SSH accredited simulation centers in the area of teaching/education, MDSSC is devoted in delivering simulation-based CRM training programs for multidisciplinary teams in various specialties.

1510 - 1540 Track 5: Teamwork and human factors @ Theater

Building A Simulation Educator Course

Dr. So Hing Yu,
Deputy Director, HKJC ILCM



Abstract of the topic

A good simulation educator course is instrumental to the promotion of simulation-based and learner-centred education in healthcare. The HKJC ILCM is currently developing a comprehensive simulation educator course based on sound education principles. We understand the importance of ensuring congruence amongst the objective, assessment and feedback method and the teaching method. A good course will not only ensure that participants are able to master the fundamental knowledge and their application. They should also be able to integrate the learning with their personal and work lives, nurture their passion in education and learn how to learn. The importance of flipped classroom, team-based learning, experiential learning and the whole-part-whole learning model will be discussed in this talk.

Brief intro of the speaker

Dr. So graduated from the Medical School of the University of Hong Kong in 1983 and subsequently completed his specialist training in anaesthesiology and intensive care. For more a decade now, Dr. So focused on patient safety and healthcare quality. He is currently a consultant in intensive care of the Prince of Wales Hospital and Service Director in Quality and Safety of the NTE Cluster, Hong Kong. Dr. So is also currently the Chairman of the Board of Intensive Care Medicine, Hong Kong College of Anaesthesiologists; Honorary Deputy Director of the HKIC Innovative Learning Centre of Medicine; Honorary Associate Professor of the Department of Anaesthesia and Intensive Care, CUHK; Honorary Treasurer of the Asia Pacific Association of Critical Care Medicine and Chairman of Committee in Quality and Safety, HAHO. He is the course director of the HKJC ILCM Comprehensive Simulation Educator Course.

1540 - 1610 Track 5: Teamwork and human factors @ Theater

A study of usability of medical devices through simulated use: a human factors and end user testing approach

Calvin Or, PhD,
Assistant Professor
Department of Industrial and Manufacturing Systems
Engineering
The university of Hong Kong



Abstract of the topic

Poorly-designed medical devices and health IT that do not fit the characteristics of users and work systems are likely to result in performance and safety issues. Technology designers should develop their products mindful of the capabilities and needs of users and work processes in order to achieve a better fit, which can be done by incorporating human factors and usability engineering as parts of the design steps. Indeed, attention to human factors and usability enables one to identify the design weaknesses and improve the effectiveness and safety of technology. In the presentation, human factors engineering and its applications to designs of health care work systems and technology will be discussed. Examples of the use of human factors and end user testing in simulation for usability and human-technology interactions will also be illustrated. There is still relatively little known about the importance of human factors and usability test in health care. It is hope that through the presentation health care practitioners can pay more attention to human factors and usability engineering as it can help improve patient safety and health care quality.

Brief intro of the speaker

Dr. Calvin Or is an Assistant Professor in the Department of Industrial and Manufacturing Systems Engineering at the University of Hong Kong. He received his Ph.D. degree from the University of Wisconsin-Madison. His research work focuses on the application of human factors engineering to improve the design and usability of health care work system and technology to enhance the satisfaction, safety, and health of patients and health care professionals. His recent research work involves usability evaluation of medical devices and health information technology, study of patients' acceptance and adoption of health information technology, and examination of the impacts of health information technology in chronic disease self-care.

1440 – 1610 Track 4: Technicians @ 7/F ILCM OT
Disassembling the Simulator

Duk-Lung Chan

Technical and Service Support Consultant,

Laerdal China Ltd.

DukLung.Chan@laerdal.com



Abstract of the topic

Laerdal's Patient Simulators are sophisticated instrument combining computer technology, wireless communication, air control and fluid control systems in human size manikins.

In this workshop, we shall use SimMan 3G as an example and show the inside structure of the manikin. We shall show the major parts and their inter-connections. We would explain how they work together to provide the simulation results.

The main objective of this workshop is to let the technical participants to know more about this manikin so that they can provide better technical support to the users. They should also learn how to maintain the manikin in a good condition to reduce maintenance cost.



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¹Davis DP, et al. *Resuscitation*. 2015;92:63-69.

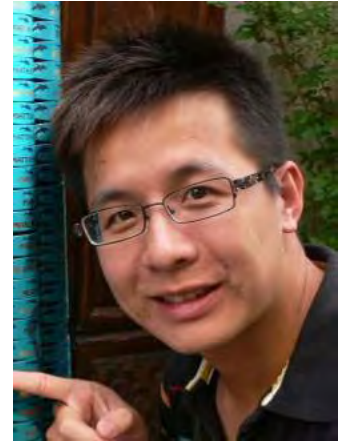
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1640 - 1725 Closing Plenary @ Theater

The Power of Simulation for emergency and critical care in Taiwan

MD , Mark Wen-Cheng Huang
Academic Committee member for
Taiwan Society of Simulation in Acute and Critical
Care Medicine



Recently, Simulation based medical education(SBME) became very popular for student's training and healthcare. Focused on the importance of patient safety, and we start to apply different methods for improved quality of care. Among them, Simulation-based team training showed us the power for patient care and enhanced reflection of learner. During these 3 years, we noticed the many advantages of simulation in critical care and it indeed decreased some medical error and pitfall. Therefore, many simulation based competition and Team resources management were hold. Today, we wound shared some experiences of simulation development and application in Taiwan.

1440 – 1610 Track 6: Workshop

How to design checklist for Simulation Scenario @ 2/F Rm 1

Abstract of the workshop

Learning objectives

1. Assessment tool in simulation scenario
2. Advantages/Disadvantages of different assessment tools
3. The key concept of checklist design
4. Steps for constructing simulation checklist

Brief intro of the speaker

Dr. Huang served in Center for Education in Medical Simulation(CEMS) of Taipei Medical University and works as an emergency physician in Wan-Fang Hospital, TMU. He received simulation training for 5 years. During this period, he participated twice IMSH and is a faculty of preconference and conference workshop about integrated simulation and OSCE. He also had several studies and programs for medical student education and faculty development. This two years, he is on Academic Committee of Taiwan Society of Simulation in Acute and Critical Care Medicine.