CUE CARDS – MED ERROR

TRANSFERRING RN:

Give report to RN as you transfer the patient from the ER:

Here's Mr. Waters- we are so crazy in the ED, we're on reroute! I'm bringing you another patient as soon you get him settled. I got the admission data base done for you, and his orders are written. He's 65, allergic to levaquin, fell at home and has an 8 cm laceration on his left arm. Kerlex dressing is dry and intact. History of afib, HTN, CAD. Admitting diagnosis is syncopal episode. Vitals for me were 136/84, 37, 98 and irregular, 20 and lungs clear, sat is 98 on room air. He's got a 22 saline lock on the right. Everything else is fine. Oh – here's his meds. I got them out but didn't have time to give them. Thanks - I'll be back in about fifteen minues!

PATIENT

You are very tired, hungry and irritable. You just want to go to sleep and want to have a snack and your meds as soon as possible. Say things like

"Why does everyone want to know my birthday?"

"Can't I just take my pills and go to sleep?"

"I'm hungry! I want some milk and crackers with my pills."

"My blood pressure isn't usually this high. I need my pills!"

"I always take my pills at the same time every night, and I want you to give me them now."

After you take meds, pull covers up and go to sleep.

If nurse doesn't check labs prior to warfarin, after s/he leaves the room, you will have "blood moulage applied to arm dressing, HL site and some of the linens on the bed. When RN re-enters room, wake up, be upset at the sight of your own blood, yell for help, be very agitated, upset, etc.

Cue Sheet: Medical Error

SECONDARY RN

Be available to primary RN to help whatever is delegated to you. Wait to be asked to help.

UNIT SECRETARY

As soon as primary RN begins patient assessment, call into room that the ER wants to transfer another patient.

A few minutes later, call into the patient room that the lab labels are ready for Mr. Waters.

At cue from scenario operator, call into the patient's room to say you're needed in another room.

VOICE OF MD

After RN gives SBAR report, say you have lab results from Mr. Waters office visit today, and his INR is high. Give five milligrams of vitamin K subcutaneous stat and you'll be there in about fifteen minutes.