



...physicians and trainees participated in a day long procedural training course that utilized commercially available and homemade task trainers to teach pericardiocentesis, chest tube insertion, cricothyroidotomy and central line insertion” Shefrin et al (2015).

Abstract:

BACKGROUND: Pediatric emergency medicine (PEM) physicians have minimal experience in life saving procedures and have turned to task trainers to learn these skills. Realism of these models is an important consideration that has received little study.

ReTweet if useful... Comparison of commercially available and homemade clinical skills trainers <http://ctt.ec/b0U1F+> @ivteam #ivteam

Click To Tweet

METHOD: PEM physicians and trainees participated in a day long procedural training course that utilized commercially available and homemade task trainers to teach pericardiocentesis, chest tube insertion, cricothyroidotomy and central line insertion. Participants rated the realism of the task trainers as part of a post-course survey.

RESULTS: The homemade task trainers received variable realism ratings, with 91% of participants rating the pork rib chest tube model as realistic, 82% rating the gelatin pericardiocentesis mold as realistic and 36% rating the ventilator tubing cricothyroidotomy model as realistic. Commercial trainers also received variable ratings, with 45% rating the chest drain and pericardiocentesis simulator as realistic, 74% rating the crichotracheotomy

trainer as realistic and 80% rating the central line insertion trainer as realistic.

CONCLUSIONS: Task training models utilized in our course received variable realism ratings. When deciding what type of task trainer to use future courses should carefully consider the desired aspect of realism, and how it aligns with the procedural skill, balanced with cost considerations.

Reference:

Shefrin, A., Khazei, A. and Cheng, A. (2015) Realism of procedural task trainers in a pediatric emergency medicine procedures course. Canadian Medical Education Journal. 6(1), p.e68-73. eCollection 2015.

Thank you to our partners for supporting IVTEAM

