

Patient Name: Anton Moore

Diagnosis: hip fracture, swallowing difficulties

Overview of
Scenario
Simulated Patient

Overview

Target Audience: 2nd year students from nursing, physiotherapy, social work and speech pathology

Number of Participants: 8 students (2 from each course), 1 simulated patient playing role of Anton Moore

Estimated time in simulation: 2 x 30 minute periods (Part A and Part B)

Setting: orthopaedic ward in a large metropolitan hospital

Brief summary of scenario

Hip fractures are a common occurrence in Australia. Every day, more than 40 Australians break their hip, with most being aged over 65 years. Hip fractures almost always necessitate a hospital admission and some kind of surgery to repair the fracture. Significant morbidity and mortality is associated with hip fractures; of the 40 people experiencing hip fractures each day, two will die in the hospital and at least four will need to go into a residential aged care facility, either while they recover or permanently. A year later, less than half will be able to walk as well as they did before the fracture, and another six or seven will have died. Hip fractures most commonly occur as a result of a fall, and osteoporosis is a major risk factor.

This case presents an elderly male who experienced a fall at home, leading to a fractured hip. The scenario starts on the first day after surgery to repair the fracture. In Part A, students from nursing and physiotherapy will work together to minimise his experience of pain and assist in the commencement of early walking, an important factor in enhancing recovery. During the patient encounter, it will be revealed that the patient has developed difficulty swallowing and that he has not been managing at home since the recent death of his wife. Following the encounter, students will be directed to collaborate regarding the patient's potential for discharge home and to identify the need for involvement of other health professionals. The overall aim for the students is to ensure the best possible outcome for the patient.

Part B of this scenario focusses on the third day after operation, when referrals to a range of health professionals have been made. Students from social work and speech pathology will action these referrals and assist in providing patient-centred care. The focus for social work will be establishing if the patient will manage at home upon discharge and for speech pathology it will be assessing the patient's swallowing function to determine if an abnormality exists.

This project was possible due to funding made available by Health Workforce Australia

Patient story (Part A)

Anton Moore is a 76 year old male who lives at home alone, following the recent death of his wife Lindsay. Yesterday morning when getting out of bed to go to the toilet, Anton suffered a fall. He found himself in a considerable amount of pain and was unable to reach the telephone. Anton's neighbor Serena heard his calls for help and called the paramedics. Anton had recently informed Serena of the location of a hidden spare key to his home, should an emergency arise. Serena was able to let herself into his home and attend to Anton until the paramedics arrived.

The paramedics took Anton to the Emergency Department of the nearest hospital. Upon admission he was found to be alert and oriented. He did not recall losing consciousness, but was vague about the events leading to the fall. Anton complained of severe pain in his left hip (10 out of 10 when asked) and a slight rotation of his left leg was noticed. He was sent to radiology, where a fracture (break) of his left hip was diagnosed upon x-ray. Anton was reviewed by an orthopaedic surgeon, Mr Jones, who explained that surgery would be required to repair the hip. That afternoon, Anton was taken to theatre to have a dynamic hip screw (a metal screw) inserted into his hip bone via spinal anaesthesia (this type of anaesthesia is like an epidural, you remain awake during the surgery but can't feel anything below the waist). Following a short period on the recovery ward, Anton was transferred to the orthopaedic ward.

Today is the first day after Anton's surgery. Mr Jones completed his ward round this morning and was pleased with Anton's postoperative recovery. He has requested that Anton commence getting out of bed and walking with the assistance of the physiotherapists this morning. The acute pain service (a team of people who assess and manage control of pain after surgery) also completed their ward round and stopped / removed his PCA (patient controlled analgesia – intravenous morphine which patients deliver to themselves by pressing a button). They have recommended that Anton commence on tablets to manage his pain, and added the medications Endone (strong pain relief) and Paracetamol (Panadol – mild pain relief) to his medications chart.

Anton is a retired builder who lives in his own home in Carlton. He was born in Scotland and immigrated to Australia over 40 years ago after meeting his wife Lindsay. Six months ago, Lindsay passed away from breast cancer. Anton does not have any children or family in Australia. He lives a rather solitary life with his aged dog Archie. The only person that Anton appears to have regular contact with is his neighbor Serena.

Anton visits Serena's house most mornings for tea and toast. Serena was close to Anton's wife Lindsay and has noticed a significant change in Anton and the state of his house since her passing. She called the ward this morning to check on Anton's progress. When speaking to the nurse in charge she mentioned that Anton's house has become quite messy and smelly and that did not appear to be any food in the house. Serena was concerned that Anton was not taking good care of himself and that he has become very isolated.

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Learning objectives (Part A)

When participating in this simulation, it is anticipated that the students will achieve the following objectives:

Interprofessional

- Interpersonal and Communication Skills:** Communicates sensitively in a responsive and responsible manner demonstrating the interpersonal skills necessary for interprofessional collaboration
- Patient-Centred and/or Family-Focused Care:** Through working with others negotiates and provides optimal integrated care by being respectful of and responsive to patient/client and/or family perspectives, needs and values
- Collaborative Decision Making:** Establishes and maintains effective and healthy working partnerships with other professionals whether or not a formalised team exists
- Roles and Responsibilities:** Consults, seeks advice and confers with other team members based on an understanding of everyone's capabilities, expertise and culture
- Team Functioning:** Uses team building skills to negotiate, manage conflict, mediate between different interests and facilitate building of partnerships within a formalised team setting

In addition, students will focus on objectives from their own profession.

Discipline Specific - Nursing

- Conduct an assessment of a patient's pain status following surgery for hip fracture
- Administer medications for managing pain after hip surgery

Discipline Specific – Physiotherapy

- Conduct an assessment of the postoperative patient in preparation for moving out of bed and walking
- Provide education to the patient regarding safe and appropriate movement after hip surgery
- Assist the patient to get out of bed, walk using a walking aid and sit in a chair

Setting (Part A)

The setting is an orthopaedic ward in a large metropolitan hospital.

The patient will start the scenario in bed.

An intravenous line will be attached to your arm.

A wound dressing will be placed on the side of your left hip – this is the incision used for the surgery.

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You will be wearing white stockings on your feet – these are usual for patients in hospital and serve the purpose of preventing blood clots in the legs.

You will be wearing a hospital gown (which we will provide). You may wear underwear / shorts and a singlet under the gown. Please bring along a pair of slip on shoes / slippers to wear on your feet when out of bed.

You will be shown how to use a walking aid – most likely a walking frame with wheels. You have not used one of these before.

Start, Middle and End (Part A)

The scenario will start with the nursing students entering the room.

After 10 minutes the physiotherapy students will enter the room.

30 minutes after the scenario has started, a staff member will come in and tell the students that you need to go over to x-ray. This will be the end of the scenario for Part A.

After Part A, the students will be taken away for a period of discussion. A new group of students will enter the room approximately 30 minutes later to start Part B.

Patient story (Part B)

Anton Moore is a 76 year old male who was admitted to hospital following a fall three days ago. The fall left him with a broken hip, which was surgically repaired in a procedure completed by the orthopaedic team. Anton has recovered well from the operation. He began walking with the physiotherapist on the first day after surgery and is now able to walk from his chair to the bathroom using a walking frame. His pain has been well managed and he no longer requires continuous pain medication.

Since his admission, Anton has described difficulty with swallowing liquids. One the first day after operation he was noted to cough and splutter when attempting to take his pain medications with water. His medications have now been either crushed and given to him by spoon or delivered intravenously. It has been noted that he is eating very little of his meals. Anton denies having difficulty swallowing in the past. It has been queried whether this change is related to the cause of his fall, however to date, no investigations have been performed.

Anton's neighbor Serena has rung the ward daily to check on his progress. When speaking to nursing staff she has voiced her concerns about Anton not looking after himself well since the death of his wife Lindsay six months ago. Serena reports Anton's house to be messy and unkept. She has noticed very little food in the house and that Anton has lost a significant amount of weight recently. She provides him with toast and tea most mornings when he visits her house, but has not raised her concerns with him as she does not want to interfere. Serena is looking after Anton's dog Archie while he is in hospital.

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Learning objectives (Part B)

The interprofessional learning objectives remain the same as Part A

In addition, students will focus on objectives from their own profession.

Social Work

- Establish the patient's current home situation, including supports, services and usual activities
- Assist the patient in planning for discharge home

Speech Pathology

- Conduct an assessment of the patient's ability to swallow a variety of textures including liquids, purees and solid foods

Setting (Part B)

The setting is an orthopaedic ward in a large metropolitan hospital.

The patient will start with the patient sitting in a chair

An intravenous line will be attached to your arm.

A wound dressing will be placed on the side of your left hip – this is the incision used for the surgery.

You will be wearing white stockings on your feet – these are usual for patients in hospital and serve the purpose of preventing blood clots in the legs.

You will be wearing a hospital gown (which we will provide). You may wear underwear / shorts and a singlet under the gown. Please bring along a pair of slip on shoes / slippers to wear on your feet when out of bed.

Start, Middle and End (Part B)

Students from speech pathology and social work will be given 30 minutes in total to assess the patient. It will be up to the students to determine the order in which they visit they patient, or if they visit together.

After 30 minutes, a staff member will stop the scenario. Students will be taken to another room to debrief the scenario.

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