

Escape Room Professionals 2024



Supplies:

TABLE 1

- 1) Lock box
- 2) Three number lock
- 3) Invisible ink marker
- 4) UV black light flashlight
- 5) Training insulin pen
- 6) Alcohol wipes
- 7) Gauze
- 8) Sharps container
- 9) Gloves
- 10) Hand sanitizer

TABLE 3

- 1) Catheter and drainage system
- 2) Leg bands
- 3) Lock box
- 4) 4 letter lock
- 5) NS flushes
- 6) Hand sanitizer
- 7) Gloves
- 8) Face shield
- 9) Gowns

TABLE 2

- 1) Lock box
- 2) Five letter lock
- 3) Dressings
- 4) Tape
- 5) Gauze
- 6) Large container ointment
- 7) Small med cups
- 8) Tongue blades
- 9) Separate small table
- 10) Mannequin
- 11) NS syringes for irritation.
- 12) Sharpie
- 13) Gowns
- 14) Gloves
- 15) Chuck pad
- 16) Hand sanitizer

TABLE 4

- 1) Padlocks with keys (6)
- 2) Hasp lock
- 3) Lock box
- 4) Clues

Scenario 1:

Mr. Gomez is a 57-year-old male with a history of HTN, DM II and COPD. This is day three of admission for a COPD exacerbation. He had one episode of nausea around 9 p.m. Overnight, he has been a real PUZZLE to deal with for the nursing staff as he has been getting up frequently and forgetting to ask for help. Good luck in PIECING together information in this room. Let's go on a mission to prevent infections during Mr. G's hospital stay!

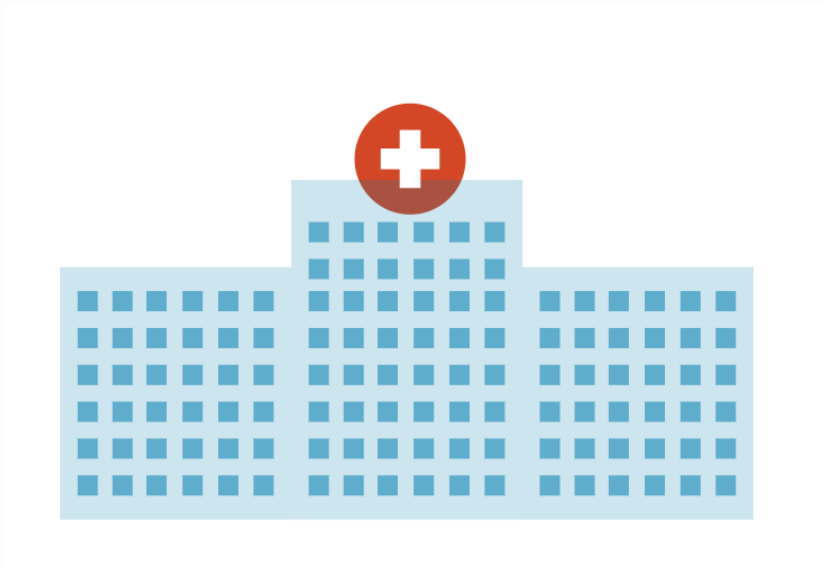


Table 1 Run-Through:

Facilitator Read Aloud:

“Cold and clammy need some candy. Hot and dry sugar high. Mr. Gomez is sleeping so use the light to check his blood glucose.”

- Use an invisible black light ink marker to write a blood sugar reading on the screen.
- Participants will need to read meter with black light (**260**) and use this number to unlock box.
- Inside of lock box will be sliding scale and insulin pen/supplies.
- Participants should verbalize how many units of insulin the patient would need and demonstrate how to administer insulin following good IPC practices.
- Posters on wall regarding how to administer insulin and IPC reminders for both checking blood sugar and administering insulin!

Scenario 2:

Mr. Gomez has recently undergone a below the knee left leg amputation secondary to ulcers on his feet and peripheral artery disease of his lower legs. The doctors were able to save his right leg, but his ulcer needs to be irrigated and a new dressing applied every shift for a stage 3 pressure ulcer on his heel.



Table 2 Run Through:

Facilitator Read Aloud:

“You are not doomed yet. Be sly as a fox to get into the wound care box.”

“Remember- hand hygiene should be performed:

Before and after wound care, even if gloves will be worn.

After removal of PPE, including if gloves are changed during the procedure.

We must make sure that throughout our wound care routine that our hands are always **“CLEAN.”**

Participants should remove the old dressing and redress Mr. G’s heel ulcer following good IPC practices. Make sure they are performing good HH and wear all necessary PPE for irrigating a wound (gown, gloves, face shield) If steps are missed, you can stop participants and ask them what they should have done before moving on. Once complete- can move to next table.

PHYSICIAN ORDER

Physician: Grey, Meredith

123 Legendary Lane
Bismarck, ND 58503
Phone (701) 890-7711
NPH:123123123

Patient: Gomez, Glen G

DOB: 2/1/1967
MRN: GG02011967

Order Date: 4/23/2024

Order # 123432123

Allergies: Peanuts

Summary: POC Order Changes to Wound Care (see full details below)

Irrigate pressure ulcer to right heel with normal saline, pat dry, loosely pack with moistened normal saline gauze. Apply thin layer of ointment on dry gauze and cover area. Follow by a dry gauze and secure with tape.

Physician Signature:

Dr. M. Grey

Date: 4/23/2024

4/23/24

Scenario 3:

After Mr. Gomez's leg amputation, he is having difficulty with urinary retention and emptying his bladder, so his doctor ordered a urinary catheter be placed.

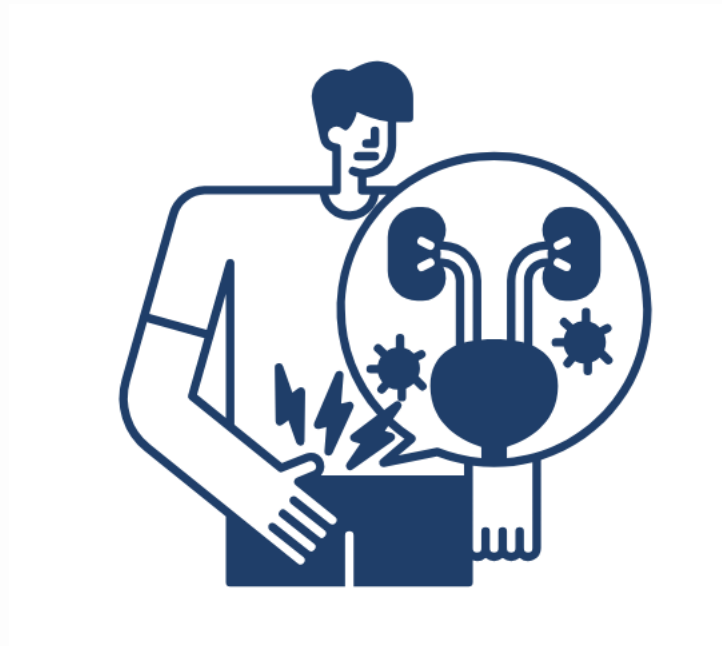


Table 3 Run Through:

Facilitator Read Aloud:

“To reduce the _____ **(RISK)** of a catheter associated urinary tract infection or CAUTI, it’s important to follow best practice recommendations for insertion and maintenance.”

- Open lockbox- find crossword- complete it.
- Letters from answers on crossword will give you word needed to open lock box on table 4.

Table 4 Run Through:

Code above opens lock box that has 6 clues in it. All IPC related and they must solve all accurately to unlock hasp.

Facilitator Read Aloud:

“You’re almost there don’t despair- once you solve all six clues, victory to you!”

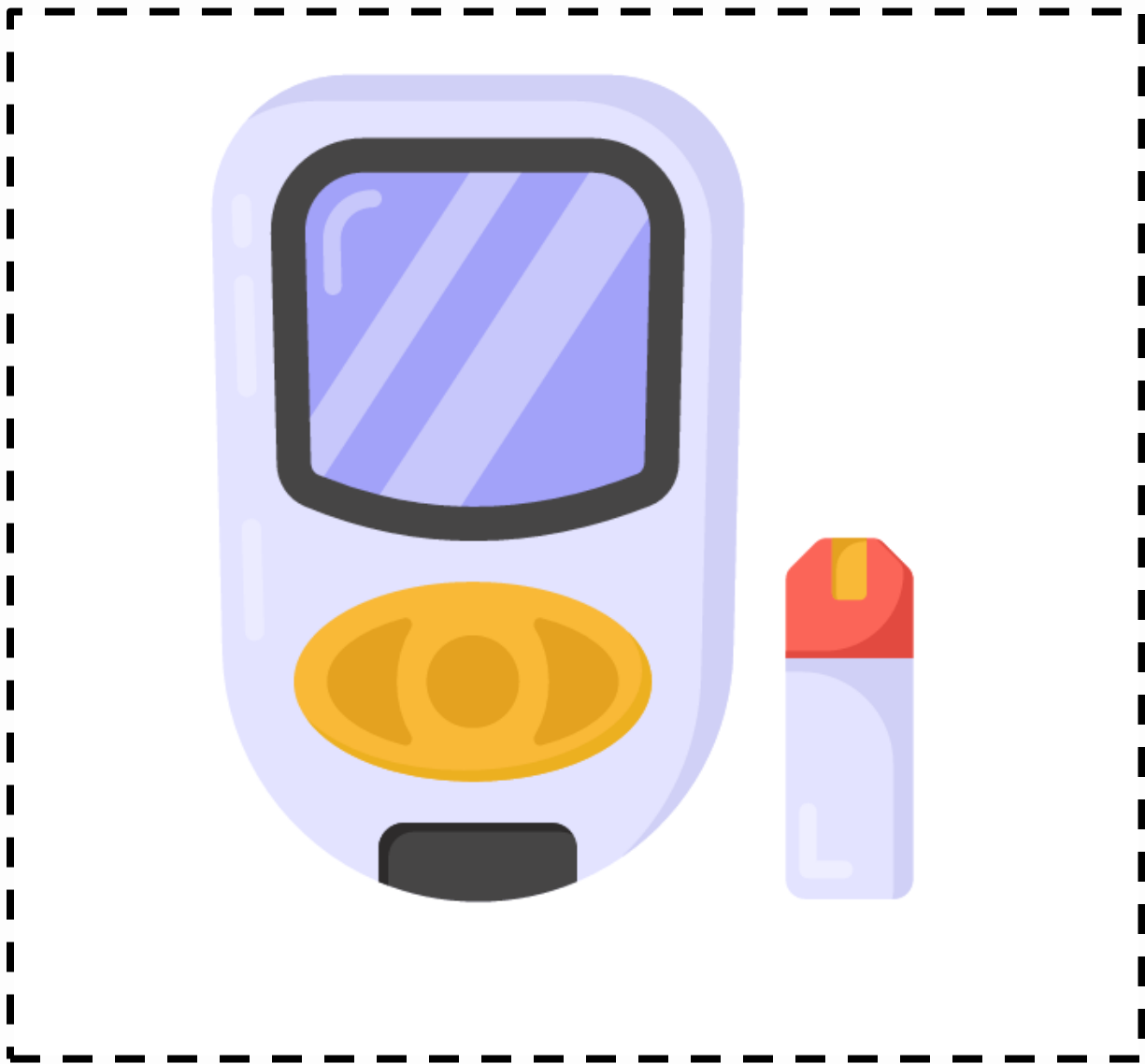
Facilitator can give a key to participants when they solve each clue. Keys will be labeled with numbers 1-5 and locks will also be numbered. Once they opened the lock box- will get a poster with congrats- you escaped, and we will write their time on it!

- Clue 1- An **alcohol-based hand sanitizer** is the preferred method for cleaning your hands when they are not visibly dirty.
- Clue 2- **Gloves** are not a substitute for cleaning your hands.
- Clue 3- **Standard Precautions** is the minimum infection prevention practices that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where health care is delivered. This should be used during all wound care procedures.
- Clue 4- Fingerstick devices, insulin pens, needles, and syringes are **single use devices** and should never be used for more than one person.

- Clue 5- The most important risk factor for developing a catheter-associated UTI (CAUTI) is prolonged use of the urinary catheter. Therefore, catheters should only be used for appropriate indications, assessed for need **daily**, and should be removed as soon as they are no longer needed.
- Clue 6- Wound carts should never enter the patient/resident room and any supplies brought into the patient/resident room should be **dedicated or discarded**.

TABLE 1:

Write 260 on BG meter screen with invisible ink.



Physician orders sliding scale.

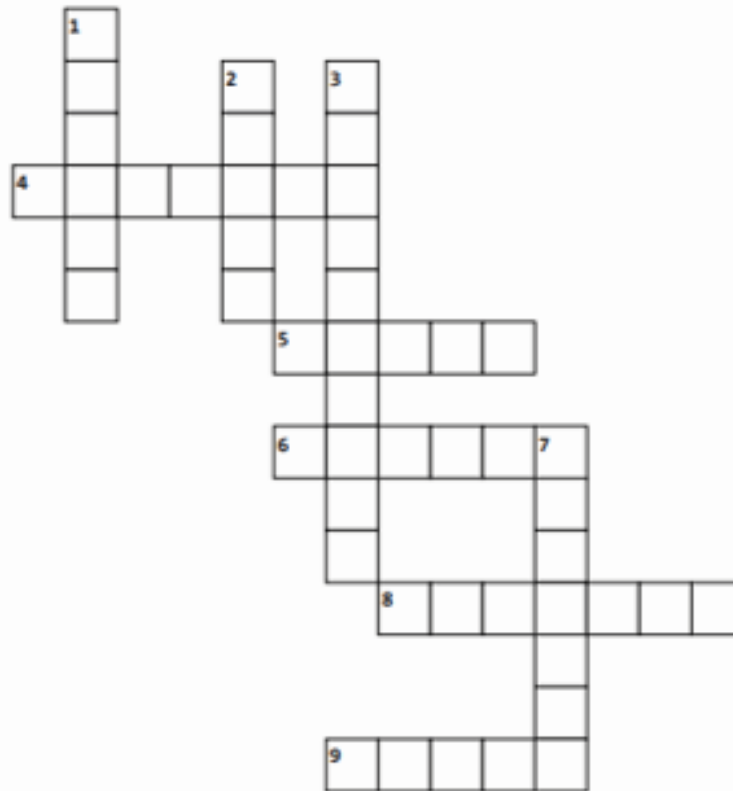
BG was 260. Mr. G will need 6 units of insulin.

Sliding Scale Insulin Protocol

Blood Glucose Level, mg/dL	Human Insulin, IU^a	Additional Action Requested
0-80	0	1 Ampule of D50, call physician
81-100	0	No action
101-150	0	No action
151-200	2	No action
201-250	4	No action
251-300	6	No action
301-350	8	No action
351-400	10	No action
>401	12	Call physician

CAUTI Crossword

TABLE 3:



Across

- 4. Technique used for insertion
- 5. The drainage tubing should be kept _____ the level of the bladder
- 6. Some of the signs and symptoms of UTI are fever, rigor, flank pain and altered mental _____
- 8. If a catheter is no longer indicated, it should be _____
- 9. Keep the drainage tubing free from _____

Down

- 1. Maintain a sterile, continuously _____ drainage system
- 2. Use soap and _____ to perform pericare daily
- 3. Catheter care should be _____ in the EMR
- 7. Scrub all connections between catheter and the drainage tubing for at least 20 _____

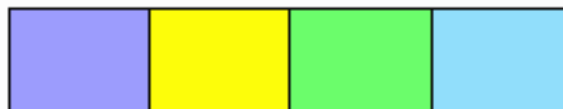


TABLE 4

Clue 1

_____ - _____ is the preferred method for cleaning your hands when they are not visibly dirty.

Clue 2

_____ are not a substitute for cleaning your hands.

Clue 3

_____ are the minimum infection prevention practices that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where health care is delivered. This should be used during all wound care procedures.

Clue 4

Fingerstick devices, insulin pens, needles, and syringes are _____ - _____ and should never be used for more than one person.

Clue 5

The most important risk factor for developing a catheter-associated UTI (CAUTI) is prolonged use of the urinary catheter. Therefore, catheters should only be used for appropriate indications, assessed for need _____, and should be removed as soon as they are no longer needed.

Clue 6

Wound carts should never enter the patient/resident room and any supplies brought into the patient/resident room should be _____ or _____.

Each team will receive a congrats poster- will need to write team name and official time they finished in.

