Resident Perception of Respiratory Therapist Directed Asthma Protocol Weaning and the Impact on Education

Simone Warrack  
*University of Nebraska Medical Center*

Nathaniel Goodrich  
*University of Nebraska Medical Center*

Lauren Maskin  
*University of Nebraska Medical Center*

Allison Ashford  
*University of Nebraska Medical Center*

Kristy Carlson  
*University of Nebraska Medical Center*

Follow this and additional works at: https://digitalcommons.unmc.edu/gmerj

Recommended Citation

https://digitalcommons.unmc.edu/gmerj/vol3/iss1/31

This Conference Proceeding is brought to you for free and open access by DigitalCommons@UNMC. It has been accepted for inclusion in Graduate Medical Education Research Journal by an authorized editor of DigitalCommons@UNMC. For more information, please contact digitalcommons@unmc.edu.
Resident Perception of Respiratory Therapist Directed Asthma Protocol Weaning and the Impact on Education

Creative Commons License

This work is licensed under a Creative Commons Attribution-Noncommercial-No Derivative Works 4.0 License.

This conference proceeding is available in Graduate Medical Education Research Journal: https://digitalcommons.unmc.edu/gmerj/vol3/iss1/31
Conclusions: Our findings suggest phenotypic and behavioral alterations associated with chronic midazolam exposure, namely reduced body weight and head circumference, as well as increased obsessive compulsive and anxious behaviors in the midazolam group. Future directions for our ongoing study are to assess molecular and biochemical effects on synaptogenesis.

https://doi.org/10.32873/unmc.dc.gmerj.3.1.012

Patient Safety Ward of Woe: Using Gamification to Reinforce Patient Safety at a Large Academic Hospital
Grant A. Turner\(^1\), Julie Fedderson\(^2\), Bethany Lowndes\(^3\)
\(^1\)University of Nebraska Medical Center, College of Medicine, Department of Internal Medicine, Division of Pulmonology
\(^2\)University of Nebraska Medical Center, College of Medicine, Department of Internal Medicine
\(^3\)University of Nebraska Medical Center, College of Medicine, Department of Neurological Sciences

Mentor: Julie Fedderson
Program: Internal Medicine
Type: Original Research

Background: Healthcare organizations have many priorities including the education and reinforcement of patient safety and The Joint Commission National Patient Safety Goals (NPSGs). Patient safety escape rooms add gamification to educational programs, adding relevant skills in an enjoyable format. At our institution, all employees undergo patient safety training. We created the “Ward of Woe” to reinforce this training by incorporating errors that were clinical and non-clinical, common and uncommon, and related explicitly to NPSGs.

Methods: In March 2020, an escape room was created using already present materials. All employees were invited to the event. Before entering, the participant was given an SBAR containing information on the simulation. The room contained over 100 errors; each participant was asked to document five. Afterward, the participant was given a small prize. A survey to gather opinions was sent one week later.

Results: 147 participants participated in the event. 87% of residents felt the training was relevant to their job and 82% felt it helped them learn about patient safety; 38% thought it changed their opinion on patient safety. The percentage of clinical or non-clinical errors did not differ between types of participants.

Conclusions: We were able to take previously described patient safety escape rooms, incorporate NPSGs from The Joint Commission, and create a system-wide educational event. This inexpensive event was felt relevant and educational by participants and easily replicated and scaled to other healthcare organizations. Future interventions can work on making virtual offerings and determining the long-term effects of these interventions.

https://doi.org/10.32873/unmc.dc.gmerj.3.1.014

Resident Perception of Respiratory Therapist Directed Asthma Protocol Weaning and the Impact on Education
Simone Warrack\(^1\), Nathaniel Goodrich\(^1\), Lauren Maskin\(^1\), Allison Ashford\(^1\), Kristy Carlson\(^2\)
\(^1\)University of Nebraska Medical Center, College of Medicine, Department of Pediatrics
\(^2\)University of Nebraska Medical Center, College of Medicine, Department of Otolaryngology

Mentor: Nathaniel Goodrich
Program: Pediatrics
Type: Original Report

Background: Children’s Hospital and Medical Center has been utilizing an asthma exacerbation pathway in the inpatient setting for several years. In October 2019 respiratory therapist (RT)-led albuterol weaning was implemented. Though several studies have been published on RT-led weaning of albuterol treatments, the key metrics reported thus far have included cost, length of stay, imaging, and use of steroids. Other studies have analyzed the implementation of pathways but not RT-led weaning protocols on resident education. To our knowledge, our study is the first to attempt to examine the impact of an RT-led weaning protocol on resident education.

Methods: Pediatric and Medicine-pediatric residents completed electronic anonymous surveys with subjective and objective questions to assess resident comfort and knowledge. Follow-up focus groups were conducted to allow for open dialogue regarding the RT-led weaning protocol.

Results: Fifty seven percent of residents responded to the survey. Most residents felt comfortable assessing and weaning asthmatics. The objective questions revealed that 57% of residents correctly calculated respiratory scores and a majority of residents could pinpoint when to wean or escalate treatment. Notably, 11% of residents participated in the focus groups.

Conclusions: Most residents felt comfortable caring for asthmatics and agreed that pathways or protocols support resident education. The residents indicated that hands-on learning was a large component of their education but expressed a need for team approach in asthma care. This study was limited by the fact that few participating residents had actual experience with RT-led albuterol weaning.

https://doi.org/10.32873/unmc.dc.gmerj.3.1.013