# Triage Simulation for Emergency Preparedness Training

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# **Appreciation**

#### Collaboration

- Hamilton Consulting
- **National Capital Area Medical Simulation Center**
- Advanced Simulation Corporation
- Numerical Data Laboratories

## **Support**

- Office of the Secretary of Defense Health Affairs
- RTI International, Internal R&D
- Telemedicine and Advanced Technology Research Center
- National Science Foundation
- Agency for Healthcare Research and Quality
- National Medical Technology Testbed





# What is a Disaster

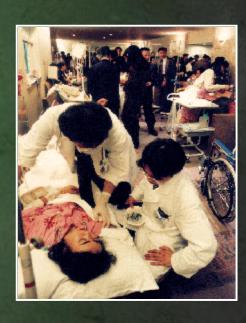
"Any situation where existing resources do not meet resource needs."



Community



Scene



Facility





## **Medical Disasters**

## Multiple Injuries

- Large number of casualties per medical provider
- Different and/or combined injuries

## **Inadequate Resources**

- Limited personnel and/or competencies
- Limited facilities, equipment, and supplies
- Delay in transport, delay in definitive care

### Other concerns

- Scene safety
- Biological or chemical contamination
- **Fatigue**, emotional stress





# **Triage Simulation - Objectives**

## Knowledge

- Familiarize clinical personnel with triage procedures
- Recognize injuries, and anticipate complications

#### Skills

- Practice assessment and treatment protocols
- Practice triage protocols (e.g., MASS, START,..)

#### **Attitude**

- **Gain experience in multiple-casualty scenarios**
- **Gain experience in managing limited resources**
- Gain confidence in triage decision-making
- integrate learned knowledge through experience





## **Integrated Curriculum**







## **Sim-Patient - Trauma Patient Simulator**

- Case-based scenarios
- Occupation-based protocols
- Configurable medical materiel
- Interactive patient assessment
- Interactive medical devices
- Responsive physiology
- Learning mode
- After-Action Review



Gunshot casualty with hemorrhage and pneumothorax





# Skin texturing of clinical signs & injuries



**Extremity fracture** 



**Abdominal penetration** 





# **Casualty Behavior – Clinical Signs & Symptoms**













## **Physiology Models**

(Extended ASC BODY, Smith and Starko)

#### Cardiovascular

- ı beating heart
- arterial & venous compartments
- ı circulating blood transport
- i tissue compartments

#### Respiratory

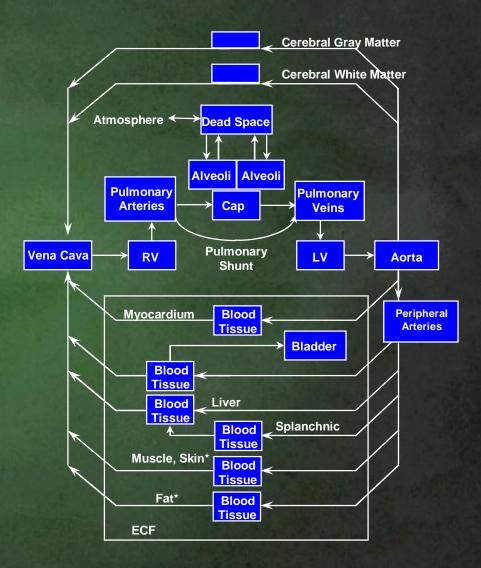
- ventilation waveforms
- ı O2 / CO2 gas exchange
- O2Hb transport / O2 dissociation
- O2 utilization / CO2 production

### Pharmacological

- IV, IM, and resp. routes
- metabolism and excretion
- Rx effects (CV, neural, muscular)

#### Other

- level of consciousness
- ı cerebral pulse pressure







# Casualty Design (ATLS Criteria)

Case #	Primary Injury	Complications	Treatment Notes
1	Head, blunt trauma	Closed head injury	Evacuate
2	Head, penetration	Minor bleeding	First aid
3	Burn	Airway obstruction, fluid loss	airway and fluid management
4	Chest penetration	Pneumothorax, hemothorax	Thoracentesis, chest tube
5	Blunt trauma abdomen	Internal bleeding	Evacuate
6	Severe Orthopedic: pelvic and longbone	Internal bleeding, extremity function	Splint, evacuate
7	Thigh penetration: exit wound	Arterial bleeding, possible fracture	Pressure dressing, splint
8	Amputation	Arterial bleeding	Tourniquet
9	Panic	Anxiety reaction, hyperventilation	Calming, Rx, O <sub>2</sub>







# Features - Mass Casualty Simulator

- Triage Assess and Tag
- Multiple patient simulation
- Multiple physiology models
- Multiple patient care
- Medically-relevant animations
- Learning mode
- I After-Action Review







# Summary

- A multiple-casualty simulation system has been developed and demonstrated for practice of disaster casualty triage.
- Multiple-casualty scenarios can be effectively simulated using "gaming" computer technology (9 casualties in a 1 GB system)
- Virtual patient simulation offers a new capability for training and evaluating medical response to multiple-casualty events.





# **Thank You**

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