



Anesthesia and Surgery Clinical Simulation
Lexi Unknown Case
Simulation Prep Sheet
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Lexi is a 3 yr old, 34 kg F Lab X who presents for elective OVH.

Premedication: Hydromorphone 0.1 mg/kg + Acepromazine 0.05 mg/kg, IM

Induction: Propofol 3 mg/kg

Inhalant: Isoflurane

Pre Op: PCV=42, TP = 6.5, Temp 101.4, HR 110, RR 16, CRT < 2 sec, MM Pink, Fasted for 12 hr, Resuscitation Code = Basic

Fluids: LRS 5 mL/kg/hr using a 15 drop/mL IV set.

Objectives:

- Demonstrate ability to correctly place physiologic monitoring equipment on an anesthetized patient.
- Mark and maintain an anesthetic record for an anesthetized canine patient
- Manage an anesthetized patient undergoing abdominal surgery
- Respond to Heart Rate, Heart Rhythm and Blood Pressure Changes in a timely and appropriate fashion.
- Initiate direct communication with surgery room team members
- Demonstrate ability to calculate and deliver fluid administration rates

Critical Actions:

- Properly Connect ECG Leads using ECG gel
- Correctly place Pulse Ox probe
- Correctly place NIBP cuff
- Correctly place esophageal stethoscope
- Correctly place temperature probe
- Correctly place airway sampling line
- Connect and deliver IV fluids at proper rate
- Appropriately respond to patient physiologic changes during surgery and anesthesia.
- Recognize and troubleshoot any monitor errors
- Recognize and troubleshoot any anesthetic machine and circuit errors
- Communicate effectively with surgical team members.

Roles:

- Primary Anesthetist/ Secondary Anesthetist
- Surgeon/ Surgical Assistant

SIMULATION GROUND RULES:

- Scrubs, name badges.
- Simulation is clinical time, same guidelines apply.
- NO pens in simulation room; pencils are provided.
- Treat manikin like real patient.
- Vegas Rules Apply...What happens in simulation stays in simulation.