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IMSH Energy Encourages Expanding Simulation Boundaries

The Planning Committee welcomes attendees as IMSH continues for the next day and a half! The exciting and motivating schedule resumes, including keynote addresses, educational sessions, workshops, panel discussions, and meetings. The exhibit hall is open until 1:30 pm today, so don't miss the final opportunity to learn about and experience the latest healthcare simulation products and innovations.

Yue Dong, MD, said he and Planning Committee co-chairs Shelita Kimble, MEd, CHSOS, and Krista Anderson, MSN, RN, CHSE, devoted significant effort early in the planning process to develop the IMSH 2019 theme, *Redefining and Redesigning Healthcare Powered by Simulation*. "We're focusing on really pushing simulation forward, including beyond that for individual providers," he said. "We've accomplished much in simulation in the past 20 or 30 years, and not just in the U.S., but internationally as well.

"In these last two days of IMSH, we would like to challenge attendees to think about how we can push the boundaries of simulation



even further," he added.

The keynote speakers today and Wednesday will reinforce that challenge.

This morning's Michael S. Gordon Center Lecture on Medical Education features Joel Selanikio, MD, practicing physician, technologist, entrepreneur, and innovator in global health and technology. Selanikio will illustrate how advances in information technology will impact healthcare, and the implications of those transformations for simulation systems, in his keynote address, *The Future of Healthcare (and Health)*. Bridging the worlds of healthcare, global health, and technology, he will illuminate the application of artificial intelligence, big data, cloud computing, and mobile technology to health and healthcare, and the impact of these technological advances on global healthcare access.

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Scene from IMSH EXPO

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Bob Armstrong, Incoming President-Elect

As the Incoming President-Elect for the Society for Simulation (SSH) in Healthcare, Bob Armstrong comes to IMSH 2019 with a range of personal goals and challenges for IMSH attendees.

In terms of his role at IMSH, Armstrong said that he hopes “to survey what’s going on in the Society, where the major interest areas are located, where are the things that have people most excited, and then explore how to dovetail those types of things into what I believe are the strategic directions in which the Society needs to go.

“Those are the kinds of things that I’ll be helping to think about, and hopefully leading us towards, over the next couple of years,” he said.

Acknowledging that the 2019 agenda “really belongs to Incoming President KT Waxman,” he added, “What I want to be able to do is to build off of what Joe Lopreiato has been able to accomplish and what KT is planning to accomplish, really thinking strategically about the direction of the Society. That includes the strategic direction of the IMSH event, which is not quite the society, but is a broad reflection of what we do.”

He continued, “I believe that what the Society leadership is supposed to do is not only think about how we get through the next year, but how we set ourselves up for long term success in a strategic way. That doesn’t mean you ignore today. But it definitely requires you to have to think about where the membership wants to go and where we should go based on our mission and purpose.”

He said that the IMSH 2019 theme, much like previous themes, “speaks to the level of commitment and dedication that our members have towards the value proposition of simulation in healthcare, which is really all about improving the quality of care that people deliver, by helping them learn easier, better, faster, and more comprehensively.

I see all of our themes resonating in that sort of capability that we want to get to as a society and as a membership, which is just to really be better at our jobs.”

His own message and challenge for IMSH attendees is: “Take absolutely full advantage of everything that the experience at IMSH offers, both the high quality educational content that our members bring as well as making as many connections within your peer groups and with your fellow members as possible.

“It’s those connections that you make that will also really help you enjoy your time at IMSH,” he said. “And they will be very, very fruitful for you later on. You never know who you’re going to be talking to that might have an answer

to a question that you’re not even going to ask for another six months. But because you made a connection with someone, you’ve now got a personal ability, a friendship built that allows you to rely on and call on that friendship. And quite frankly, even above and beyond that, just the pure friendships that you develop are amazing. I personally have been able to become



Bob Armstrong

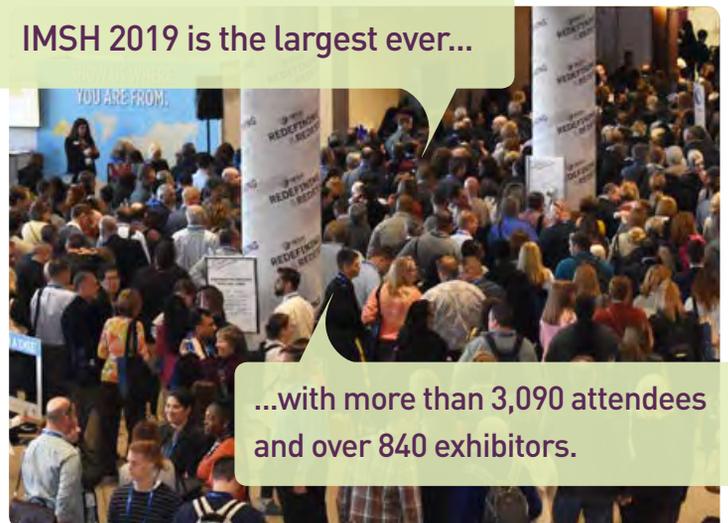
“[I hope] to survey what’s going on in the Society, where the major interest areas are located, where are the things that have people most excited, and then explore how to dovetail those types of things into what I believe are the strategic directions in which the society needs to go.”

friends with some really remarkable people, people that I cherish as much as some of the folks I served with in the Marine Corps. These are really dedicated, smart, intelligent people at IMSH. And I stay in contact with them all throughout the year. It’s really kind of a wonderful thing. So, don’t lose that opportunity.”

For SSH members unable to attend IMSH 2019, he suggested that they reach out and get as much information as possible from their co-workers who were able to attend.

“Additionally, always make sure that you’re looking through the *Simulation in Healthcare Journal* to learn about current activities and explore some of the more cutting-edge things that are going on. Stay engaged that way. Just because you can’t come to IMSH doesn’t mean you cannot effectively and with value engage yourself in the society. So remain engaged by all means. And definitely try to come next year.”

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IMSH DAILY

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Twitter: @IMSHdaily

Editor: Scott Gourley
imshdaily@tsmpartners.com

Co-Editor:
Galia (Gail) Gourley, BSN, RN
imshdaily@tsmpartners.com

Art Director: Kirk Fetzer
kirk@fetzergroup.com

Advertising Sales: Tom Reil
tom@tsmpartners.com

SSH/IMSH: Andrew Spain
aspain@ssih.org

Publisher: Mark Larson
mark@tsmpartners.com



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MONDAY PLENARY SESSION

Setting the Human Tone

Monday morning's plenary session opened with a greeting from the IMSH 2018 Planning Committee leads, Krista Anderson, Yue Dong, and Shelita Kimble.

After thanking the audience and the live-streaming sponsor of yesterday's opening session, *HealthySimulation.com*, Anderson reiterated some thoughts from Sunday's opening speaker, Professor Tali Sharot, that "We must be careful not to be constrained by our own optimism bias.

"We're all here," Anderson continued. "And we believe in the value of what we do in simulation. So, as we move forward, as we lead and advocate, let's find common ground. Let's highlight the opportunities for progress and then reframe our message so that we have an immediate reward, or at least one that we can anticipate." She went on to highlight the new learning opportunities introduced at IMSH 2019.

The introductions set the stage for

Christine Park, MD, SSH Immediate Past President, who introduced the new Healthcare Simulationist Code of Ethics that has been developed by a globally-based group of authors that initially got together in January 2018.

"The group included almost 50 people across six continents, from multiple

healthcare professions and from multiple different modalities in simulation," she said. "We also worked closely with our industry partners as well as ethicists."

Explaining that codes of ethics are fundamentally self-imposed through voluntary adoption by professional groups and organizations, she highlighted that, as of Monday morning, 19 simulation societies around the world had voluntarily elected to adopt the new code.

"In fact, the power of a code of ethics is that they are self-imposed," she said. "Fundamentally they are aspirational. They express values that are important in peer-to-peer relationships as well as professional responsibility."

Following the development of the code, Park said that the next steps involve translation and annotation.

Noting that translation will improve accessibility in dissemination of the code,

Continued on page 11



Schedule Highlights TUESDAY: JANUARY 29

Keynote Address: The Michael S. Gordon Center Lecture on Medical Education featuring Joel Selanikio
Stars at Night Ballroom: 8:30 - 9:45 am

IMSH EXPO
Exhibit Hall 1: 10:00 am - 1:30 pm
Lunch - 11:30 am - 1:30 pm

Couch Conversations
2nd Floor Concourse - Why Accreditation Matters: 11:30 - 11:45 am; STEM Outreach Strategies: 2:30 - 2:45 pm

Documentary Film: To Err is Human
Lila Cockrell Theatre: 3:00 - 4:30 pm

Silent Discos
Stars at Night Ballroom - Serious Games and Virtual Environments: 10:00 - 11:30 am; Educational Theory: 1:30 - 2:30 pm; IPE: 3:00 - 4:30 pm; Technical Operations: 3:00 - 4:30 pm

WEDNESDAY, JANUARY 30

Closing Plenary Session and Keynote Address featuring Michael Tschanz
Stars at Night Ballroom: 11:45 am - 12:45 pm

Couch Conversations
2nd Floor Concourse - Simulation Center Directors: 10:00 - 10:15 am

Silent Discos
Stars at Night Ballroom - Standardized Patients: 10:30 - 11:30 am

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IMSH Energy Encourages – continued from page 1

The Closing Plenary Session on Wednesday spotlights Michael Tschanz, director of technology and analysis with Design and Engineering at Walt Disney World. His keynote address, *Simulation-Based Attractions and Guest Experience Development*, will focus on key aspects of model-based designs and fundamentals of engineering methodologies. With examples based on developing transportation, ride, and animatronic systems, and emphasizing customer service, Tschanz will show how these principles apply to broader applications of modeling and simulation.

Dong explained that Tschanz expands modeling and simulation from designing individual attractions to “the whole enterprise for the entire theme park,” adding that the organizational approach to simulation, as well as the focus on serving patients, is directly applicable to healthcare.

Both speakers’ topics, said Dong, encourage the audience to “explore how we think about simulation and its application beyond traditional settings.”

He emphasized, “The challenge is not just technology. It’s really the mindset. Without us really wanting to embrace new ideas, even with the technology, we’re not going to make the change.”

Dong asserted that redefining and redesigning simulation extends beyond medical education. “The whole of healthcare is powered by simulation,” he said, citing applications “right now in the works” ranging from improving efficiency to designing medications or even whole facilities, and using a variety of modeling and simulation methodologies, such as digital twin technology.

“Simulation is a global community, and we are the leaders in this multi-specialty, multi-discipline collaboration,” Dong said, observing that professionals ranging from physicians and nurses to pharmacists and engineers communicate and collaborate here at IMSH, facilitating new discoveries and innovative ideas. “There are very few healthcare meetings as diverse as this conference.”

Dong highlighted noteworthy first-time ini-

tiatives at IMSH 2019, including the President’s Diamond Ball, the #SimFit 19 Fun Run/Walk, and the creative new educational formats such as Silent Discos and Couch Conversations. And, he pointed to another first - the live-streaming of the Opening Plenary keynote address - as an important example of the global reach of the conference, moving beyond physical boundaries.

When IMSH 2019 closes Wednesday afternoon, planning for IMSH 2020 will already be well underway. This year’s Planning Committee has been meeting with next year’s, sharing details and lessons learned to ensure continuity for the 20th IMSH celebration in San Diego, Dong said.

As this year’s meeting concludes, Dong expressed the committee’s appreciation to all who participated in IMSH 2019 and reiterated two important messages the co-chairs hope attendees will take from the conference. One is, he said, to push simulation technology beyond training only individuals. The other, he emphasized, is to reinforce “the mindset necessary to be open to new ideas, challenge the status quo, and be willing to risk failure, or ‘bumps in the road,’ for the future greater good of all healthcare.”



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Relatórios recentes da Organização Mundial de Saúde enfatizam a necessidade urgente de melhoria da formação, avaliação e acreditação para procedimentos cirúrgicos tecnologicamente dependentes, como a videocirurgia. A videocirurgia requer um processo de aprendizado bem estruturado, pois apresenta características específicas que exigem adaptações psicomotoras relacionadas à visão e ao ambiente. Utilizando simuladores simples, modelo animal e, mais recentemente, simulação realística e realidade virtual, a simulação é base fundamental do processo de ensino e aprendizagem e deve envolver a avaliação objetiva com uso de critérios e métodos validados.

Existem propostas pedagógicas consagradas que utilizam a simulação como fundamento e a problematização como método para o ensino da videocirurgia como o FLS da SAGES na América do Norte e o LSSP da EAES na Europa. Não existe no Brasil, no entanto, nenhum programa semelhante de treinamento e certificação em videocirurgia.

O autor apresenta projeto desenvolvido pelo Instituto Jacques Perissat (Paraná), Instituto de Educação e Pesquisa do Hospital Moinhos de Vento e Instituto SIMUTEC (Rio Grande do Sul) e UNIPEMEX (Brasília). O objetivo é implementar um programa nacional de treinamento básico padronizado de videocirurgia (ênfase na videolaparoscopia) como forma de disseminar o conhecimento e treinamento em videocirurgia, além de incrementar um processo de certificação obrigatória.

O "Treinamento Padronizado em Videocirurgia" (TPV) é composto por uma sequência de exercícios para desenvolvimento de habilidades e avaliação objetiva do desempenho, além de um treinamento de situações em videolaparoscopia com metodologias ativas de ensino baseado na resolução de problemas. Utilizando simuladores simples, pode embasar, complementar ou consolidar a formação do cirurgião

em videocirurgia de uma forma acessível. Além disso, possibilita a avaliação de desempenho e certificação profissional. A estrutura simples e de relativamente baixo custo também facilita a sua aplicabilidade mesmo em regiões mais remotas e economicamente pobres do Brasil.



Miguel Prestes Nacul
Instituto SIMUTECH
Porto Alegre, RS, Brasil

Recent reports from the World Health Organization emphasize the urgent need for improved training, assessment, and accreditation for technologically dependent surgical procedures, such as endoscopic surgery.

Endoscopic surgery requires a well-structured learning process, as it presents specific characteristics that need psychomotor adaptations related to vision and the environment.

Using simple simulators, animal models, and, more recently, realistic simulation and virtual reality, simulation stands as the fundamental basis of the teaching and learning process and should involve objective

evaluation using validated criteria and methods.

There are established pedagogical proposals that use simulation as a foundation and problematization as a method for the teaching of endoscopic surgery, such as SAGES FLS in North America and EAES LSSP in Europe. There is, however, no similar training and certification program in endoscopic surgery in Brazil.

The author presents a project developed by the Instituto Jacques Perissat (Paraná), Institute of Education and Research of Moinhos de Vento Hospital and SIMUTECH Institute (Rio Grande do Sul) and UNIPE-

MEX (Brasília). The objective is to implement a national standardized basic training program for endoscopic surgery (emphasis on laparoscopy) as a way to disseminate knowledge and training in endoscopic surgery, in addition to increasing a mandatory certification process.

“Standardized Training in Endoscopic Surgery” (TPV) consists of a sequence of exercises for skills development and objective performance evaluation, as well as training of endoscopic surgery situations (emphasis on laparoscopy) with problem-based teaching methodologies. Using simple simulators, it can base, complement, or consolidate the training of the surgeon in endoscopic surgery in an accessible way. In addition, it enables the evaluation of performance and professional certification. The simple and relatively low-cost structure also facilitates its applicability even in the most remote and economically poor regions of Brazil.

“...simulation and virtual reality, simulation stands as the fundamental basis of the teaching and learning process and should involve objective evaluation using validated criteria and methods.”



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Intubation Virtual Reality Simulator
3:00 p.m. – 7:00 p.m.

MONDAY, JANUARY 28

CadaVR-Anatomy Lessons in Virtual Reality
10:00 a.m. – 12:00 p.m.

Intubation Virtual Reality Simulator
12:00 p.m. – 5:00 p.m.

Augmented Reality Trainer for Sepsis
5:00 p.m. – 6:00 p.m.

TUESDAY, JANUARY 29

CadaVR-Anatomy Lessons in Virtual Reality
10:00 a.m. – 12:00 p.m.

Intubation Virtual Reality Simulator
12:00 p.m. – 1:30 p.m.

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Pioneers in Excellence

When it comes to the community of healthcare simulation, few awards or acknowledgements are as prestigious as the "Pioneer in Simulation" designation.

According to Paul E. Phrampus, MD (Past President, Society for Simulation in Healthcare [2013]), the "Pioneer in Simulation" honor recognizes people who have made foundational contributions to the healthcare simulation world.

"We see it as one of the highest honors in healthcare simulation," he said. Following the inaugural award presentation to Dr. Stephen Abramson at IMSH 2014, subsequent "Pioneer" honors have recognized the contributions of Dr. Michael Gordon [2015], Louis H. Oberndorf, MBA [2016], and

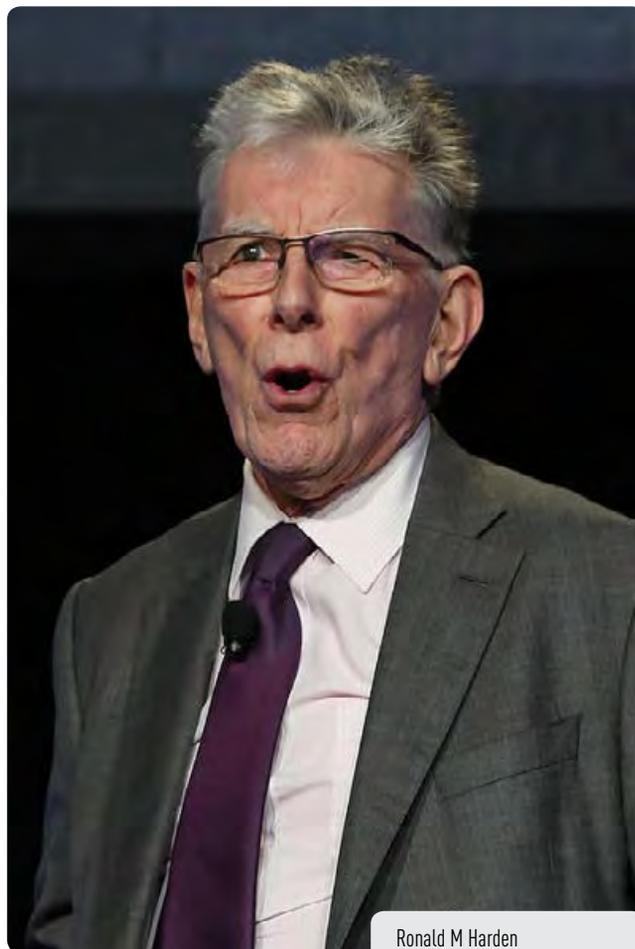
Dr. David Gaba [2017].

No award was presented in 2018, with Phrampus pointing to evolution of the honor being presented on a periodic rather than strictly annual basis.

"2019 marks the fifth award, which occurred as part of Sunday's plenary session," he added.

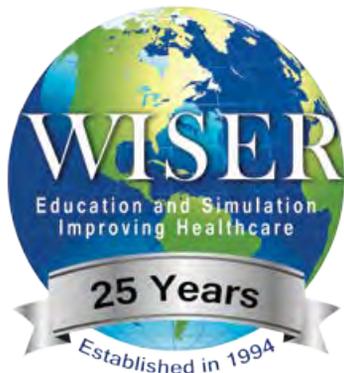
Phrampus went on to highlight the achievements of this year's award recipient, Ronald M Harden OBE MD FRCP (GLAS.) FRCS (ED.) FRCP.

"Ronald Harden is a Professor Emeritus of medicine from Dundee, Scotland," he explained. "And among his many achievements he was the champion of using human 'actors,' trained to act like patients and thereby contribute to the training and/or assessment of people that are stu-



Ronald M Harden

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"Dr. Harden is a senior statesman of medical education in the world..."

dents of the health sciences. We call those people a 'standardized patient.'"

Phrampus acknowledged that the spotlight on standardized patient development is "a bit of a twist" from previous award recipients, who have been recognized for more traditional simulation pathways, meaning some kind of manikin, robot or computer.

"2019 is the first 'Pioneer in Simulation' award to recognize a trailblazer in standardized patient work, which is pretty cool," he said. "And it's a great honor to the recipient."

He went on to describe Dr. Harden's myriad previous award recognitions, specifically highlighting his 2006 receipt of the Karolinska Institute Prize for Research in Medical Education, describing it as "the Nobel Prize of Medical Education, if you will." Continuing his praise for Dr. Harden, Phrampus summarized, "Dr. Harden is one of the world's leading educators of medicine. He is a senior statesman of medical education in the world and he is responsible for the training and assessment of tens of thousands, if not hundreds of thousands, of medical professionals around the globe."

Presidential Citations 2019

Mary Anne Rizzolo

In recognition for her outstanding contributions to the Certification Committee and development of the SSH Fellows Academy.

PediStars India

For the development and international dissemination of simulation scenarios for pediatric sepsis.

Christine Park

In recognition of her outstanding efforts to plan, design, and implement a Women in Leadership program and for leadership in developing a Code of Ethics for all simulationists.

Certification Council

In recognition of the extraordinary dedication and collaborative effort to produce an international practice analysis for simulation educators and for reaching a milestone of 1,850 certificates.

Accreditaiton Council

In recognition of the extraordinary dedication and effort to reach a significant milestone of over 125 accredited programs this year.

Dawn Schocken and Sunmeng Chen

In recognition of their extraordinary dedication to produce online readiness courses for CHSE and CHSOS.

Serious Games and Virtual Environments Arcade and Showcase Winners

ACADEMIC CATEGORY

#1 - Entry 8

Virtual Pulse: A Screen-Based Virtual Simulation Application
Michelle Kearns

#2 - ENTRY 17

Dwell: A Tabletop Simulation Game to Teach the Health Implications of Poverty
Jill Sanko

STUDENT CATEGORY

#1 - ENTRY 11

Virtual Reality Training Simulator for Learning Hand and Forearm Anatomy
Cristian Luciano

#2 - ENTRY 10

AR-Guided Wound Closure Application
Marissa Lovett

SMALL BUSINESS CATEGORY

#1 - ENTRY 7

Improving Fire Safety in The Operating Room: Fire in The OR Virtual Reality Training
Chris Ingwalson

#2 - ENTRY 1

Using Mixed Reality as the Next Level of Simulation
Mehmet Emin Aksoy

LARGE BUSINESS CATEGORY

#1 - Entry 20

Falls Risk Prevention Challenge
Kyle Formella

#2 - ENTRY 62

Oxford Medical Simulation - Virtual Reality Platform
Jack Pottle



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Veterinary Prototypes at SynDaver

SynDaver Labs [Booth #938] has brought some of its newest prototype simulator designs to IMSH 2019. According to Marjorie Bulone, marketing manager for SynDaver, the company is introducing two new models of veterinarian task trainers at this week's show.

"We have had our Surgical Canine high fidelity surgical trainer for a couple of years," she explained. "But last week we publicly launched the prototype for the Equine Model and our new CopyCat."

She said that the prototype Equine Model on display was developed in collaboration with Texas A&M University, adding "The prototype is actually being delivered to College Station right after this show. We're installing it there and they are going to work with it to see what features they like and what they might want to enhance."

A second Equine Model prototype on display will be heading to the University of Florida for similar evaluation.

In its current manifestation, the Equine Model features a SynTissue exterior and an interior design that allows for a variety of veterinary procedures, including nerve blocks for the eye to allow for ocular enucleation (eye removal) surgery training, tracheotomy, trans-tracheal wash, jugular vascular access (to draw blood and inject fluids), endotracheal and nasotracheal intubations, and gastric



and airway endoscopy.

"For example, with that amount of neck and head to get through, it can be difficult for vets to get a good feel for a nasal endoscopy, unless they are practicing on a live horse," she said. "But if they can practice on a model that simulates the tactile feel of that endoscopy, they can get better at doing it on the live animal when they have to turn to do that."

Also on display is the company's Surgical Canine, which was developed with the University of Florida and allows 30 different surgical procedures.

Bulone demonstrated how the trainer might be used in surgical removal of an obstruction that a canine might have ingested, highlighting a number of features that lend realism to the surgical procedures.

Along with the Equine Model, another new prototype on display at IMSH is the company's CopyCat, a full body feline replica of the feline anatomy with synthetic muscles, tendons and bones. Bulone said that the prototype, which is still evolving, is envisioned for use as a dissection model "for middle school and high school students" as a replacement for animal cadavers used in some dissection classes.

A New Take on CPR Training

While CPR task trainers have been around for decades, Innoson, America [Booth # 642] brings a new spin to the concept with an illuminating design that helps people to visualize the effects of CPR actions.

According to company representatives, the visual cues on the design reflect depth of compressions (usually 5-6 cm), to the speed of compressions, to the full release of compressions.

A light bar extending into the trainer collarbone area reflects compression depth with speed of compression information reflected in a carotid light array. Correct depth, speed and release processes result in manikin forehead lighting.

In addition to what they refer to as the Brayden "basic training" or "practice" model, a Brayden Pro manikin design links the manikin to an instructor's Android tablet through an app download. It uses Bluetooth technology to connect with individual students or groups of up to six different manikins. Trainee options include single rescuer, two-person CPR, compressions only, or ventilation only.

The Pro model provides an in-depth analysis of student performance that can be sent directly to a trainer as a .png file.

Company representatives said that their manikin technology, which originated in South Korea, has been used worldwide "for several years" but has only been around in the United States "for about a year."

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Monday Plenary Session – continued from page 4

she asserted that annotation “is where we believe we will see a beautiful richness developing. Because the code of ethics expresses values at the highest aspirational level for healthcare simulationists, we can’t drill down into the specifics of what a healthcare simulation operations specialist should do, what an educator should do, and so forth. So we’re going to depend on a process of annotation.

Park was followed by SSH 2018 President Joe Lopreiato, who awarded three Presidential Citations.

“These citations are recognition from the SSH President for outstanding and extraordinary work in the field of healthcare simulation,” he said. “And I am proud to present citations this morning to individuals or groups that have done some extraordinary work during the year.”

Three additional citations will be awarded during IMSH 2019.

Following the citations, Lopreiato introduced Lou Oberndorf, who has previously been recognized by SSH with its prestigious Pioneer in

Simulation award. Oberndorf explained how he begins working with the planning committee a year in advance, gathering thoughts and input toward the selection of the keynote speaker for the annual Lou Oberndorf Lecture on Innovation in Healthcare Simulation.

He said that his discussions with the 2019

“Human beings are tremendously infinite. We are endowed with deep, fathomless capacities for knowledge, for music, for science and technology, and for collaboration...”

planning committee highlighted twin passions – technology and education – that he shared with many in the audience and led to the selection of Sir Ken Robinson, a world-renowned education advocate who Oberndorf credited with “challenging the educational paradigm” while maintaining a focus on creativity and innovation. Among his many credits, Robinson has the distinction of over 50 million downloads of his related TED Talks, making him the most popular speaker in the history of that idea-sharing venue.

“Human beings are tremendously infinite,” Robinson said. “We are endowed with deep, fathomless capacities for knowledge, for music, for science and technology, and for collaboration. For my money, what sits at the heart of all these unique human powers – because they are unique in some respects – is the extraordinary power of imagination.”

Robinson emphasized the amazing power of “play” in human development, asserting that play represents “a prototyped form of simulation” that, in its most mature form, is reflected in theater performances.

Other elements of the address touched on relationships ranging from imagination and creativity to tools and transformative technology.

He concluded, “The more we are surrounded by technologies like artificial intelligence, the more important it is that we remember, retain, and seek to understand what it is that makes us human and what it is in our human experience on the planet that we seek to have these technologies assist us with.”

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Couch Conversations are a new format at IMSH this year. After having participated, what are your thoughts?



“I loved it. Even though I was listening, I could feel that people were congregating over here. It just organically happened, and it was very natural. I like the informality of it and that we were able to sit down and talk about the topic with likeminded individuals around us. It drew people in. It was a couch, it was comfortable, and it was just a sit-down discussion, and I feel that’s what we need. We need to just sit down and talk to each other about our thoughts and ideas and innovations, so I really loved this format.”

Anneka Mikel, MSN, RN, CNL
Sioux Falls VA Medical Center



“I thought it was very nice. It was super informal, which was a refreshing change from a sit-down kind of formal lecture, if you will. The one downfall is that it was a little hard to sit on the couch and I was kind of on the outer rim, so when people in the audience were asking questions, it was a little hard to hear. The content was good and it was nice just being able to have a real conversation, and to get one-on-one time afterwards with the person that was leading the session.”

Jason Snyder, BA
Instructional Technologist/Specialist
University of Missouri

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Award Winning Abstracts

FIRST PLACE ABSTRACT AWARD

Optimizing CPR Performance with CPR Coaching for Cardiac Arrest: A Randomized Clinical Trial (#1010-000014)

Adam Cheng, MD, FRCPC¹; Jonathan Duff, MD²; David Kessler, MD, MSc³; Nancy Tofil, MD, MEd⁴; Jennifer Davidson, RN⁵; Yiqun Lin, MD⁵; Jenny Chatfield, RN⁵; Linda Brown, MD, MSCE⁶; Elizabeth Hunt, MD, MPH, PhD⁷

¹Departments of Pediatrics and Emergency Medicine, University of Calgary, Calgary Alberta; ²Stollery Children's Hospital, University of Alberta, Edmonton Alberta; ³Columbia University College of Physicians and Surgeons, New York New York; ⁴Children's of Alabama, University of Alabama Birmingham, Birmingham Alabama; ⁵Alberta Children's Hospital, University of Calgary, Calgary Alberta; Alberta Children's Hospital, Calgary Alberta; ⁶Hasbro Children's Hospital, Alpert Medical School of Brown University, Providence Rhode Island; ⁷Johns Hopkins University School of Medicine, Baltimore Maryland

THIRD PLACE AWARD WINNER

Nurse Mentoring using In Situ Simulation Improves Normal and Complicated Birth Practices in a Resource-poor Setting (#1010-000326)

Rakesh Ghosh, PhD¹; Hilary Spindler¹; Jessica Dyer²; Amelia Christmas³; Susanna Cohen⁴; Aritra Dan⁵; Tanmay Mahapatra⁵; Aboli Gore⁵; Hemant Shah⁵; Dilys Walker¹

¹University of California, San Francisco, San Francisco California; ²PRONTO International, Seattle Washington; ³PRONTO India, Patna Bihar; ⁴University of Utah, Salt Lake City Colorado; ⁵CARE-India, Patna Bihar

FIRES MANUSCRIPT ACCEPTED FOR PUBLICATION IN SIMULATION IN HEALTHCARE

Reducing Perineal Lacerations through Team-based Simulation (#1010-000494)

Emily Marko, MD, FACOG, CHSE¹; Merlin Fausett, MD²; Shad Deering, MD³; Barton Staat, MD³; Stephanie Stormes, MD¹; Elizabeth Freund, MSN, RN¹; George Maxwell, MD¹

¹Inova Health System, Falls Church Virginia; ²Community Medical Center, Missoula Montana; ³Uniformed Services University of the Health Sciences, Bethesda Maryland

FIRES MANUSCRIPT ACCEPTED FOR PUBLICATION IN SIMULATION IN HEALTHCARE

Balancing Deliberate Practice and Reflection: A Randomized Comparison Trial of Instructional Designs for Simulation-based Training in Cardiopulmonary Resuscitation Skills (#1010-000495)

Emily Diederich, MD, MS¹; Matthew Lineberry, PhD¹; Michael Blomquist, RN¹; Vanessa Schott, PhD, RN¹; Chelsi Reilly, RN¹; Megan Murray, MHSA¹; Pooneh Nazaran, RN¹; Meghan Rourk, OTD¹; Julie Broski, MA¹

¹University of Kansas Medical Center and The University of Kansas Health System, Kansas City Kansas

SECOND PLACE ABSTRACT AWARD

Improving Pediatric Airway Management in General Emergency Departments: The Impact of a Simulation-based Collaborative Improvement Program (#1010-000254)

Kamat Abulebda, MD¹; Samer Abu-Sultaneh, MD¹; Travis Withfill, MPH²; Stefan Malin¹; Erin White, RN, BSN³; Kellie Leeper, RT³; Zachary Berrens, MD¹; Michele Kirby, RN, BSN³; Riad Lutfi, MD, MPH, PhD¹; Marc Auerbach, MD⁴

¹Department of Pediatrics, Riley Hospital for Children at Indiana University Health, Indianapolis Indiana; ²Department of Pediatrics, Yale University School of Medicine, New Haven, Connecticut; ³LifeLine Critical Care Transport, Indiana University Health, Indianapolis Indiana; ⁴Division of Emergency Medicine, Yale University School of Medicine, New Haven Connecticut

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PLANNING IMSH 2020 A Lively 20th Anniversary Celebration in San Diego!

While the bustle of IMSH 2019 continues today and into Wednesday, planning for the next IMSH is already well underway, with Planning Committee co-chairs Jeffrey Groom, PhD, CRNA; Kirsty Freeman, PhD(c), MHPE, PGCert, RN, CHSE; Aaron Dix, MBA, NRP, CHSE; and Keith Littlewood, MD enthusing about the opportunities and possibilities of IMSH 2020.

"We invite people to come to San Diego in 2020 to join us in celebration of our 20th meeting," said Freeman. "It's really an acknowledgement of the achievements that we have made over the last 20 meetings, and an anticipation of the next 20."

Littlewood echoed that sentiment,

adding that other considerations for the co-chairs as they progress in planning are to "celebrate what we've done, but also to keep that pioneering, exciting edge." He also expressed the notion of "remembering to be inclusive, of trying to reach every patient every day, everywhere" as important to the theme development.

The IMSH 2020 theme, *Inspired by our Patients, Driven by the Future*, resulted from those reflections and others.

As outlined by the IMSH 2020 Planning Committee, "Our visions for the future may be refined, but our reason isn't. That reason is patients. Patients have been and will continue



IMSH 2020 Planning Committee:
(L to R) Jeffrey Groom, Kirsty Freeman, Keith Littlewood, Aaron Dix

to be the constant throughout this journey. As we look forward to the next generation of simulation professionals, we want to celebrate the accomplishments that have allowed us to get where we are. We also want to ensure that as we progress, we keep patients at the core of our efforts. After all, the patient is the ultimate stakeholder!"

A focus in building IMSH 2020, is "really involving our members; it's going back to our grassroots and celebrating those people that are in the audience, and our aim is to really highlight and showcase their achievements," said Freeman. Providing a glimpse into early plans, she added, "In that celebration opening, we're really hoping to showcase and acknowledge as many of our pioneers and those working in healthcare simulation as we can, trying to make it as inclusive a meeting as possible."

With inclusivity in mind, Freeman said, "Our current visual imagery is a group of hands coming together to celebrate, to reach out. It's colorful. And with that visual imagery, the joining of hands, we're trying to capture the essence of the meeting."

Freeman said that the Planning Committee represents the international aspect of the Society for Simulation in Healthcare (SSH), with co-chairs "literally from across the U.S. and across the world," bringing a global perspective to the meeting. "We're

very passionate about ensuring that we support not only our global members but our global partners," she said.

In anticipation of IMSH 2020, Planning Committee co-chairs are "on the ground," communicating with this year's Planning Committee, attending new initiatives introduced here in San Antonio, talking with attendees to gather immediate feedback, and meeting with key strategic groups within SSH.

The IMSH 2020 co-chairs emphasized that, in aligning with SSH strategic priorities, "we want to inspire attendees to become advocates for the patient. Together, we can work to advance healthcare simulation on a global level. Let's make simulation accessible to all that impact the lives of patients by addressing the inequities of simulation training encountered in a highly innovative world. By improving accessibility to simulation training, we can fight for our patients and provide them with the level of care that they deserve."

Their message continued, "We want attendees to feel proud of how far we have come and excited for what is yet to come. At IMSH 2020 let's celebrate our success, get inspired, collectively high-five each other, and be empowered to keep the success alive!"

Join the IMSH 2020 celebration in San Diego, January





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