

The Medical Record

Simulation Education for Improved Professional Practice

A Newsletter of the Richard A. Henson Medical Simulation Center • Salisbury University

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Virtual Delivery: A New Focus

The Richard A. Henson Medical Simulation Center at Salisbury University provides exceptional learning experiences for students and faculty, community organizations, and area health professionals using technologically advanced manikins and highly trained actors. In this issue, read how we are managing virtual and in-person simulations to assure that learning never stops!



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Prestridge Named Standardized Patient Program Coordinator



The Sim Center announces the appointment of Rachel Prestridge, M.S., to the position of Standardized Patient (SP) Program coordinator. Prestridge is a two-time graduate of Salisbury University with a Master of Science in applied health physiology (AHPH) and a Bachelor of Science in exercise science.

She began her association with the Sim Center in 2016 as a graduate assistant for SU's AHPH Program.

During her two years as a graduate assistant, Prestridge helped with the accreditation process for the AHPH Program and supported the instructional activities of the Simulation Center. Since 2018, she has worked part-time as the medical simulation technician, responsible for the coordination, preparation and operation of high-fidelity human patient simulators, audio and video recording, providing technical assistance and troubleshooting, and assisting with the SP Program. With expansion of the SP Program through a Maryland Higher Education Commission Nurse Support Program II grant, a full-time program coordinator was needed.

SPs are trained actors who portray various roles, including those with medical and psychiatric disorders, family members, and various health care professionals, to name a few. SPs also are used in conjunction with high-fidelity manikins to infuse more realism for the learners. For example, SPs can enact the

role of family member, assisting nurse or doctor.

In her new capacity, Prestridge provides day-to-day oversight of the SP Program for learners within Salisbury University and from the external community. She also coordinates marketing, recruiting, hiring, training and evaluating SPs; establishes and revises operating procedures to meet program goals; and allocates work assignments to up to 20 standardized patients.

We wish Prestridge great success in her new position!

For more information about our SP Program, contact Prestridge at rnprestridge@salisbury.edu or visit <https://www.salisbury.edu/academic-offices/health-and-human-services/simulation-center/standardized-patient-program.aspx>

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www.salisbury.edu/henson/simcenter

SU is an Equal Opportunity/AA/Title IX university and provides reasonable accommodation given sufficient notice to the University office or staff sponsoring the event or program.

Welcome New Staff and Graduate Research Assistants

There are several new faces at the Sim Center.

Matthew Trader joins us as the 19-hour-per-week medical simulation technician. In this position, he is responsible for audio-video recording of simulations, assisting with operating our high-fidelity human patient simulators, and supporting other learning experiences and events at the Center. Matt brings a strong background in computer technology, with experiences in both hardware and software, photography, and videography.

Mason Cervantes is the new graduate research assistant for the Applied Health Physiology (AHPH) Program. She graduated from Salisbury University in May 2020 with a degree in exercise science. From January through May 2019, Cervantes held an internship at the Yoga Foundation in Sydney, Australia, through the Global Experiences Study Abroad Program. Ultimately, Cervantes wants to work

in cardiac rehabilitation. She is at the Center 10 hours per week helping set up and run simulations.

Jody Dengler was appointed as the Sim Center's first graduate research assistant, dedicating 20 hours per week to assist with our operations and learning experiences. Jody is a student in the M.A. in Conflict Analysis Dispute Resolution Program. Until recently, she was the program coordinator for the Center for Extended and Lifelong Learning (CELL) at Salisbury University. She brings a wealth of knowledge and experience in community education, marketing and publicity, event planning, grant-writing, and teaching.

Glenise Mbah, B.S.N., RN, is the new graduate research assistant in the School of Nursing. She is beginning her third year in the Doctor of Nursing Practice (D.N.P.) Post-Bachelors Program and expects to graduate in spring 2022. Her goal is to become a certified family



Medical Simulation Technician Matt Trader



Graduate Research Assistants Mason Cervantes, Jody Dengler and Glenise Mbah

nurse practitioner. Glenise is at the Center approximately 10 hours per week assisting with various learning experiences.



Sara Mercado and Eric Dolan (Pre-COVID, 2020)

Graduate Assistants Farewell

We congratulate the Class of May 2020 and our graduate research assistants, Sara Mercado, RN, B.S.N., M.S.N. and Eric Dolan, M.S. (AHPH). Thank you for

your hard work and dedication to the Sim Center, especially during this past spring as we transitioned to distance delivery of all simulations. We wish you the best of luck in the future.

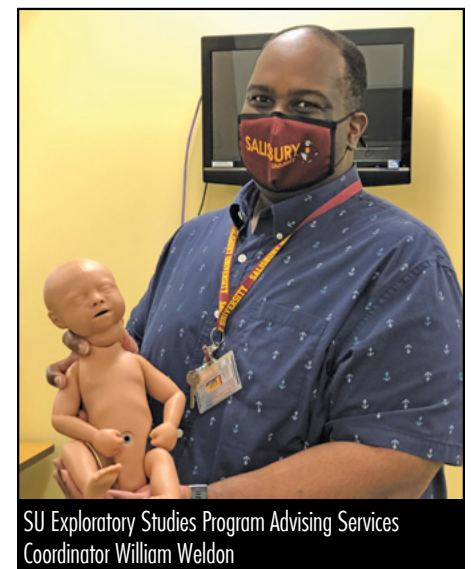
A Visit from an Advising Services Coordinator

Sim Center staff recently welcomed William Weldon, SU Exploratory Studies Program advising services coordinator, for a tour and conversation about ways to connect students in the Exploratory Studies Program with activities at the Center.

While visiting, Weldon had the opportunity to meet and hold one of our newborn high-fidelity manikins. In addition to health career majors,

Exploratory Studies Program students can become involved with the simulation world in numerous ways – hardware and software development; virtual and augmented reality design; staging scenes through use of props, make-up and simulated body fluids; videography – the options are nearly endless.

Plans are underway for student visits in spring 2021.



SU Exploratory Studies Program Advising Services Coordinator William Weldon

The Dean's Perspective

By Kelly A. Fiala, Dean, College of Health and Human Services

With all the uncertainty across the last several months, the importance of innovation and alternate approaches to clinical education has become increasingly clear. Salisbury University's College of Health and Human Services is fortunate to have the expertise and adaptability of our Henson Medical Simulation Center staff to support these endeavors. Last spring when the University made the decision to go remote, Sim Center personnel under the leadership of Lisa Seldomridge, director, and Zack Tyndall, acting assistant director, immediately modified their approach to simulations, including standardized patient (SP) experiences. Each SP was equipped with a laptop computer and received training on Zoom and MyClasses. Students were able to interact with SP from the comfort and safety of their home while continuing to develop their clinical skills.

Over the summer months, the Sim Center staff worked tirelessly to evaluate how the Center could best be utilized in the upcoming academic year. Protocols were developed to address traffic flow, air circulation, physical distancing, disinfectant procedures and screening. In addition, Center staff advanced their knowledge base and obtained skills necessary to operate high fidelity manikins remotely. Faculty and staff continued to interact, prepared cases and ensured that learning experiences could be met in the Sim Center this fall. The traditional hiring process also was adapted to include remote interviews and resulted in the hiring of Rachel Prestridge as the new Standardized Patient Program coordinator.

It is hard to believe that the fall semester is now underway. Although it is very different than past semesters, I couldn't be prouder of the Henson Medical Simulation Center team. They



are prepared, conscientious educators who welcome the opportunity to influence developing practitioners. With their assistance, the entire CHHS faculty and staff will continue to meet our mission to develop culturally competent, ethically grounded practitioners with comprehensive professional expertise.

Using High-Fidelity Manikins to Learn at a Distance

It is hard to believe but with today's technology, many of our high-fidelity manikins can be controlled from a distance by accessing their software operation systems virtually. This, in conjunction with the Sim Center's web-based video-recording system allows for true distance delivery of high-fidelity simulation experiences. As long as the manikin is physically turned on, an operator can change the manikin's vital signs, physiology and appearance while controlling the manikin from afar.

Imagine learners joining a simulation on their own computers from home and being able to see the patient and their monitor with heart rate, respiratory rate, blood pressure, ECG and oxygen saturation. Learners are able to make assessments and recommend interventions. Based on what learners say, the manikin operator adjusts the patient's physiology and vital signs accordingly. The patient's condition may improve or worsen, requiring additional care. Although it's not "hands-on"

learning, learners develop critical thinking skills using limited clinical data available to them.

Being in a world-wide pandemic has created a great deal of uncertainty. But these challenging times have also given us opportunities to learn and grow. We at the Sim Center are excited to share the newest methods of simulated experience delivery and hope you'll consider using them with your learners.

SU Giving Day

Thanks for your support during the 2020 Salisbury University Giving Day Campaign.

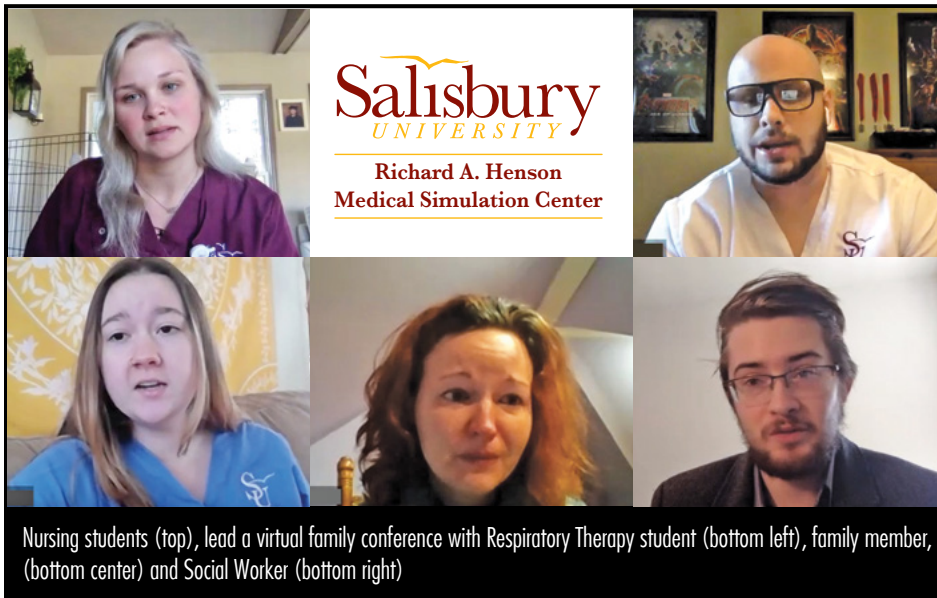
We are grateful for every dollar that was generously given or matched as a gift. Each contribution assists us in delivering the latest in simulation techniques and technology to SU

students, especially during a pandemic. This year's gifts will be used to expand the wigs, make-up and other props available to make our standardized patient scenarios even more realistic and adaptable to additional fields of study.

Thank you!



Nursing 351: Care of Adults II Clinical Interprofessional Collaboration in End-of-Life Care



Working with families who are facing an end-of-life situation is incredibly difficult and requires the ability to communicate in an empathetic and thoughtful way. It also requires interprofessional collaboration with other health care professionals to provide the most holistic and supportive experience possible. In partnership with faculty from the Nursing and Respiratory Therapy programs, we have developed a simulation to help learners develop these important skills in a safe environment. Before COVID-19, learners were invited to the Sim Center for a small group, interprofessional collaboration scenario in which a group of health care professionals and a patient's family gather for a conference to discuss care for their loved one who is nearing the end of her life. Through this simulation, nursing students lead the conference to determine the wishes of the patient and family members and what support can be provided by colleagues from respiratory therapy, social work and pastoral care.

In a typical face-to-face scenario, students arrive at the Center and gather in a conference room with a faculty facilitator who leads a pre-brief discussion of the upcoming scenario and answers any questions. The standardized patient (SP), located in another room,

takes this time to mentally prepare for their role in the scenario. Once everyone is ready, the students participating in the first simulation experience leave the group and go to the family conference room where the SP playing a family member is waiting. During this specific simulation, students are caring for a patient who is nearing the end of life and many decisions need to be made about medical interventions, including whether to continue mechanical ventilation. The health care team includes nursing and respiratory therapy students and an SP who portrays a social worker or member of the pastoral care team. The goal of the conference is to update the family on the patient's situation, pose options for care, answer the family member's questions and to help them navigate through this difficult situation. Once the team reaches an end point, the simulation terminates and the students return to the conference room to debrief with the rest of their classmates and facilitator.

With a mandatory stay-at-home order issued in mid-March, this experience needed to be restructured for virtual delivery and mirror telehealth encounters that have skyrocketed due to the pandemic. Using the Zoom platform along with the hard-working and dedicated SPs, the Sim Center recreated

this scenario to depict a family telehealth conference.

The transition from an in-person experience to virtual seemed simple – rather than meeting in the Sim Center, everyone would meet on Zoom and the scenario would unfold in the same manner. However, the execution proved to be far more challenging than expected. The first challenge was that we were all novices with using the Zoom platform. Not only did the Sim Center staff and SPs need to learn the ins and outs of Zoom, but our faculty and learners had to learn the platform too. Obtaining the password to join a meeting and then joining it, making sure cameras were synced and in working order, and testing audio equipment were important tasks to master. In addition, finding an appropriate location with minimal background distractions, choosing appropriate attire and positioning close to a power source for computer charging were a few unpredicted obstacles we faced. The SPs faced further challenges when it came to portraying their roles. When meeting in person, emotions can be felt through body language and expressions. However, in a virtual room, it is nearly impossible to read the body language of a person when only their head and shoulders are visible. The SPs had to discover ways to amplify emotion through facial expressions, tone of voice, word choices and exaggerated body language to fully engage the learners and make the situation more believable. In addition, the Sim Center staff took on multiple roles during the simulation experience, including teleconference host opening and closing the virtual meetings; moving SPs, learners and faculty in and out of breakout rooms; recording and timing scenarios; sending text messages and chats to SPs and faculty facilitators between simulations; and troubleshooting any issues that occurred with any of the meeting participants. Some of these challenges were anticipated, others were managed as they arose.

In the end, the Sim Center staff, SPs, faculty and learners all gained a great deal from this experience. User feedback was extremely positive. One nursing student noted, “the most helpful thing was being able to practice this communication in a controlled environment. Though it was simulation, it felt very real and I was glad to be

able to get some guidance about things to improve on and things to be sure to include next time.”

A respiratory therapy student also said, “the simulation allowed RT students and nursing students to work together and bounce thoughts and ideas off each other. In hospital clinical experiences, the programs do not get to interact with

each other, but the simulation gave that opportunity.”

The Sim Center is proud to offer opportunities to experience such real-life scenarios in a safe, controlled environment.

Lessons Learned - Simulations Via Zoom:

- Have more than one person as a meeting host.
- Remind everyone to have their computer and phone chargers nearby (along with a power source).
- When on camera:
 - Do not sit with a window or light behind you.
 - Find a room with minimal background distractions.
 - Make sure props or instructional items are visible.
 - Find a location where environmental noise is avoidable.
- Have someone on the Sim/Instructional Team provide technical support for unexpected glitches.
- Have a back-up SP in case of any technical difficulties.
- Keep a phone list of all participants should internet connection be lost during the meeting.

Development of a Pediatric Seizure Simulation

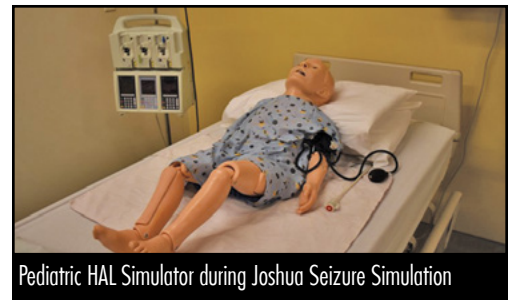
Over the course of the spring 2020 semester, Brooke (Hallett) Mills, RN, B.S.N., a student in the Master of Science in Nursing - Educator Program, developed and implemented a new pediatric seizure simulation for her culminating scholarly project. Under the direction of Dr. William Campbell, Mills used our pediatric manikin HAL S3005 (HAL) to portray a four-year-old male patient experiencing an active seizure. Unfortunately, during the development process there were some technology glitches with the manikin. Due to the incline of the patient in the bed and the lack of rigidity from the mattress, the two pistons in HAL's back needed to contact a firm surface to accurately portray a seizure. Campbell reached out to other simulation experts throughout the country to see if anyone else had experienced a similar issue. Working through many of the recommendations that he received, it became evident that something would need to be custom built for this simulation to realistically portray an active seizure. Campbell constructed a custom wooden wedge that when placed behind HAL created just the right amount of firmness for good contact with the pistons. It mimicked an active seizure perfectly!

Using a pillowcase and a staple gun, Campbell was able to conceal the custom wedge in a way that was undetectable by the learners.

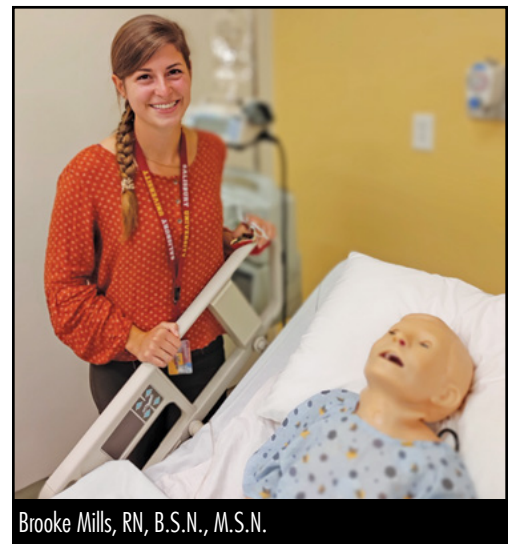
Mills' simulation scenario is designed for versatility. It can be completed at the Sim Center as part of regular instruction, as a make-up clinical for students or in continuing education for practicing nurses. All materials can be used for in-person or online delivery. The simulation includes everything that learners and facilitators need to complete and teach the exercise:

- a template that explains manikin settings and how the scenario unfolds
- guideline sheets with corresponding prep materials from written course resources
- a hand-off report with a primary profile of the simulation patient
- a pre-briefing sheet
- patient electronic medical records
- de-briefing scripts.

“I've worked in pediatrics for five years, and it has always been my passion,” said Mills. “It is imperative that nurses are properly trained and prepared for seizure situations that may occur in practice, and to provide learners with the appropriate knowledge base to do so.



Pediatric HAL Simulator during Joshua Seizure Simulation



Brooke Mills, RN, B.S.N., M.S.N.

Thanks to Mills' creativity in scenario development and Campbell's craftsmanship, the Center now has another high-fidelity simulation to offer.

Publications and Presentations

The pandemic has not stopped our faculty from conducting research, making presentations and publishing. Here is a listing of the most recent simulation-related dissemination activities.

- Allen, K., Seldomridge, L., Webster, D., Hart, J., et al., (2020). Enhancing interprofessional collaboration of nursing students through curricular integration of standardized patient experiences. NLN and STTI Nursing Education Research Conference 2020 (26-28 March), Washington, D.C. (Cancelled).
- Campbell, W. (2019). A simulation: Post-op care for a pediatric patient with hidden evidence of abuse. Sigma Theta Tau International 45th Biennial Convention, (16-20 November 2019), Washington, D.C.
- Hall, N., Allen, K., Jarosinski, J., & Seldomridge, L. (2020). Practice makes perfect: Using simulation to build confidence in speaking up. Salisbury University Teaching/Learning Conference. Salisbury, MD. (27 February).
- Hall, N.J., Allen, K., Jarosinski, J., Seldomridge, L., Mercado, S., & Webster, D. (2020). Speaking up is hard to do: Using Simulation to Build Confidence with Speaking Up. Nurse Tim Nuts and Bolts. (7-8 August). Online.
- Hart, J., Allen, K. (2020). Enhancing nursing and respiratory therapy students' interprofessional collaboration competencies through curricular integration of standardized patient experiences. Maryland Nurses Association 117th Annual Convention, Inaugural Virtual Convention (2 October). Online.
- Milligan, T., Freda, K., Seldomridge, L. (2020). The influence of low- and high-fidelity simulations on nursing students' self-confidence, knowledge, and satisfaction. NLN and STTI Nursing Education Research Conference 2020 (26-28 March), Washington, D.C. (Cancelled).
- Seldomridge, L., Jarosinski, J., Reid, T., Hauck, B., & Payne, B. (2020). Developing clinicians as faculty through statewide partnerships. NLN and STTI Nursing Education Research Conference 2020 (26-28 March), Washington, D.C. (Cancelled).
- Webster, D. & Seldomridge, L. (2020). "Preparing nurses to communicate and lead." Maryland Nurses Association 117th Annual Convention, Inaugural Virtual Convention. (2 October). Online.
- Webster, D., Seldomridge, L., & Willey, A. (2019). Preparing nurses to communicate and lead: Using toolkits and standardized patient experiences. Sigma Theta Tau International 45th Biennial Convention, (16-20 November 2019), Washington, D.C.
- Webster, D., Seldomridge, L. & Willey, A., (2019) Preparing nurses to communicate and lead: Using toolkits and standardized patient experiences. American Association of Colleges of Nursing Baccalaureate Education Conference. (21-23 November), Orlando, FL.
- Willey, A., Webster, D., & Seldomridge, L. (2020). Using a simulation toolkit to educate students as mental health patient advocates: From admission to discharge. Maryland Nurses Association 117th Annual Convention, Inaugural Virtual Convention. (2 October). Online.
- Willey, A., Webster, D., Jarosinski, J. and Seldomridge, L. (2020). Enhancing mental health nursing practice through leadership development. NLN and STTI Nursing Education Research Conference 2020 (26-28 March), Washington, D.C. (Cancelled).

New Cameras for Parks Nurses Station and Supply Room

Two new spaces are now available for recorded simulation activities!

The Donna and Avery Parks Nurses Station recently was equipped with cameras and microphones to capture activities that typically occur there. Examples include hand-off

reports, conversations between various health professionals and medication preparations, among others.

Cameras and microphones also were installed in the adjacent supply/workroom for simulations that include selecting appropriate equipment and

supplies, and preparing intravenous fluids and blood for transfusions.

We hope you will consider integrating these newly equipped spaces into your simulations.

COVID-19 Update

The COVID-19 pandemic has affected our personal, professional and academic lives. Faculty across the country have adjusted their teaching methods, and health professions students have experienced difficulties with clinical placements. Fortunately, Salisbury University has a state-of-the-science medical simulation center where students can have in-person, hands-on experiences while practicing social distancing and proper body-substance-isolation protocols. Telehealth experiences with standardized patient (SP) actors also provide realistic encounters to hone skills in assessment, communication, and teaching.

By mid-October, the Sim Center had hosted 98 junior students from NURS 311, Care of Adults Clinical I, for a high-fidelity manikin simulation preparing them for their first hospital-based experience. This in-person experience required students to conduct an initial assessment of their patient and the environment within a limited time window. Professors Sedonna Brown and Teena Milligan created scenarios that were conducted concurrently in two different Sim rooms using adult male and female high-fidelity manikins. While students admitted being “extremely nervous” before meeting their patients, they noted feeling “ready for the real thing because we know what to expect.”

The Sim Center welcomed 27 senior nursing students enrolled in NURS 361, Care of Children Clinical, for in-person sessions. They practiced assessment skills in a well-child check-up, prepared and administered immunizations, and participated in an environmental safety activity, all with high fidelity manikins. Drs. William Campbell and Staci Keenan worked with Sim Center staff to create these scenarios and modify them for delivery in compliance with density limits. These students returned to the Sim Center every week through November for a wide variety of experiences, including taking care of a young child who had just had surgery for a severe fracture of his arm, working with a child with a worsening of asthma, caring for a child experiencing a seizure and managing a child with complications from type 1 diabetes.

In November, another 29 senior nursing students enrolled in NURS 371, Maternal and Newborn Care, participated in high-fidelity simulations focusing on newborn assessment.

To keep our faculty, staff and learners



safe during in-person encounters – in addition to masking social distancing and reduced density – following each simulation, the rooms, manikins and medical equipment were disinfected. We also have placed HEPA filtration units in each room to help filter the air. We are proud of what we’ve accomplished during these interesting times.

A variety of telehealth experiences have been delivered through the Sim Center, reaching more than 200 students each week. Beginning in mid-September, 86 senior nursing students have had weekly virtual appointments with “clients” experiencing various mental health challenges including anxiety, depression, schizophrenia, substance use and post-traumatic stress. Standardized patient actors follow carefully crafted scripts to portray a client with mental illness, a family member learning how to interact more effectively with their loved-one or other health care provider. Students engage in telehealth appointments meeting their “client” for a one-to-one interaction or in pairs for a family conference. Each session focuses on a different aspect of care-improved communication skills, safety assessment, medication management and teaching, managing conflicts, and discharge planning. Students have commented on “how realistic it all feels. The meetings are pretty intense because the actors are amazing.” These experiences have provided valuable learning at a time when live clinical experiences have been restricted.

Junior nursing students enrolled in NURS 311, Care of Adults I Clinical, also have had telehealth meetings with healthy older adults to practice their interviewing skills and to perform a medication and nutrition assessment. Working in pairs, 102 students met their “client” via Zoom for two different sessions. In the first

session, the focus was on establishing a professional nurse-client relationship. The older adult, a standardized patient actor, followed a script to depict a senior citizen who would have been attending a program at a local senior center, but the center was closed due to the pandemic. Using make-up, wigs and careful lighting, actors ranging in age from 20 to 75 enacted their characters. Virtual backgrounds were used by the standardized patients to add even more realism. In the second telehealth meeting, students brought a teaching plan and educational materials to address the “client’s” request for more information. Students showed amazing creativity in the ways they prepared materials for the educational session with their clients. One student said, “it was so real – the clients were so good. We had to figure out how to share screens, manage background noises and other distractions.”

Our newest endeavor was providing telehealth experiences for Athletic Training Program students. Dr. Matt Campbell worked with SP Coordinator Rachel Prestridge to develop a scenario in which athletic training students engaged with a high school athlete with a skin problem. Students conducted a telehealth appointment with a standardized patient to evaluate the situation and determine the best course of action. Taking a health history via Zoom is challenging enough, but evaluating a skin lesion is even more difficult. Students had to direct their “client” to improve the lighting, place their arm in different positions to get a full view of the areas of concern and determine if the skin problem had spread anywhere else. Much was learned from this first-time experience that will be put to good use when the athletic training students have another encounter with a different client.

Faculty Academy and Mentorship Initiative of Maryland (FAMI-MD)



The Eastern Shore Faculty Academy and Mentorship Initiative has a new look and name! After receiving additional Maryland Higher Education Commission NSPII grant funding for the years 2020 to 2025, ESFAMI will now be known as FAMI-MD, Faculty Academy and Mentorship Initiative of Maryland. This change in our name better reflects our outreach and partnerships across the state and expanded curriculum to include both Introductory and Advanced Academies. FAMI-MD is a grant-funded program that trains expert nurses who hold bachelors, masters and doctoral degrees for clinical faculty positions with Maryland colleges and universities. Since 2011, we have created a network of over 200 qualified nurses prepared to take faculty teaching assignments across the state of Maryland.

Exciting changes to the FAMI-MD program include delivery through a completely virtual model with in-person sessions now taking place through synchronous sessions on Zoom.

Also, FAMI-MD has launched a new Advanced-FAMI curriculum. Applicants to FAMI-MD can complete our Intro-FAMI academy, a five-week-long, 40-contact-hour-program, designed to build a strong foundation in how to be an effective clinical teacher. Upon completing Intro-FAMI, individuals may apply for the Advanced Academy which explores more complex topics for those looking for career advancement. Forty continuing education units (CEUs), approved by the Maryland Nurses Association, are awarded upon completion of each academy.

Three synchronous sessions delivered via Zoom are the Orientation, Simulation and Mentoring Nights. Transitioning our Simulation Night to a completely virtual experience has allowed us to offer advanced simulated teaching encounters to learners throughout Maryland. Working closely with the Richard A. Henson Simulation Center staff and standardized patients, FAMI-MD was able to virtualize all simulated teaching encounters that were previously held in person. FAMI-MD

has hired standardized patient actors for a wide range of roles from portraying nursing students in the Introductory Academy to the director of a School of Nursing in the Advanced Academy. These simulated teaching encounters are designed to create a safe environment to learn how to handle difficult situations that may occur as a clinical faculty member.

Introductory and Advanced Academies are offered on a rotating basis throughout the year, facilitated by expert faculty from associate degree, baccalaureate, master's and doctoral programs across the state. Individuals interested in applying for either of our academies can go to our website to find out more information and see our schedule of upcoming academies: <https://www.salisbury.edu/academic-offices/health-and-human-services/nursing/fami-md-academy/>. If you have questions, please contact us via email at FAMI@salisbury.edu or by phone at 410-546-2463.

Lending Ventilator to TidalHealth-Peninsula Regional Medical Center

During the early stages of the COVID-19 pandemic, the Richard A. Henson Medical Simulation Center reached out to our partners at TidalHealth-Peninsula Regional Medical Center to provide access to some of our medical equipment. As a high-fidelity medical simulation center, we are fortunate to have a fully functioning Servo-i ventilator that is an integral part of the clinical rotation training for our respiratory therapy students. Anticipating that ventilators may be in short supply during the novel coronavirus pandemic, we loaned this much-needed ventilator to support

patient care.

R.J. Wilkinson, RRT, director for Respiratory Services at TidalHealth-Peninsula Regional Medical Center noted: "I would like to start off by thanking you and your team at Salisbury University for the support throughout the COVID pandemic. The ventilators loaned for our use were extremely valuable to help provide exceptional care to our sickest of patients in the COVID Unit. During our peak surge, many advanced critical care ventilators were needed and used. There was never a time where we were in danger of 'running out' of ventilators thanks to your help. The supplemental pieces



of equipment added to enhance our current fleet of critical care ventilators was extremely valuable."

We thank the nurses, doctors, respiratory therapists, first responders and all health care professionals who are on the front lines battling this pandemic, and we are proud to join forces.