



UNC CHARLOTTE
College of Health and Human Services

School of Nursing
Learning Resource Center
Policies and Procedure Manual
2020-2021

Policies in this manual are applicable to all university faculty, students and guests utilizing the Learning Resource Center. Information is subject to change without notice. Further information and updates may be obtained at <http://nursing.uncc.edu/student-resources/learning-resource-center>

Date of Origin 9/2010 JF
Revised 9/2012 DAC
Revised 7/2015, 2016, 2017, 2018, 2019, 2020 CTC

**University of North Carolina at Charlotte
School of Nursing
Learning Resource Center**

Student Contract

I have received a current copy of The University of North Carolina at Charlotte School of Nursing *Learning Resource Center Policy and Procedures Manual Updates*. I have had an opportunity to review and discuss its contents and I agree, as a student enrolled in any of the nursing programs offered by the UNC Charlotte School of Nursing, to adhere to the policies and guidelines set forth. The policies and procedures are subject to change during my course of study and it is my responsibility to keep abreast of these changes.

Student Name: _____

Student Signature: _____ Date: _____

TABLE OF CONTENTS

Introduction and Philosophy	4
General Information	5
Simulation Information	7
LRC Guidelines	11
Borrowing Equipment	14
Safety Guidelines	16
References	18
Appendix A - Photo Gallery	19
Appendix B - Forms	24
Inventory	34

Introduction & Philosophy

The Learning Resource Center (LRC) is dedicated to supporting the vision, mission and philosophy of the School of Nursing (SON) at the University of North Carolina at Charlotte (UNCC). The mission of the LRC is to enhance student learning in a safe, innovative environment while promoting competence in all aspects of professional nursing practice. The LRC endeavors to design learning activities that replicate real-life clinical situations which are evidence-based and student-centered, thereby assisting *students in their enhancement of critical thinking, clinical reasoning and decision-making skills*. Faculty who participate in simulated learning experiences provide students with constructive feedback regarding individual and team performance through debriefing sessions, empowering students to self-analyze their own performance during the reflective process. All simulated learning experiences are designed by course faculty in conjunction with the Learning Resource Center Director.

In this environment you are introduced to new skills, practice previously learned skills, and participate in the evaluation of those skills. Evaluations are performed by peers, graduate assistants, or faculty in an effort to encourage and foster critical reasoning skills. It is important that you consider this a safe environment where the primary objective is to allow you to become competent and comfortable with the skills learned prior to arriving on the clinical units with actual clients. Simulation activities may also be offered during your clinical experiences to allow time to develop critical thinking and clinical decision-making skills. Because your instructor may choose to use audiovisual recording as a means of documenting those evaluations, all students and faculty are required to complete and submit the appropriate consent forms included in the appendix of this manual.

On occasion, other programs of study within CHHS may utilize the LRC via interdisciplinary simulations and activities within the nursing department. Specific lab time for instruction, individual practice and competency evaluations will be shared via the current learning platform. If your course requires mandatory time requirements you will be informed of those times by the faculty teaching the course.

The following guidelines facilitate learning and promote the safety of all participants during learning experiences held in the LRC. It is expected that everyone involved in LRC activities will adhere to these guidelines, including faculty, staff and students. The Director of the LRC will update the contents of this manual as needed and all aspects are subject to change. Users may contact the LRC Director for clarification or submission of materials for update.

General Information

The Learning Resource Center (LRC) is located on the UNC Charlotte campus, 3rd floor of the College of Health and Human Services (CHHS) building. The LRC facilities simulate a hospital, home and primary care settings. It is fully equipped for students to practice clinical nursing skills at all levels of nursing practice that may occur with diverse clients across the lifespan. There are phones in the four lab rooms (306, 307, 320, and 321) that are for campus use only. The phones in 307, 320, and 321 also have 1-800 calling capacity so that technical support can be reached when necessary for the manikins located in these specific rooms.

The LRC includes the following learning support services and resources:

- CHHS 302 – Living Learning Laboratory (The Apartment)
- CHHS 305 – A Mother’s Place (breastfeeding or pumping space)
- CHHS 306 – Skills Lab (Wall Phone – Extension 77946), Storage Room 306A
- CHHS 307 – Clinical Simulation Lab (Desk Top Phone – Extension 77947)
- CHHS 311A – Library/Audio Visual
- CHHS 312 – Exam Room 1
- CHHS 313 – Main Storage
- CHHS 314 – Exam Room 2
- CHHS 315 – Utility Room
- CHHS 316 – Exam Room 3
- CHHS 320 – Health Assessment Lab (Wall Phone – Extension 77948), Storage 320A
- CHHS 321 – OB/PEDS Room (Desk Top Phone – Extension 70273)

Lab Descriptions:

CHHS 302 Marilyn Greene Smith Living Learning Lab

Designed and furnished like an apartment, this laboratory includes a living area, kitchen, bedroom, and ADA accessible bathroom. Students gain skill in the empathetic delivery of care to clients in the home and community. Assistive devices such as walkers, wheelchairs and canes are also available here. (Gaumard Susie - an adult female human patient simulator is temporarily housed here).

CHHS 305 Mother's Place

A comfortable retreat for new mothers (students, faculty, or staff) who are breastfeeding and require a private location to pump breast milk or feed an infant. A Medela symphony breast pump is available. To access, complete request form on the LRC webpage.

<http://nursing.uncc.edu/student-resources/learning-resource-center>

CHHS 306 Nursing Skills Lab

A six-bed laboratory dedicated to the acquisition and improvement of psychomotor skills for the undergraduate or graduate nursing student. Students are taught basic skills on a variety of models as well as culturally diverse manikins including simulated geriatric and obese clients. Each bed has fully functioning wall connections for simulated suctioning, oxygenation, and patient call light. Furnishings include night stands and overbed tables, two large group tables, two scrub sinks, functional patient bathroom, and linen cart. SimMan Essential™ and SimSuite™ are also temporarily housed here. This lab includes an automatic medication dispensing unit and five workstations on wheels. Also available are SMART room standard technology podium including LCD projectors, DVD/VCR unit, instructor computer, document camera and SMART Technology Sympodium. Wi-Fi access to University systems and network printers is available.

CHHS 307 Human Patient Simulation Clinical Lab

A three-bed laboratory dedicated to simulation technology. Includes Laerdal SimMan Classic™, Nursing Kelly™ and Sakura,™ (a Japanese patient care task manikin). Two CathSim virtual reality systems are available to support student learning related to IV initiation and phlebotomy. This lab includes SMART room standard technology podium including LCD projectors, DVD/VCR unit, instructor computer, document camera and SMART Technology Sympodium. Wi-Fi access to University systems and network printers is also available.

CHHS 312, 314, and 316 Exam Rooms

Three separate exam rooms simulate an environment for physical examination and other treatments performed by a nurse practitioner, physician or other healthcare personnel. Each room contains an examination table, sink, counter space, wall mounted otoscope / ophthalmoscope, and x-ray illuminator view box.

CHHS 320 Health Assessment Lab

Eight exam tables and one large group table are dedicated to the acquisition of skills required for health assessment at both the graduate and undergraduate levels. Also included are SMART room standard technology podium including LCD projectors, DVD/VCR unit, instructor computer, document camera and SMART Technology Sympodium. A variety of skeletons, static manikins, and models are available for student instruction. Wall mounted otoscopes and ophthalmoscopes, as well as an assortment of physical assessment equipment are available. A student auscultation manikin allows students to listen to abnormal versus normal heart and lung sounds individually or as a group.

CHHS 321 Maternal / Child Resource Lab

This area is equipped with a Noelle™ birthing simulator and her newborn baby. Also housed in this lab are SimBaby™, SimKid™ and Toddler Hal™. An infant warmer, crib, bassinets, and infant scale are also available. Two areas are equipped with suction and oxygen connections. Classroom or small group work areas are available for individualized tutoring or small group activities. SMART room standard technology podium including LCD projectors, DVD/VCR unit, instructor computer, document camera and SMART Technology Symposium is included.

Further details regarding the specific learning labs are provided at:

<http://nursing.uncc.edu/student-resources/learning-resource-center>

LRC Open Lab - Hours of Operation

The LRC's function is to facilitate learning and is an adjunct to any clinical rotation. The LRC has a minimum of 4 hours Open Lab available each week, which is overseen by the LRC staff. Open lab may be offered during the week, on one or two different days, at a minimum of 2 hours per scheduled day. Students may be required to attend open lab per their instructor's discretion or voluntarily attend to improve their clinical skill level. The schedule is posted on the instructor's electronic course page or on the bulletin board outside Rm. 307. Hours are subject to change and faculty and students will be notified as changes occur. Students needing additional practice with skills or remediation may be referred to the LRC by clinical faculty. Clinical faculty may collaborate with the LRC Director to schedule time to bring students to the LRC as an alternate assignment. Faculty and students are expected to dress in appropriate casual clothes with lab coat or clinical attire when in the LRC.

Simulation

What is Simulation?

“HEALTHCARE SIMULATIONS CAN BE SAID TO HAVE FOUR MAIN PURPOSES – EDUCATION, ASSESSMENT, RESEARCH, AND HEALTH SYSTEM INTEGRATION IN FACILITATING PATIENT SAFETY” (SSIH, 2016). Simulation education is a bridge between classroom learning and real-life clinical experience. Novice learners – and patients - may learn how to do injections by practicing on an orange or injection pad with a real needle and syringe. Much more complex simulation exercises – similar to aviation curricula that provided the basis for healthcare – may rely on computerized mannequins that perform dozens of human functions realistically in a healthcare setting such as an operating room or critical care unit that is indistinguishable from the real thing. Whether training in a “full mission environment” or working with a desktop virtual reality machine that copies the features of a risky procedure, training simulations do not put actual patients at risk. Healthcare workers are subject to unique risks in real settings too, from such things as infected needles, knife blades and other sharps as

well as electrical equipment, and they are also protected during simulations that allow them to perfect their craft (<http://www.ssih.org/About-Simulation>)

Simulating real-life experiences for students in this environment enhances psychomotor skill acquisition as well as critical thinking, clinical reasoning, and clinical judgment skills. The benefits include: 1) a range of easily accessible learning opportunities, 2) the freedom to make mistakes and to learn from them, 3) evidence-based simulation scenarios and 4) debriefing. Brief descriptions of these benefits are described below:

A range of easily accessible learning opportunities:

Learning in healthcare too frequently utilizes the apprenticeship model. In many disciplines, as opportunities to learn and practice come along, it is hoped that learners encounter enough situations to insure they become competent. This is ultimately a haphazard way to learn, and puts learners and patients at a disadvantage. Simulation offers scheduled, valuable learning experiences that are difficult to obtain in real life. Learners address hands-on and thinking skills, including knowledge-in-action, procedures, decision-making, and effective communication. Critical teamwork behaviors such as managing high workload, trapping errors, and coordinating under stress can be taught and practiced. Training runs the gamut from preventive care to invasive surgery. Because any clinical situation can be portrayed at will, these learning opportunities can be scheduled at convenient times and locations and repeated as often as necessary.

The freedom to make mistakes and to learn from them:

Working in a simulated environment allows learners to make mistakes without the need for intervention by experts to prevent patient harm. By experiencing the outcome of their mistakes, learners gain powerful insight into the consequences of their actions and the need to “get it right”. (<http://www.ssih.org/About-Simulation>)

Students participate in life-like situations using a variety of simulation methods. Low-tech simulation activities include the use of props and models for the acquisition of skills, such as the use of injection pads to teach proper injection techniques or the use of breast models to teach the proper procedure for breast examination. Half-body task manikins may be used to simulate N/G Tube or Foley Catheter insertion. Students, staff, and actors may play the role of simulated clients or family through role-play, such as when students are learning therapeutic communication or how to obtain a health history. Medium Fidelity manikins may have wireless Simpads® which allow the instructor to vary the physiologic functions of the manikin to heighten students’ ability to measure blood pressure or heart and lung sounds. Lastly, the LRC utilizes human patient simulators (HPS), such as SimMan Essential®, Hal Jr®, Noelle®, and SimBaby®, which respond in real-time based on student actions, providing a great opportunity for students to put their critical thinking, clinical reasoning and clinical judgment skills into action. The LRC promotes an environment that replicates the clinical experience to the highest

extent, and practicing in such an environment will increase the probability that acquired skills are used in the real-world setting.

Simulation can accommodate a range of learners from novices to experts. Beginners can gain confidence and “muscle memory” for tasks that then allow them to focus on the more demanding parts of care. Experts can better master the continuously growing array of new technologies from minimally invasive surgery and catheter-based therapies to robotics without putting the first groups of patients at undue risk. Some complex procedures and rare diseases simply do not present enough opportunities for practice, even to established clinicians. Examples include treating a severe allergic reaction or heart attack in an outpatient clinic setting, or handling a case of malignant hyperthermia in the operating room. This is a gap that simulation training methods can help fill. (<http://www.ssih.org/About-Simulation>) The SON Simulation Task Force continues to revise and adapt new policies and procedures that will be forthcoming in our aspirations to become a premier simulation facility. All faculty are expected to utilize the current best practices and standards promoted by the NLN and simulation organizations such as INACSL® and SIRC®. Faculty is advised to collaborate with the Simulation Task Force when implementing new simulations and scenarios. The LRC has adapted the simulation design template recommended by the National League for Nursing (NLN) as the foundation for all simulated scenarios throughout the nursing curriculums (see attached template in forms section). Further the LRC ascribes to the current INACSL Standards of Best Practice: Simulation SM ; INACSL 2016 Standard Revisions.

Simulation Scenarios and Debriefing

The LRC promotes an active learning environment, requiring engagement and participation by all students. Students are expected to report to all simulated experiences prepared and ready to actively participate. Students participating in the simulated learning experience must come into the simulated clinical environment prepared for the simulation with a basic knowledge of the material and dressed appropriately for the clinical experience. The learning environment provides the foundation for effective simulated patient experiences. Learning occurs when the environment accurately reflects reality and both the student and educator are actively engaged. Simulated experiences offer the opportunity for diverse styles of learning not offered in the classroom environment and can result in an increase in confidence felt by the student (Jeffries & Rizzolo 2006).

Students and faculty are expected to be professional and respectful of others, including all manikins and other equipment. Students are required to sign a confidentiality agreement / photography release. This helps to create a safe learning space for all involved. Situations simulated in the lab are to be considered learning tools and no discussion regarding the actions of fellow students should take place outside of the lab as this may minimize the effects of the simulation for students yet to experience it. A debriefing session, facilitated by faculty, is

conducted after all simulated experiences. After the debriefing session, students and faculty will complete an evaluation of the simulated experience, providing an opportunity to reflect on the experience and to provide constructive feedback to enhance the simulation for future students.

Debriefing involves a reflective, critical thinking analysis of a simulation exercise. It is an active process, driven by faculty and students, involving the identification and sharing of both the facts and the emotions associated with a simulated experience. The focus of the debriefing should be a positive experience that encourages students to critically think about what was done, what was not done and what could be done differently in the future. Debriefing will be facilitated by the teaching faculty and/or the Coordinator of Simulation and Interdisciplinary Research.

Faculty Preparation before Scenario Simulation

Faculty is expected to provide the Coordinator of Simulation with specific objectives, debriefing questions and list of supplies needed via a completed scenario. Please refer to the INACSL or SIRC website for the current standard templates.

The scenario for a simulation should be submitted to the Coordinator of Simulation at least two weeks prior to the scheduled experience via email. It is expected that the clinical faculty for the course will review all simulation scenarios thoroughly with faculty experienced in that specific discipline; i.e. maternity, med-surg, to be certain scenarios are vetted prior to the scheduled experiences.

Faculty will work directly with the Coordinator of Simulation, or LRC staff to obtain moulage, props and equipment. Rehearsing scenarios prior to presenting them to students is extremely important because it provides the faculty time to become familiar with the equipment and supplies being used, the scenario being presented, specific learning objectives, and debriefing points. It also allows faculty to adjust the simulation as necessary so that established objectives are fulfilled. Faculty must schedule a rehearsal time with the Coordinator of Simulation at least one week prior to presenting the scenario to students.

General Learning Resource Center Guidelines

Orientation to the Learning Resource Center

All users of the Learning Resource Center, including faculty, staff and students, are welcome to complete an orientation by LRC staff prior to utilizing any of the LRC resources. This orientation can be provided via the PPT titled “LRC Skills Lab Orientation & Safety” on the LRC webpage, or by personal tour with the LRC Director or designated faculty or staff. All users are required to print, complete and sign the orientation checklist. Please forward completed copy to the LRC Director for filing. (See checklist in Appendix B). LRC forms that may be completed online can be accessed here: [Learning Resource Center Forms](#)

Learning Resource Center Code of Conduct/Behavior

1. All faculty and students will adhere to the Learning Resource Center (LRC) guidelines.
2. All policies in the SON *Student Handbook* regarding clinical expectations apply to the LRC.
3. All faculty, staff and students will complete a LRC orientation and students will complete a Simulated Learning and Confidentiality contract *prior* to using the equipment.
4. Students are expected to report to the LRC prepared to actively participate in all learning experiences. Professional conduct and communication are expected at all times.
5. Infection control measures utilized in actual client care environments are utilized in simulated care areas. Natural oils found on hands can destroy the mannequin "skin". Hands should be washed before and after all client contact. Gloves are utilized as they are utilized in the actual clinical setting.
6. All manikins and equipment are treated with proper care and respect as if they were real, human clients.
7. Manikins are to remain on the beds at all times. Equipment should only be relocated or removed as instructed by the Director or staff of the LRC. In the event students or simulation confederates enter the beds, shoes must be removed prior.
8. Equipment and supplies are returned to their appropriate location upon completion of simulated exercises. Beds should be made and left in their lowest position after each use. Bed rails should be lowered when unoccupied by manikins. Gowns should be properly placed back on the manikin after each use.

9. Damaged, missing or malfunctioning equipment should be identified with a note and be reported immediately by emailing the “Damaged and/or Malfunctioning Equipment report form” to the Director of the LRC.

10. Ink pens, felt-tipped markers, iodine, betadine, or KY jelly should not be used on or near the mannequins. These items permanently stain task trainers and mannequin skins. Only manufacturer approved manikin lubricant shall be used.

11. Students and faculty are expected to maintain a respectful and safe learning environment for colleagues while participating and observing in simulated learning experiences.

12. Simulated learning experiences are to be used for learning purposes only and no discussion of the scenarios or the actions of fellow students should take place outside of the lab.

13. Cell phones are to be placed on airplane mode and used only with the permission of the facilitator.

14. Eating is not permitted in the LRC. Students are asked to eat in the 3rd floor atrium or other designated areas. Beverages must be in a spill proof container. Students and faculty are responsible for protecting all LRC equipment. Simulation labs are to be used for teaching and learning purposes only and not for personal use. (Ex. Appliances and furniture in the simulated apartment are not to be utilized for personal use by faculty, staff or students.)

Confidentiality

Students are expected to uphold all requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other federal or state laws requiring confidentiality. In order to preserve the realism of scenarios used in the LRC and to provide an equitable learning experience for each student, all persons utilizing the LRC are required to sign a ***Simulated Learning Contract / Confidentiality Agreement / Photo Release*** (see in Appendix B). Students are expected to protect information pertaining to the actions of peers and are expected to keep these experiences within the clinical group for learning purposes only. Students agree to report any violations to the Director of the LRC or nursing faculty. Simulated experiences may be recorded, and students must protect these recorded simulations in the same manner they would protect real client situations. Student consents are obtained during new student orientation or as applicable. Photos and videos are only to be utilized by the LRC for educational and public relations purposes. Students are not permitted to share recordings/photos with anyone. ***Any sharing of recorded LRC activities, on social media such as on YouTube, Instagram, Snapchat, etc. is inappropriate and may result in disciplinary action.*** Videos necessary for class assignments require students to complete the “Policy and Release for Course Assignment for Videotaping in the LRC form located on the LRC webpage and in Appendix B.

Remediation / Alternative Clinical Assignments

Remediation of simulated lab performance as well as actual clinical performance is recommended by clinical faculty on an individual basis. If determined necessary, the student is referred to the LRC by utilizing the Faculty Request for Student Instruction form located on the LRC webpage. The student may be asked to return to the LRC based on the recommendation of the Director, LRC staff, or clinical faculty. Faculty will collaborate with the LRC director regarding the day and time of the students' scheduled remediation. Students who are referred to the LRC are notified via email within 3 days by their instructor when a plan has been drafted. Any remediation is documented and kept in the student's permanent file. ***Students may not be sent to Open Lab or for remediation to make-up missed clinicals.*** However, clinical faculty, by prior arrangement with the LRC Director, may choose to bring students to the LRC for faculty directed alternative learning experiences as a result of missed days due to inclement weather. These simulation experiences will be created with clear clinical objectives, appropriate evaluation and conducted by the clinical teaching faculty.

Communication

All telephones, fax machines, iPads and other technological equipment housed in the LRC are to be used for simulation purposes only. All personal electronics are prohibited during any simulation experience. Resources, such as medication references, are housed in the simulation lab locker for student reference during lab or simulated experiences.

Accessing Lab Space in the LRC

Lab rooms can only be accessed through a card swipe with UNC Charlotte faculty/staff activated ID card. Activation of ID card requires request to and approval by the LRC Director. All faculty listed in Banner as instructor of record for classes with a lab component will be granted access for that semester only. Recurring courses which are routinely taught and are listed as a lab in the Banner registration portal will be automatically scheduled for the next semester. Faculty are to access the LRC Google calendars to verify their scheduled lab space. If their course is not shown on the calendar, it is the instructor's responsibility to request the lab via the procedure below. All access cards will be deactivated during the summer unless access is required and requested for summer classes. All others may contact the LRC Director for access during the summer.

Faculty shall collaborate with the LRC Director on their available days and times, and review the LRC Google calendars to ascertain the availability of the requested lab. Please contact Academic Technology (ATech) for information on adding these calendars to your own. Faculty needing to utilize a classroom or laboratory experience in the LRC should submit a request form via the LRC webpage or via this embedded link [LRC Lab Request Form](#) at least 4 weeks in advance of anticipated need; requests which are not made in sufficient time cannot be guaranteed approval. If granted, you will receive a calendar invite. Faculty's acceptance of this invite is confirmation of your reservation.

Open Lab Scheduling

Open Lab access schedules are to be coordinated via electronic sign-up by the requiring instructor. Open Lab times are subject to change each semester and faculty will be notified to share with students. Open Lab attendees are first come, first served during the scheduled times. The LRC Director or staff is not responsible for scheduling individual students for Open Lab, facilitating video assignments, or reserving audiovisual recording equipment. The requesting faculty should contact the Academic Technology (ATech) department to coordinate the reservation of video recording equipment, and collaborate with their Lead Faculty and LRC Director for scheduling and oversight of student projects in the LRC.

Inventory and Supplies

Supplies required for simulated experiences are provided by the LRC. However, personal clinical supplies such as stethoscopes, penlights, bandage scissors, goggles and pens are the responsibility of students and will not be provided. When supplies are running low or if faculty would like to request additional supplies, the Director of the LRC should be notified. Requests for purchasing new equipment/supplies should be submitted at least six weeks in advance of anticipated need utilizing the appropriate form on the LRC webpage or [Equipment and Software Request form](#). Reusable supplies should be returned to the same cabinet/cart in which they were found. Students should check for expiration dates on supplies, but it is understood that supplies that are expired are intended for practice purposes only and are utilized for that purpose. Unless soiled, and if only used with manikins, all linens should be refolded and placed back onto the linen cart in each storage area. Needles and other sharps are not to be reused under any circumstance and should be disposed of in the nearest sharps container. Faculty is ultimately responsible for ensuring their students return the supplies after each use and for their safety in the LRC.

Borrowing Equipment

Faculty and staff may check out equipment (teaching stethoscopes, models, certain manikins, etc.) for teaching/learning experiences as approved by the Director of the LRC. Faculty may request items for students to use but faculty are solely responsible for the items. Equipment must be returned within two weeks of checkout unless pre-approved by the Director of the LRC. Equipment is checked out and returned directly through the Director of the LRC or designated staff utilizing the “*Faculty request to Borrow equipment*” form on the LRC webpage or at: [Faculty Request to Borrow Capital Equipment Request Form](#) . Unless otherwise arranged, requested equipment may be picked up and returned to the CHHS Media Library Room, CHHS 311A by the requesting faculty.

In the event of unforeseen emergencies, when supplies are needed within a few days, faculty may use the *RAPID: faculty request to borrow equipment* form located on the LRC webpage. This enables LRC staff to maintain inventory and supplies for use by everyone. The lab equipment sign-out book has been discontinued and all requests should be made electronically.

Calculators

Faculty may sign out and borrow testing calculators from the SON workroom bookshelf.

Clean Up

All users of the LRC have the responsibility for maintaining the LRC in proper working condition. Rooms, equipment, and supplies should be left in an orderly manner, so that those who follow will have a positive lab experience. All trash should be disposed of appropriately (particularly organic materials such as hotdogs or pig's feet) and reusable supplies and resources should be returned to their designated locations. Beds should be remade and left in the lowest position with the bed rails down (if unoccupied by manikins). Curtains (where applicable) should be placed back against the wall and overbed tables should be placed at the foot of the bed. Bedpans, urinals, and/or basins need to be washed, dried and placed in the bedside drawers. Soiled linen is placed in covered linen hampers that may be temporarily located in the simulation lab during linen changes. Return linen hampers to the soiled utility room (bathroom in CHHS 306). Linen hamper bags should only be filled to $\frac{3}{4}$ capacity, tied securely and left in the soiled utility room. Reusable supplies should be restocked when not being used. All faculty members and LRC staff are responsible for replacing sharps containers when they become $\frac{2}{3}$ full, but the LRC Director and staff maintains responsibility for disposing of filled containers appropriately. Smart Podium & computer, monitor and overhead projector should be confirmed shutdown. Lights should be turned off upon leaving the area, and doors securely closed and locked.

Only manufacturer approved lubrication spray may be used sparingly, and monitored by the instructor or staff present. The exterior of the manikins and task trainers in the LRC are to be cleaned with mild soap and water, rinsed and dried after every use. All tubes, catheters, dressings, tape, etc. must be removed and the area cleaned appropriately upon completion of simulated exercises. Manikins are to remain in the beds and moved only at the discretion of the Director of the LRC. All injection pads need to be squeezed of any fluid and left to dry. All drainage bags must be emptied, disposed of or cleaned appropriately for later use. All chairs should be pushed under the tables, and all exam tables must have clean exam table paper exposed and replaced as needed.

Media: Videos, CD's, and DVD's

The LRC has the capability of displaying a variety of media. Multiple cameras and microphones can be located throughout the simulation labs and have the capability of recording all activity in the rooms. Audiovisual equipment should only utilized by those who have received appropriate training. Recordings are used for educational purposes and debriefing opportunities with the appropriate faculty, staff and students. The confidentiality agreement signed by students protects privacy and discourages inappropriate discussion of video contents or student performance in the simulation scenarios and is available on the LRC webpage and in Appendix B. ***Any unethical viewing or publication outside of the classroom, such as posting on YouTube, Instagram, Snapchat etc., is unacceptable and will result in disciplinary action.*** Recorded media may be saved to a backup hard drive but shall not be removed from the LRC.

Safety Guidelines

Infection Control

Healthcare workers are occupationally exposed to a variety of infectious diseases during performance of client care activities. Clients are also exposed to a variety of healthcare-associated infections (HAI) from a variety of microorganisms. These infections can be devastating and sometimes even deadly. Wherever client care is provided, adherence to infection control guidelines is necessary to ensure safe care for clients as well as healthcare personnel. Participants of simulated scenarios are expected to adhere to all standard precautions and transmission specific precautions (contact, droplet, airborne) as recommended by the Centers for Disease Control and Prevention (CDC). Simulated clients as well as any equipment coming into contact with them are considered contaminated and must be handled accordingly. Personal protective equipment (PPE) is utilized and disposed of just as it is in actual client situations. Needles and other sharps are placed into the designated sharps containers located throughout the facility. Students, staff and faculty should notify the Director of the LRC when the sharps containers are 2/3 full so that they can be changed and disposed of appropriately.

EHS and Biohazard Requirements

All faculty and staff utilizing the LRC will be required to complete the University's Environmental Health and Safety training annually and are assigned the following core courses in Percipio: Safety Orientation; Building Emergency Evacuation Plan; Slips, Trips, Falls, Hazard; Bloodborne Pathogens, PPE, and Hazard Communication. Students can access the Bloodborne Pathogens training at the following link [BBPT](#). All faculty and staff are to be aware of the MSDS sheets location either electronically; [Login for electronic MSDS lookup](#) or via the hardcopy MSDS notebook in the LRC Media Library Room 311A in order to assist anyone with treatment of a biohazardous material.

“Clean” Needle Stick Guidelines

In accordance with the Center for Disease Control (CDC), all sharps are to be handled safely and disposed of properly. In the event of a “clean” needle stick, the LRC Director or nursing faculty should be notified immediately. First aid will be provided and an incident report form will be completed. The incident will be reported according to SON guidelines. Complications from a “clean” needle stick may include: tenderness, minor bleeding or bruising, and infection.

Latex Warning

Students, staff and faculty must be aware that some of the equipment and supplies in the LRC contain latex. Those with a known sensitivity/allergy to latex should contact the LRC Director. Every student must complete and submit the SON Nursing Latex Response Plan, found on the LRC webpage and at the end of this manual. Every effort is made to replace equipment with

latex-free substitutions. All users who suffer from a latex sensitivity/allergy should familiarize themselves with the policy and take precautions while using or handling latex parts by wearing non-latex gloves.

Security and Emergencies

All faculty members are to ensure that lab rooms are secure and safe when using the rooms. Students are not to be left unattended by faculty or staff at any time. Should individual validation be necessary, faculty must schedule appointment times for students, so that they are not required to wait unattended in any lab. The doors to the LRC should be locked at all times when not in use; including lunch time. Propping open of doors is strictly prohibited if faculty/ staff is not present. The University Public Safety Department should be notified if the LRC is going to be utilized after regular business hours (evenings/weekends). It is the responsibility of the faculty and students to be aware of the location of emergency exits on each floor of the College of Health and Human Services Building. In case of a fire, all persons are expected to evacuate the building and notify Public Safety/Security immediately at extension 2200 or <http://police.uncc.edu>. Fire extinguishers are located in the CHHS hall between Rooms 320 and 321 and adjacent to CHHS Room 302. The fire alarm pull is located near the stairwell exit adjacent to CHHS 308.

Physical Safety

Unauthorized persons are not allowed in the labs at any time. Faculty may not leave students unattended in any labs. If validating students please schedule students so that they will not need to wait unattended. All students must be instructed on safe handling, repositioning and transfer techniques prior to practicing on manikins and each other. All users should use caution when practicing lifting skills and should not lift a manikin or heavy object without assistance. Proper body mechanics should be utilized during all simulated practice and clinical experiences. Students using the beds as patients should first remove their shoes to maintain a clean bed. Wheels of all equipment (beds, wheelchairs, stretchers, etc.) should remain locked. Care should be taken when dealing with electrical cords, and electrical equipment should not be used around water or wet materials. A first aid kit is stored in the Storage Room 313. There should be no running or horseplay in the LRC, and any accident or injury must be reported immediately to faculty and/or the Director of the LRC. The Director of the LRC will complete and forward all incident reports to the Associate Dean and Director of the School of Nursing.

References

- (n.d.). In *Centers for Disease Control Website*. Retrieved July 22, 2016, from <http://www.cdc.gov/>
- Jeffries, P. R. (Ed.). (2007). *Simulation in nursing education: From conceptualization to evaluation*. New York: National League for Nursing
- Laerdal International /US. (2012). <http://www.laerdal.com>
- Society for Simulation in Healthcare. (2016). <http://www.ssih.org/About-Simulation>
- Standards of Best Practice Simulation. (n.d.). In *International Nursing Association for Clinical Simulation and Learning*. Retrieved July 24, 2016, from <http://www.inacsl.org/i4a/pages/index.cfm?pageid=3407>
- The University of North Carolina at Pembroke Department of Nursing (2013).

APPENDIX A Photo Gallery



CHHS 302 Living Learning Laboratory



CHHS 305 A Mother's Place



CHHS 306 Skills Lab



CHHS 307 Simulation Lab



CHHS 311A Library Audio/Visual



CHHS 312 Exam Room 1 314 Exam Room 2 316 Exam Room 3



CHHS 313 Storage



CHHS 315 Utility Room



CHHS 320 Health Assessment Lab



CHHS 321 Maternity/Pediatric Simulation Lab

APPENDIX B

FORMS

**Following are the
Hazard Communication Job Aid, and
LRC forms.**

**Please access the LRC webpage for additional fillable/
printable forms which are online@
<http://nursing.uncc.edu/student-resources/learning-resource-center>**

Manual Forms List - hardcopies and/or online

Hazcom Job Aid pg. 25

LRC Orientation Checklist pg. 26-27

Simulated Learning Contract / Confidentiality Agreement / Photo Release pg. 28

Damaged and Malfunctioning Equipment Report pg. 30

[Simulation Design Template](#)

[INACSL Standards-Download and print](#)

Policy and Release for Videotaping pg. 33

Skills Lab Orientation Agreement and Quiz-online pg. 32

Latex Response Plan and Form -online pg. 31

Lab Equipment and/or Software-Media Request Form-online pg. 29

Environmental Health and Safety Hazard Communication Job Aid

WORK ENVIRONMENT SPECIFIC INFORMATION THAT IS REQUIRED TO BE REVIEWED WITH EMPLOYEES FOLLOWING THE EMPLOYEE COMPLETION OF THE PERCIPIO ONLINE TRAINING

How can I access Percipio?

<https://servicecatalog.uncc.edu/service/training/percipio-online-training>

Where can the employee access the OSHA Hazard Communication Standard?

<https://www.osha.gov/dsg/hazcom/ghs-final-rule.html>

What are the operations in the employee's work area where hazardous chemicals are present? Prepping and storing simulated fluids and cleaning solutions; drawing simulated blood in phlebotomy tubes. **Stored in Rm 313.**

Where is the location of the UNC Charlotte written Hazard Communication Program?

EHS Website (<http://safety.uncc.edu/m>)

Where is the location of the Chemical list/inventory &MSDS for the employee's work area?

In the MSDS book stored in Library Rm 311 A or [Login for electronic MSDS lookup](#)

What are the methods that an employee can use to detect the presence of hazardous chemicals and potential exposure? (sight, smell, etc.) **Sight, smell,**

What are the types of hazards posed by the hazardous chemicals in the employee's work area? (Flammable, explosive, corrosive, irritant, etc.) **Primarily skin and eye irritants, eye wash located in Rm. 313**

What are the measures available to the employee to protect them from the hazards of chemicals? (Ventilation, Isolation, Work Practices, Personal protective Equipment (PPE)) Review methods to obtain PPE, Standard Operating Procedures, etc. **Gloves, goggles and gowns are available in Rm 306 closet**

What is the labeling system used in the employee's work area?

Manufacturer's (GHS) <https://www.osha.gov/Publications/OSHA3492QuickCardLabel.pdf>

https://www.osha.gov/Publications/HazComm_QuickCard_Pictogram.html

NFPA http://www.nfpa.org/Assets/files/AboutTheCodes/704/NFPA704_HC2012_QCard.pdf

The University of North Carolina at Charlotte
Learning Resource Center
Orientation Checklist (2 pages)

Name: _____ Title/Position: _____

1. Policies and Procedures (Manual Posted on the LRC website)

Item	Date	CLC Staff Sign-Off
User consent for recording and photographs For student/faculty training and public relations		
Dress Code Clinical dress code followed during LRC activities		
Food and Beverages No food or drink is permitted in the LRC		
Latex Allergies Veins in task trainers and simulators contain latex. Users who have a latex allergy should wear non-latex protective gloves while handling latex parts.		
Access and hours of operation		

2. Simulator Overview & Standards

Item	Date	CLC Staff Sign-Off
Introduction to Human Simulators SimMan®, SimMan Essentials, Toddler & Baby Hal®, BabySim®, Noelle®, Susie		
Partial Task Trainers/Manikins IV arms, catheter trainers, Laerdal Virtual I.V. ®		
Medium-fidelity mannequins with Simpad, in 306/321		
Medication Dispensing Unit		
EHR		
Review of INACSL® Standards for Simulation		

3. LRC Guidelines

Item	Date	CLC Staff Sign-Off
Professional Behavior: Professional, respectful and safe behavior is expected during all LRC simulated experiences.		
Care of Human Simulators: No felt-tipped markers, ink pens, acetone, iodine, betadine, or other staining medications allowed on or near the mannequins. Only use paper tape on simulated skin. Soap and water can be used to clean the mannequins. All drainage devices, dressings and tubing's must be removed and areas cleaned at the end of simulated experiences. Must remove tape residue with alcohol wipe or baby oil.		
Care of the LRC Space: Simulation labs are to be left in the same manner as found (i.e., tables, chairs, equipment); sharps containers changed when 2/3 full; dirty linen hampers in bathrooms connected to lab		
Notify LRC staff immediately of any concerns or problems with equipment and/or supplies in the LRC.		

Additional Comment(s):

- **Note: Please print and forward to the LRC Director to be filed in your student record or employee file.**



School of Nursing Learning Resource Center

SIMULATED LEARNING CONTRACT

CONFIDENTIALITY AGREEMENT AND PHOTOGRAPHY RELEASE

Printed Name: _____

Signature: _____ # 800ID _____

Date: _____

During your participation in a simulated clinical experience (SCE) at the UNCC Learning Resource Center (LRC), you will be both an active observer and participant in simulated scenarios. The objective of the SCE is to educate pre-licensed and licensed health practitioners to better assess and improve their performance in evolving health care situations. A SCE is designed to challenge the providers' response and judgment in a controlled environment.

You will be discussing the scenarios during debriefing, but we believe that "all that takes place in the simulation environment- stays in the simulation environment!" You are to maintain strict confidentiality and not share any information from your simulation experience. This is necessary due to copyrights, and to maintain psychological safety of all the participants who will be following you in the center. By signing this agreement, you agree to this confidentiality regarding both yours and others performance, including that of your peers and faculty; whether seen in real time, on video or otherwise communicated to you. Failure to maintain confidentiality is perceived as a direct violation of the university's honor code, and will lead to consequences for the student, possibly up to and including removal from the program.

The LRC simulation process includes audio-videotaping and/or still photography of the simulation activity. These video recordings and photos may be used for instructor review, follow-up instruction, orientation to the simulated environment, research, LRC tours and seminars. You will not be identified by name unless specifically authorized by you.

By signing above, I acknowledge that I have read and understand the above expectations and agree to abide by the terms of this Agreement.

**University of North Carolina at Charlotte
Learning Resource Center
Lab Equipment and/or Software-Media Request Form**

Directions: Please complete all areas of this form. Include a copy of the catalogue page with the item circled on the copy, as well as a copy of the site license agreement in the case of software. Complete one form for each vendor. *Please forward two copies with catalogue pages and site license information to LRC Director*

Name:

Department:

Date Ordered:

Date needed:

Upon arrival, deliver equipment to:

Vendor Name, Address (if known), Phone and Fax:

Item number	Quantity	Unit	Description and Related Information (see Ordering Procedure for Nursing Labs)	Unit Price	Total Price
1					
2					
3					

Justification for above item(s):

<p>***For LRC Use Only***</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p>Director, LRC Signature: _____ Date: _____</p>

**University of North Carolina at Charlotte
Learning Resource Center
Damaged / Malfunctioning Equipment Report Form**

LRC faculty, staff or students are required to report any damaged or malfunctioning equipment to the LRC director as soon as possible but no later than 1 business day.

Please note that where an injury occurs as a result of any damaged or malfunctioning equipment an incident report shall be filed immediately with the LRC director and forwards to the SON Nursing Director.

Damage / Malfunction - Reported By	
Employee Name:	Employee Number:
Position/Title:	Department:
Company Phone:	Company Email:

Equipment Information	
List Equipment Damaged / Lost / Stolen (Please Specify)	
Equipment Identification or Serial Number(s)	
Equipment Location at Time of Damage / Malfunction	
How Was the Equipment Damaged /Broken? (Complete Description)	
Description of Damage to Equipment	
Person utilizing the Equipment at time of malfunction or discovery	

UNCC School of Nursing Latex Response Plan

When working in the clinical setting or nursing skills labs, students may be exposed to latex and other allergens.

Procedure:

For students with known sensitivity/allergy to latex or any other element in the lab or clinical environment, it is recommended that you:

- obtain consultation from your healthcare provider about your sensitivity/allergy, risks and treatment.
- Inform the lab faculty and your clinical instructor of your sensitivity.
- latex-free gloves can be provided. However, the lab environment and clinical facilities are not latex free.
- Inform the faculty member of your plan to handle a reaction.

In case of a life-threatening reaction in a nursing lab in the College of Health and Human Services, an ambulance will be summoned. Any faculty member or student may **dial 911 on the phone in either lab, state that you have a life threatening “Latex emergency” and need an ambulance. Epinephrine will be needed.**

- Do not handle the victim with any latex products.
- Student/faculty member will be transferred to a hospital in the community by ambulance. It is helpful for the ambulance personnel to know the victim’s allergies, current medications and any medical conditions.
- Neither emergency transportation nor care is provided at UNC Student Health Center.

In case of a life-threatening reaction in a nursing lab or clinical facility off campus, follow the emergency response plan for that facility.

Lab Faculty with known sensitivities shall inform the Director of Nursing Labs and the Director of the School of Nursing, to be kept in employee file and in LRC log.

If a student or faculty member has a reaction requiring medical attention, a SON Clinical Incident Report shall be completed and forwarded to the Director of the School of Nursing.

I have reviewed the above policy and understand that questions regarding this policy are to be directed to the Director of Nursing Labs.

I DO DO NOT (check one) have an allergy to latex.

Student /Faculty Signature: _____

Printed Name: _____

Date: _____

Date of Origin: 7/02 Revised: 1/15/07; Reviewed 2/14; Reviewed 7/16, 7/18; Revised 2/20

LRC LAB ORIENTATION QUIZ/AGREEMENT

(View the LRC Skills Lab Orientation & Safety PowerPoint prior to completing)

Please circle the correct answer.

1. True False Eating, drinking and cell phone use are acceptable in the labs.
2. True False The GA's are here to fill in for the instructors and teach me.
3. True False All labs are to remain locked during breaks or lunch.
4. True False Students may use their lab time to check emails, socialize, etc.
5. True False Whenever a manikin needs to be moved lab staff must assist.
6. True False Human patients should remove their shoes when in the beds.
7. True False Only paper tape can be used on manikins.

Fill in the blanks.

1. _____, lab resources and lab copies of books must remain in the lab.
2. When breaking ampules, slide ampule cover over the ampule and break it _____ from the face/body.
3. When disposing of sharps you should _____, and call out _____, before reaching to dispose of your sharp.
4. If you have a latex allergy or incident you must notify your _____ and or lab _____.
5. Manikins may only be touched with _____ hands and _____.
6. Both the latex allergy and lab orientation quiz must be _____ and submitted prior to/or the day of your first lab experience.

Your signature on this page implies that you have received and understand that you are responsible for the information covered during the skills lab orientations/powerpoint. You understand the skills lab is an extension of your clinical and all of the same rules apply, and that you agree to follow the guidelines specified therein.

Printed name of student

Cohort

Signature of student

Date



UNC CHARLOTTE

College of Health and Human Services

School of Nursing

9201 University City Blvd, Charlotte, NC 28223-0001

T704/687.7952 www.nursing.uncc.edu

Policy and Release for Course Assignment for Videotaping in the Learning Resource Center

Course Name and Number: _____

Instructor's Signature: _____

All policies and codes of student behavior and respect for other others outlined in the SON Student Handbook apply to the conduct of assignments requiring photo or video recording. By signing this release you agree to comply with the Code of Student Conduct and the specific items below. Failure to comply will result in failure of the course and possible university disciplinary action.

- Video and photography as part of a course assignment are to be used ONLY for this course.
- Consent will be obtained from anyone visible in the video. Any volunteers in the video need to verbally give consent to be videotaped on the video as well as sign the release below.
- Individuals in the video must be 18 yrs. of age or older.
- The student is responsible for finding a volunteer who will consent to the assessment. Depending on the assignment, the volunteer or participant can be a family member; friend or fellow student in the course. This must be decided by the instructor of each course.
- The assignment is turned into the instructor and no one else.
- All copies are to be destroyed at the end of the course.
- There are to be no images of UNC Charlotte or School of Nursing logos/branding visible in the images.
- Students should not use their workplaces to create videos.
- Videos are not to be shared or uploaded to online or electronic media of *any type*, i.e. Facebook, You Tube, Vines, etc.
- Videos must be done professionally and in good taste, with your instructor approving your script. This signed form must be presented to lab staff prior to you videotaping during Open lab or scheduled lab times. The instructor will forward consents for filing in the students' academic record.

Date: _____

Student Signature (print name and sign): _____

Others Participants Signature (print name and sign) _____

Appendix C

LRC Supplies & Equipment Inventory

***Subject to Change without notice as needs change**

Contact LRC Director or staff if assistance is needed

306 Alphabetical Order

ITEM NAME	SHELF#
4x4 Gauze Sponges	10
ABD Pads	9
Abmbu Bags	30
Adult BP Cuffs	6
Aero Chamber	26
Aero Inhalers	22
Airway Lubricant	27
Asthma Supplies	26
Basins	8
Blue Chux Pads	5
Bulb Syringes	23
Cath Leg Straps	14
Catheter Tray Box	15
Chest Drainage Systems	25
Chest Tubes	25
Chux Pads	5
Cotton Tipped Applicators	4
Cover Sponges	10
Disposable Mouthpiece	26
Edema Simulators	7
ETT Tubes	25
Foley Catheters	16
Glucometers and Control Solutions	2
Hydrogen Peroxide	30
In and Out Cath Trays	15
Incentive Spirometers	29
Injection Site Simulators IM and SubQ	12
Insulin Pens	2
Irrigation Supplies	11
Lancets	2
Mannequin Bladders	13
NASCO Bed 7 Mannequin Parts	19
NG Insertion Kits	24
NG Supplies	24
NG Tubes	23

Nonsterile Gloves All Sizes	3
Optic Ointment	21
Optic Drops	21
Oral Medication Drawers	20
Oral Medications	21
Oral Thermometers	6
Pill Cutters	21
PPE Gowns, Masks, Bouffant Caps	4
Respiratory Supplies	27
Restraints	18
Small Bowls	8
Spirometers	29
Sterile Drapes	9
Sterile Glove Sizing Tool	3
Sterile Gloves (All Sizes)	3
Sterile Saline	4
Sterile Water for Irrigation	4
Stethoscopes	2
Suction Catheters	28
Suction Kits	28
Syringes - 10mL, 60mL	11
TB Testing Arms	11
Thermometer Probe Covers	2
Tissues	1
Trach Care Kits	28
Trach Demo	29
Trachs	7
Tube Feeding Supplies	24
Urinals	17
Urine Meters	8
Wound Supplies Box	11
Wounds for Mannequins	8
Yankauers	28

Rm. 306 Inventory by Shelf

SHELF	ITEM NAME
1	Tissues
2 Vitals PPE	Stethoscopes, dual stethoscopes Timers Glucometers Exam Gloves (non-sterile)
3 PPE	Sterile Gloves (All Sizes) Sterile Glove Sizing Tool
4 PPE	Bouffant Caps Procedure Masks Molded Face Masks Cotton-tip Applicator Sterile Irrigation
5	PPE Gown Chux
6 Vital Signs	Restraints Adult BP Cuffs Container Oral Thermometer (additional PPE gowns)
7	Edema Scales
8	Recycle Wound Supplies Bin Wash Basins/Emesis Bins Manikin Wounds (open for packing simulation)
9 Wound Care	Wound Sizers Tape Bandage Alcohol Prep Abdominal Pads Sterile Towel Drapes
10 Wound Care	Cover Sponges Gauze Gauze Tray Sponges Super Sponges
11 Wound Care	Instructor Demo box 10 mL Luer Lock Syringes(needleless 60 mL Irrigation Syringe
12	Injection Sites TB Testing Arms Simulation Blood
13 Urology	Male/Female Genito/Urinary Manikin Parts Bladder Manikin Parts, Bowel elimination demo box
14	Sani Cloths Straps Female Urethra Manikin Foley Catheter
15	Urethral Catheter Tray Fenestrated Drapes

16	Closed System Foley Catheter Kits
17	Straight Catheters Simulation Urine Urinals
18	Restraints Bladders
19	Manikin Parts Pencil Sharpener
20 Meds	PO Medication Drawers
21	Oral medications Optic Meds PO Med Prep - Pill Splitters, Cups, Straws
22	Extra PO Med Prep- Liquids
23 NG	Dual Lumen Salem Sump Anti-Reflux Valves Bulb Syringes Salem Sump Adapters
24	NG Insertion Kits Tube Feeding Container NG Instructor demo box
25 Airway	Chest Tubes Ambu bags/ET Tubes Chest tubes Drainage system
26 Airway	Aspira Peritoneal Drainage Kit Nebulizer Disposable Cardboard Mouthpieces Asthma Supplies bag
27	Airway Lubricant O2 Masks Endo Trach Tubes Trach Demo/Respiratory Kits Pink NaCl Tubes Respiratory Supplies Trach Mask/Tubing
28	Trach Care Trays Suction Kits Yankauers Container
29	Trach Insertion Kits/Trach Demo Bin Incentive Spirometry
30	Ambu Bags Cleaner - Bleach, Hibiclens, Rubbing Alcohol
Behind Door	Oxygen Tank Sharps Key
Locker 19	Pulse Oximeter PC Cart Key Ultrascope Dual Stethoscope Resusci Anne Simulator
Locker 20	Text Books Instructional DVDs

306- Locker Contents

Item	Location
Laerdal Resusi-Anne Simulator controls	Locker 19
Book: Clinical Nursing Skill Basic to Advanced Skills 7 th Edition	Locker 20
Book: Dosage Calculations 8 th Edition	Locker 20
Book: Dosage Calculations (Instructor's Manual) 9 th Edition	Locker 20
Book: Fundamentals of Nursing The Art and Science of Nursing Care 7 th Edition	Locker 20
Book: Health assessment for Nursing Practice 5 th Edition	Locker 20
Book: Math for Nurses 8 th Edition	Locker 20
Book: Mosby's Diagnostic and Laboratory Test Reference 3 rd Edition	Locker 20
Book: Nursing 2016 Drug Handbook 7 th Edition	Locker 20
Book: Skills Checklist of Fundamentals of Nursing	Locker 20
Book: Taylor's Clinical Nursing Skills A Nursing Process Approach 3 rd Edition	Locker 20
Video: Mosby's Nursing Video Skills, Physical Examination and Health Assessment	Locker 20
Video: Taylor's Video Guide to Clinical Nursing Skills	Locker 20
Ultrascope Dual Stethoscope	Locker 21
Computer Cart key Pulse Oximeter Sharps Key	Locker 23

Room 311 Library Inventory* (Under renovation)

1	Assorted Books
2	Books, Layered Learning Simulation On Campus Clinical Days
3	Assorted books, Moulage Kit, MSDS
4	Eye Charts, Assorted books
5	New Challenger Game System Surgireal Suture Pads & Holders
6	Posters- Simulation role placards , ID bands
7	Noelle's Birthing babies-2 Glo-Germ supplies Susie 2015-Supplies
8	Auscultoscope , assorted educational supplies
9	Assorted DVD's , educational materials
10	3 tubs-Crash cart extras meds and supplies Sutures, scalpels for NP
11	Manikin Supplies/Extras -Laerdal female -Nursing Kelly extra parts & tool set -tool kits and extra parts
12	Manikin arms-dark complexion Nursing Ann Ethnic wound kits nursing kelly ethnic wound kit
13	Manikin clothes, moulage
14	Insulin device, ultrasound supplies , tuning forks, reflex hammers
15	Woods lamp, pulse oximeter, ophthalmoscopes-13, extras, laryngoscope, child bp cuffs
16	Fat vest Nutrition box

	heart disease teaching kit, Sim kids electronics and Ipad control
17	Food Pyramid-storage case IM injection pads Safety glasses Simulated fecal spray Single slides Straws urinalysis strips Food Replicas glasses-demo Plastic bags
18	Heat humidifier IV Arm, Old Classroom Challenger Game (wired) Displays: Death of a lung, Hypertension, Coronary artery stent, Angioplasty, Death of an artery, Colorectal CA (on loan to deans office) orange storage cases tool kit
19	Assorted teaching models, prostate, lungs, pelvis
20	Manikin Injection pads, simulated fecal spray, AED trainer, UA strips
21- 23	Scrubs, lab coat loaners, radio system , orange first aid boxes
24	Metal Cabinet with NP supplies –stethoscopes, oto/opthal kits

Rm. 313 Inventory List

1	Surgical gloves-latex/powder free assorted sizes
2	Exam Gloves S-XL (Latex-Free)
3	Surgical gloves
4	Surgical gloves-chloroprene
5	Shroud kits CPR board assorted surgical gloves
6	
7	Ventriculostomy kit Tracheostomy introducer tray Surgical trays
8	Alcohol prep pads Body Lotion Skin prep pads Substance Removing pads: iodine, nail polish, adhesive tape Rubbing Alcohol Hand sanitizer refills + wall mounts Maxi Wipes-germicidal cloths
9	Cotton balls Eye-wash saline laceration trays white petroleum graduated cylinders
10	Blood collection needles Filter Needles IV insert pads lever lock cannulas

	BD blood collection sets-vacutainer
11	Maxizyme detergent Simulation Blood + containers
12	Bleach Distilled water goo-gone
12	Isopropyl rubbing Alcohol Hibiclens skin cleanser
13	Central venous line-teaching supplies Irrigation trays
14	Central line dressing/change kits Central venous pressure monitor Coronary dilation catheter Swan-Ganz Combo V
15	Epi-pens + supplies Luer Access Valve Caps plastic and metal carpuments
16	Regular and NPH Insulin (used) Midazolam (demo) Pitocin (demo) Amoxicillin Antibiotic powder (Promethazine demo) Sodium Chloride-.9%-10mL 10mL Sterile water Glucophage-XR-500mg-demo (3)
17	NaCl demo doses (Promethazine) Ampules-various sizes Demo insulin regular and NPH-new
18	Saline (5 boxes 25 ct)
19	Enema Supplies Sterile specimen cups

20	Air Entertain. Oxygen mask Oxygen cannulas Oxygen Suction tubing
21	Suction Catheters
22	NG Tubes-dual lumen stomach tubes
23	Injection arms supplies-also see 29 concentrated sim Blood IV Hands, skins & veins PCA set w/injector mini bore Y-type blood sets

24	Musculoskeletal braces-variety Foot drop props Restraints
25	ABD combine pads Box-Aspira Dressing kit -Burn Sheets -Trauma dressings Cover Sponges Sterile Drapes-fenestrated
26	Box-Cold packs w/Cohesive flex bandages Cloth tape gauze/sponges Opsite & Tegaderm
27	Culture swabs compound benzoin tincture Pipets Tweezers Vaseline KY jelly Oval pads-Small Procedure Masks Surgical scrub brushes

	Surgical Sponges
28	Bandages Cotton Tipped Applicators Swabsticks-povidone -iodine -alcohol -iodophor Surgical Sponges Wound closure pads
29	IV Arms and Hands
30	Medicine Cups Abdominal wound model storage case
Rack#1	<u>METAL CART (right wall)* Alaris Pumps x2</u>
49	Electric Manikin Parts Manikin Parts <i>Floor Left:</i> Manikin Genitals and Bladders
50	IV tubing secondary IV tubing
51	IV start kits Extension sets GEMstar pump sets Primary IV plumset other IV accessories
52	250 mL NaCl .9% IV bags 500mL & 1000mL 5% alcohol in 5% dextrose inj USP (4 of each) Primary IV tubing
53	500mL .9% NaCl IV bags
54	500mL .9% NaCl IV bags
55	Tape
56	Secondary IV tubing/IV sets

57	Primary IV tubing
58-59	50 mL & 1000 mL .9% NaCl IV bags
60	500mL .9% NaCl IV bags
Rack#2	<u>Metal Rack (left of door)</u>
61	22G Hypodermic Needles 10cc Luer lock Syringes
62	Blood collection tubes-yellow, lavender, tiger, blue
63	Vacutainers 20G IV (pink) 22G IV (blue) 24G IV (yellow)
64	Saf-T Wing blood collection sets Vacutainer Eclipse IV Start Kits
65	3mL Syringes w 1/2in needle 3mL 25Gx5/8 needles
65	1ml 25Gx5/8 needles 5mL syringes
66	3mL syringes w/o needle 10mL saline flush syringes TB syringes
67	Insulin syringes 3mL syringes w/1” needle

313 Cabinets A-C

Cabinet A	Cabinet B	Cabinet C
31-1A Manikins (4)	37-1B Monoject safety syringes (red top) Insulin syringes 3mL syringes w/needle	43-1C Foley Kits
32-2A Female/male catheter models Chest Drain trainer Manikins	38-2B Paper tape 3mL w/ 25G 5/8” needles 12mL syringes various needles w/o syringes 27 Gx 1/2” needles	44-2C Foley Kits-50
33-3A Inj. Sites Bedsore models Rubber IM models Tooth Model 2/brush Dentaforms	39-3B Blunt cannulas Vial adapters Hypodermic needles -23Gx1” -22Gx1.5” -22Gx1” filter needles 25Gx5/8 needles multi sample Luer adapter	45-3C PN Trach care kits
34-4A Ostomy model Enema Simul. model	40-4B IV/Angio Catheters ~400- 23G	46-4C Trach care kits
36-5A Wound models	41-5B Blood collection tubes- Purple,blue, red Capillary tubes 1mL syringes w/needles 3mL disposable syringes Safetyglide needles -21Gx1” -22Gx1.5 “	47-5C Anti-reflux valves Foley catheter tube holder

	Pro-vent blood samplings	
36-6A Surgical Sally	42-6B Winged blood collection sets Winged infusion sets Bifurcated safety needles	48-6C SIM man kit (Part211-79850) Old Sim computer and stands

Room 320 - Inventory List by Shelf

1	KleensPec dispenser, BP cuffs
2	Otoscope tips and supplies (bulbs, lamps, etc.)
3	Doppler and gel Goniometers Nasal Speculums, Growth charts Nasopharyngeal applicators
4	Exam gloves thermometer probe covers alcohol swabs oral swabs
5	Otoscope adult specula procedure masks tongue depressors light bulbs
6	Sani wipes Skinfold calipers Ulcer risk assessments
7	Anoscope Vaginal speculum
8	Testicular models, Female anatomical model, Trans vaginal illuminators cervical scrapers Testicular self-exam models
9	Contraception IUDs Mini 'concerns' cervix display

10	Vaginal speculum
11	Breast models Pelvic simulator
12	Palpation simulator Self-exam teaching models and posters
13	Ear diagnostic trainers Cera-spoons
14	Ear exam simulators Manual audiometer
15	Skin staplers Pro-soak scalpel cleaning kits suture removal kits gauze histo-freeze suture tools surgical sutures biopsy punches
16	Suture practice arm towel drapes Ethicon knot tying board
17	Suture removal kits Injection vials Variety of syringes and needles
18	Eye exam supplies Adam Rouilly Precision vision Snellen charts
19	Drape sheets disposable lab coats
20	Drape sheets Adult bibs

21	Exam gowns disposable gowns
22	non-conductive suction tubing old nurse bags
23	Denver developmental testing kit Suction Canisters/lids/wall mounts
24	Simman 2003
25	Tape IV injection arms
26	Oral swabs disposable thermometer probe covers Plastic cups
27	0.9% NaCl inj. saline syringe flushes, Winged collection sets, XL exam gloves
28	Surgical gloves-size 7/7.5 Depends
29	Geriatric man/woman case
30	Pediatric man/woman blue case
31	spare blue bags black body bags Baby Hal's box
32	Blue chuxs pads
33	Extra storage containers
34	3mL Luer Lock syringes w/o needles 1mL tuberculin safety syringes Monoject hypodermic needles
35	Manikin clothes

	towels
36	Extra Storage containers
37	Manikins
38	Isolation gowns
39	10 cc Luer lock Syringes w/o needle Heparin vials Blunt plastic cannulas insulin safety syringes 20 mL syringes
40	Blunt cannulas Safety-lock 3mL syringes Continuous flow solution sets
41	Safety-lock 3mL syringes IV Start Kits Single use syringes
42	Simman Manikin 2003
43	Glove dispensers
45	ABD pads
46	2x2 Gauze sponges 4x4 Gauze sponges
47	Latex free Foley catheter trays Tongue depressors
48	Manikin
49	Above-CPR supplies table paper
50/51	CPR Manikins
52	CPR Lungs and supplies

	CPR faces
53	IV pole Stands
54	Above-Manikin boxes Cotton tipped applicators
55	Cotton tipped applicators simulated urine
56	Blood pressure simulators Central line model Chester chest
57	Pelvic Exam Simulators
58	Historical Gallery
59	Cardionics, Sim Man computer monitor Sam stethoscopes infrared stethoscopes
60-63	Pelvic Simulators