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Bringing Clinical to the Classroom: Using Expert Model Videos to Foster Clinical Judgment

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Outcome and Objectives

Describe the knowledge, skills, and abilities faculty must have to implement Expert Model Videos (EMV) promoting clinical judgment.

- Articulate two key steps in the process for developing a didactic activity using EMV.
- Identify two clinical judgment activities to promote successful implementation and use of EMV.
- List two positive outcomes resulting from EMV implementation.

Developing Clinical Judgment

- What is clinical judgment (CJ)
 - “Clinical judgment is the outcome of critical thinking in the clinical environment.” (Manetti, 2019, p.2)
- Why we need It
 - Clinical judgment is a necessary tool in the provision of safe nursing care.
- How students develop CJ
 - Tanner’s Clinical Judgment Model
 - Instructor-led discussion using the 5e model

5e Model to Promote Critical Thinking

- Engagement (making connection)
- Exploration (student participation)
- Explanation (students express understanding)
- Elaboration (students use knowledge)
- Evaluation (students and faculty assess learning/understanding)

(Tseng, Guo, Hseih, Lo, 2022, p.2)

Expert Model Video (EMV)

- Expert modeling videos involve clinical faculty in the nursing role providing patient care in a simulated environment.
- Expert modeling videos place learners in the observer role.
- Observing prior to participation in simulated or live events increases clinical judgment

Rogers & Franklin, 2022, p.2



Bringing Clinical to the Classroom

- Engagement = students watched videos
- Exploration= students made notes of important information from the video
- Explanation= Group discussion of reflection questions related to video
- Elaboration= Students answered NGN questions related to video
- Evaluation= Faculty and student assess learning/knowledge

Implementation

- Case study selection
 - From conception to delivery/discharge home
 - Reflecting NGN style case study
- Video Recording
 - Partnered with the skills/simulation staff
 - Enlisted a nurse educator student
- Classroom implementation
 - All were used during in-person classroom time
 - Used over 3 units (antepartum, intrapartum, postpartum)

Antepartum- Recognizing & Analyzing Cues

- Initial visit
 - <https://youtu.be/nWqIW2zAn88>
- Diagnostic testing
 - <https://youtu.be/QfJpDsoHqd8>
- Fall @ 27 weeks gestation
 - https://youtu.be/YhT8_LJfTaA
- Rhogam and discharge home
 - <https://youtu.be/7nhGxC-enz4>

Time to Make a Friend!!



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Recognizing & Analyzing Cues

- List 3 factors placing Ms. Johnson at risk during this pregnancy
- Identify 3 screenings that should be performed at each of Ms. Johnson's prenatal visits
- Based on the cues recognized and analyzed, generate 3 hypotheses applicable to Ms. Johnson's pregnancy
- Generate 3 solutions or nursing responsibilities specific to Ms. Johnson's pregnancy
- How would the nurse take action?
- List 3 positive outcomes of Ms. Johnson's pregnancy?

Intrapartum- Prioritize hypotheses

- Shift Change
- <https://youtube.com/clip/UgkxO5p3F3A04hKWrz5n6RVC7Fxs7azzirrp>
- Preop
- <https://youtube.com/clip/UgkxWVwWX-5aQ9u8BreD4qk9KOb2CNXr4FLM>
- To the OR
- https://youtube.com/clip/Ugkx6Sv0xV3wKb71uqo5r_ofl5-vzAr2ahFd

Complete the following sentence by using the list of options

- The client is at risk for _____ and will likely receive _____.
- | | |
|----------------------|------------|
| vomiting | famotidine |
| diarrhea | lomotil |
| Deep vein thrombosis | heparin |

Generate Solutions

- Gravida 2 Para 1
- 30 weeks gestation
- Pregnancy complicated by chronic hypertension.
- Prior C/Section x1 low segment transverse
- History of cocaine use.
- Rh negative
- Preterm labor

The client will likely have a _____
incision due to her history of _____.

Box 1
vertical
midline
horizontal
transverse
pfannestiel

Box 2
preterm labor
Chronic hypertension
Drug use
Prior csection

Immediate Postoperative Period Take Action



Complete the diagram by dragging from the choices below to specify what complication the client is most likely experiencing, 2 actions the nurse should take to address that complication, and 2 parameters the nurse should monitor to assess the client's progress.

Actions to Take	Potential Complication	Parameters to Monitor

Actions to Take	Potential Complications	Parameters to Monitor
Administer morphine	Hemorrhage	Temperature
Massage the fundus		Blood Pressure
Administer oxygen	Seizure	Uterine Tone
Begin antibiotics		Respiratory Rate
Administer uterotonics	Infection	Lochia
Place the client in a semi fowlers position		Pain

Postpartum- Evaluating Outcomes

- <https://youtu.be/B7pvVuiW0wM>
- What cues does the nurse recognize as improvements in thermoregulation?
- What condition is the infant born to a client with a history of drug use likely to experience?
- What two parameters does the nurse monitor in the infant born to a client with a history of drug use likely to experience?
- What three actions does the nurse take when caring for the infant born to a client with a history of drug use likely to experience?

Test Results by Comparison

2021

- Antepartum- 79%
- Intrapartum- 83%
- Postpartum- 88%

2022

- Antepartum- 83%
- Intrapartum- 82%
- Postpartum- 89%

Evaluation Results

- An eight-question survey was performed
- A five-point Likert scale was used
- Survey performed in our LMS (Canvas)

Evaluation Results

- 94% of students said the activity helped them recognize changes in the client's condition
- 100% of students said the activity helped them identify appropriate interventions as the client's condition changed
- 100% of students said the activity helped them prioritize interventions when responding to a change in the client's condition
- 100% of students said the activity helped them evaluate the effectiveness of my chosen interventions when responding to a change in the client's condition
- 100% of students said the activity helped them identify therapeutic communication techniques

Evaluation Results

- What students liked most?
 - Teacher interaction; seeing what to expect; how to assess mistakes; semi-reality helped to connect classroom learning; seeing all forms of teaching in various care arenas; brought a visual to what we were learning; helped put things into perspective
- What students liked least?
 - “There was nothing I did not like”; peer distraction; that it took up class time; videos did not show the actual interventions the nurse talked about
- What students would change?
 - Allow the students to perform the scenario; make it on our own time; more interaction in the videos; show them as prep for pre-clinical simulation

Ancillary Findings

- Opportunities to reinforce client confidentiality and privacy
- Opportunities to promote professionalism

Next Steps

- Incorporate more opportunities for students to enact skills after the use of EMV.
- Course faculty to record simulation scenarios for viewing after debriefing.
- Consider having student groups record, present, and have peer critique.
- Collaborate with the Accelerated BSN programs for use in their curriculum.

References

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