



**SIMULATION CENTER MANUAL - ITPAC PALMAS**

**Policy and Procedures**

**English version**

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ITPAC PALMAS

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# **SIMULATION CENTER MANUAL - ITPAC PALMAS Policy and Procedures**

PALMAS - TO.

Version October, 2022.

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Our primary objective is the training of medical professionals with scientific knowledge, technical capacity, ethical and humanistic posture. We value knowing and doing with quality and we invest in dynamic and innovative teaching strategies in a constant search for excellence in education.

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## 1. INTRODUCTION

The ITPAC Palmas Simulation Center is a didactic-pedagogical support sector for teaching, research and extension activities of the Medicine Course and the Dentistry Course. The use of clinical simulation as a teaching-learning strategy seeks to more effectively associate theory with practice, through active methodologies, and promote the training of physicians with high technical-scientific, ethical and political competence based on correlations with the multiple realities present in the context of Health Care.

Medical skills must be developed in a safe and adequate environment so that the techniques are practiced correctly, without generating risks or constraints to the patient or health professional. The Simulation Center provides an environment conducive to learning techniques necessary for good medical practice, involving communication strategies, procedures and the use of specific equipment. To this end, simulators, mannequins and actors are used in facilities that create a medical care environment with the objective of guaranteeing safety in the training process in patient care. The care scenarios, recreated in the laboratory, portray the most varied realities of contemporary medical practice, in order to provide the student with the acquisition of knowledge, skills training, problem solving, development of skills and attitudes based on the precepts of bioethics. Realistic simulation scenarios are the most advanced training method, mainly used in risky activities, with the objective of increasing the safety of training processes.

The institution's students participate in various activities involving medical skills techniques and simulation, preparing themselves more fully for the situations that will be experienced in clinical practice in pediatrics, surgery, trauma, urgency and emergency, obstetrics and internal medicine. Thus, the ITPAC Palmas Skills and Realistic Simulation Center provides appropriate tools for the safe and interactive training of future professionals, simulating situations with different degrees of complexity and spheres that involve health care.

## **2. GOALS**

### **2.1. Main goal**

The ITPAC Palmas Simulation Center aims to prepare students to face routine professional situations without putting the lives and health of real patients at risk.

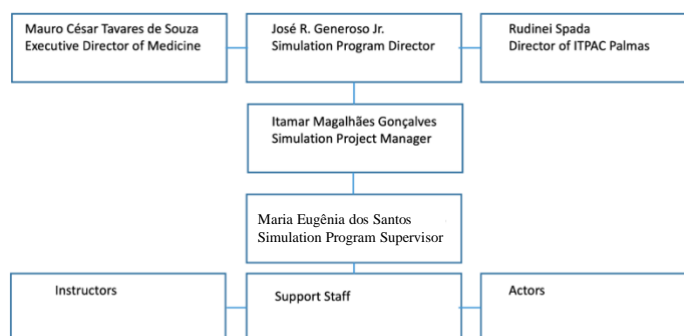
#### **2.1.2. Specific objectives**

- provide resources didactic-pedagogical activities to carry out practical teaching, research and extension activities;
- Allow the student to safely develop the practice of normal and pathological clinical examination;
- To favor the learning of medical techniques and procedures, as well as the correct use of instruments and equipment;
- Minimize the psychological impact of the student when in a real situation in medical practice, reducing their initial difficulties;
- Encourage students to understand the importance of collaborative and teamwork;
- To awaken in students and monitors the teaching vocation, as well as scientific practice.



### 3. RESPONSIBLE TEAM AND CONTACTS

#### 3.1. Technical team



ITPAC-Palmas Simulation Center is in line with the organizational chart of Afya Educacional by Mauro César Tavares de Souza, Executive Director of Medicine, who reports to Flávio Carvalho, Vice President of Operations of the Company – Undergraduate and Graduate courses.

Reporting to the Executive Director of Medicine, we have the Director of the Simulation Program (José Generoso Jr.) and the Director of ITPAC-Palmas (Rudinei Spada). The Simulation Project Manager (Itamar Magalhães Gonçalves) reports directly to the Simulation Program Director (José Generoso Jr.). The Simulation Program Supervisor (Maria Eugênia dos Santos) reports directly to the Simulation Project Manager (Itamar Magalhães Gonçalves). Instructors, Simulation Center Staff and Actors report directly to the Simulation Program Supervisor (Maria Eugênia dos Santos).

The support staff is composed of the following team: Wilson Araújo do Nascimento, Wesley Barbosa Cavalcante de Sá, Elismere Nunes Bezerra, Maria Eugenia Bezerra dos Santos Camargo, Renata Kelly Lima do Nascimento, Társsia Ferreira César do Nascimento.

The actors are: Ana Lúcia Rodrigues dos Santos, Cyntia Rochele Rodrigues Miranda, Danuzia Cristina Andrade Rodrigues, Gilberto Santos Alberto e Gleiciane Carvalho Lopes, Jaqueline Batista Braga e Vinícius de Oliveira Silva.

#### 3.2. Coordinator

Director of the Simulation Program José Roberto Generoso Junior.

## 4. OPERATION

The ITPAC Palmas Simulation Center is a set of spaces intended for teaching activities, focused on practical activities, for the development of technical and behavioral skills, used mainly by students and professors of the Medicine course of this higher education institution. The spaces and materials must be used respecting the norms of good practices, with organization and discipline, in order to stimulate the development of a mature and professional attitude. All those involved must help in the preservation of equipment and rooms, in order to guarantee a good working environment, conducive to learning.

Regular opening hours: Monday to Friday, from 7 am to 9 pm and on Saturdays from 7 am to 1 pm.

Exceptional operating regime may occur on weekends (Saturday and Sunday) as required by special courses, subject to prior appointment and availability.

## 5. STANDARDS

### 5.1. Confidentiality Procedures

#### a) Observation of simulation policy for course participants:

All participants in the simulation activities of the Simulation Program linked to ITPAC-Palmas Undergraduate Program have access to the Institution's Internal Regulation (available on the Institution's website at <https://s3.us-east-1.amazonaws.com/assets.itpacpalmas.com.br/arquivos/2022-2/institucional/regimento-geral.pdf>) as a public document that governs the conduct of educational activities.

Every participant in an ITPAC-Palmas simulation session has access to the ITPAC-Palmas Simulation Center Policies Manual and must sign a **Confidentiality Agreement Form** (available in the Manual) before participating in any Simulation activity. The simulation technician on duty, is the staff responsible to provide additional forms, information and confirm that all learners have signed their forms.

A confidentiality policy is emphasized (includes a Confidentiality Agreement - available in the Manual) that protects participants from judgments and opinions about

their performance, at different times during the simulation activities. In addition, all participants (which include students, educators, staff, and actors) must commit not to discuss each simulation scenario participant's performance outside of the simulation program.

Other guidelines include: not using confidential information to which you have access for your exclusive and/or unilateral benefit, present or future, or for the use of third parties; not to record or copy any confidential documentation to which you have access, including health simulation activities; not remove confidential and/or confidential material from the technology in use that may be made available; not to disclose confidential information and, therefore, be obliged to indemnify any damages and/or losses arising from any breach of confidentiality of the information provided; attending remote classes where actors perform in private places, not open to the public, and not sharing images or sounds, to fully comply with the above item.

#### **b) Observation policy for non-participants:**

The procedures necessary for observing simulation activities by non-participants aim to protect their integrity, in addition to protecting students, facilitators and employees.

The Director or Program Manager is the one who can approve the observation of a non-participant by means of a formal request filed with the secretariat with a minimum term of one business day.

After authorization, before accessing a certain activity as a non-participant, one must sign the Confidentiality Agreement Form available. In these situations, the entire team is previously notified and observers are not authorized to take photos or videos of these activities.

Non-participants can enter the control room, only accompanied at all times by a staff member (educator, sim tech, program manager).

The presence of a non-participant (observer) in the debriefing room is only allowed in accordance with learners and the simulation educator running the session.

#### **c) Required disclaimers and pre-event statements:**

Observers are informed of expectations of confidentiality, and of signing the confidentiality agreement form, prior to any participation. Observers must commit not to disclose information about student performance outside the program, and any

member of a visiting non-simulation program team must also apply.

**d) Required event or course acknowledgements:**

The ITPAC-Palmas Simulation Center learning activities are not sponsored by any company. In the event of any specific activity sponsored and authorized by the Program Management (conference, workshop, research activity, among others), a notification will be generated in advance (10 business days) and kept in a visible way throughout the event.

The simulations carried out in the premises of the ITPAC-Palmas Simulation Center are consolidated teaching strategies. Completion of a simulation course does not necessarily translate into obtaining a degree or certified in any given area.

Course managers and the director for simulation are responsible to certify participants after satisfactory course and event completions. An official certificate will be issued by ITPAC-Palmas when applicable.

**6. Duties of the technical team, coordination, educators and students**

**6.1. Duties of technicians**

- The technician must be punctual, assiduous and responsible for the organization of the Simulation Center in the periods of didactic simulation activities, including the practice of graduation in Medicine and Dentistry, monitoring, extension and teacher training;
- Organization, supervision and direction of the activities of the Simulation Center;
- Organization and preparation of the simulation environment, including the selection, control and availability of materials for the development of practical activities.
- After the end of the activities, re-establish the cleaning of materials and the organization of the Simulation Center;
- Guidance on the correct use of materials and resources from the Simulation Center;
- Requirement to comply with the rules of the Simulation Center, reprimanding or informing the coordinator in the event of non-compliance with them;
- Notify the coordination of any and all abnormalities detected;
- Maintenance of the Simulation Center's collection and permanent material;
- Request maintenance of equipment as needed, directly communicating any

need to coordination and the finance department;

- Inform the coordination of the Simulation Center about any incident;
- Periodic checking of the need for consumables and request for replacement to the finance department;
- Receipt of schedules and programs of classes and monitoring. Charge teachers if not received in a timely manner;
- Keep the class procedures folders of all disciplines up to date;
- Control the time of students, monitors and their activities;
- The student monitor must pass a list of attendance to the students, provided by the secretary to monitor their activities. The technician must follow up, also passing the attendance list of the Simulation Center to the students (for any eventuality later);
- File material loan request forms and activity scheduling;
- Assist the team of actors in the preparation of simulation activities involving actors.
- Assistance in the application of assessments.

## **6.2. Coordinator's Duties**

- Know the operation of mannequins and simulators;
- Promote training of teachers for planning and execution of practical classes, use of equipment and environments of the Simulation Center;
- Promote meetings and debates with the faculty with the aim of improving application and evaluation techniques in realistic simulation;
- Provide support to teachers in planning classes, providing information on the correct use of equipment and laboratory environments, helping to choose the appropriate environment and equipment and offering support in the use of simulators.
- Evaluate the adequacy of the physical structure, quality and quantity of available materials considering the academic activities planned for the environment;
- Plan acquisitions of permanent and semi-permanent materials as needed;
- Promote a link between the activities carried out at the Simulation Center and the Coordination of the Course.
- Preparation of the schedule of practical classes to use the spaces of the Simulation Center together with the teaching coordination;
- Authorization and scheduling of activities to replace classes, monitoring,

extension and training projects at the Simulation Center.

- Organization of the physical space with distribution of classes and monitoring by environment as requested and availability;
- Authorization to loan materials to other laboratories;
- Personnel management. Define roles and obligations of laboratory technicians. Organization of the work schedule of technicians;
- Inform teachers and students every six months about the rules for using the laboratory and demand that they are complied with;
- Interlocute with the team of actors to optimize simulation activities.
- Issue a warning to the student, teacher or employee who does not comply with the rules of the Simulation Center.

### **6.3. Educator's duties**

- Foster respect for the Simulation Center's rules;
- Deliver, in a timely manner, all completely completed forms and electronic requests, which are necessary for the scheduling and execution of classes or monitoring;
- Participate in the training offered to train the laboratory's teaching staff;
- Follow the program of simulation activities;
- Promote, on the part of their students, the cleaning and arrangement of materials and/or solutions used during their class, carefully check the state of conservation of the material and its functioning.;
- Inform the responsible technician of any changes regarding the classes, whether in date or time, in advance;
- Communicate in advance to the responsible technician the need for extra material;
- Notify the technician of any defect in equipment and report an incident that occurred during the classes to the coordination of the Simulation Center;
- Communicate with the team of actors, for adequate support to the scenographic activities.

### **6.4. Students' duties**

- Behave in a respectful manner within the laboratory;
- Comply with punctuality in pre-established class and monitoring schedules, in

order to avoid turmoil and inconvenience;

- To expressly follow the safety and usage rules of the Simulation Center, which are posted there and are an integral part of the Curriculum programmes.

## **7. Mechanisms to protect and address physical and psychological safety of individuals involved in simulation, including orientation to the environment.**

### **7.1. Safety and Security**

#### **a) Emergencies**

##### **i. Medical:**

Medical emergency situations must be carried out in accordance with Brazilian operational flow ([https://bvsmms.saude.gov.br/bvs/publicacoes/protocolo\\_suporte\\_basico\\_vida.pdf](https://bvsmms.saude.gov.br/bvs/publicacoes/protocolo_suporte_basico_vida.pdf)), with immediate contact to the Mobile Emergency Service System (by number 192) and the local rapid response team (+ 55 63 3216-6396), reporting location and emergency.

The local rapid response team (civilian firefighter and nurse) on duty will perform the initial emergency care on site.

All documents regarding an emergency event are in the responsibility of ITPAC-Palmas and are to be passed to the Mobile Emergency Service System upon their arrival. S-BAR model is to be used when communicating with EMS

##### **ii. Non-Medical:**

ITPAC-Palmas has a Student Support Center (NAD), a Pedagogical Support and Teaching Experience Center (NAPED) and the Psychological Support Center (NAP), with all service channels accessible and available on the institutional website ([www.itpacpalmas.com.br/sites/naped](http://www.itpacpalmas.com.br/sites/naped))

Before the beginning of every simulation session, a safe learning environment is established by the facilitator.

The existence or not of any evaluative activity is to be disclosed at the beginning of every session,

Learners are asked about any concerns or impairments that may prevent their

participation in the activity.

If a student believes it is not possible to participate in a certain activity, one is allowed not to participate and the facilitator will address the matter in private with the student to better accommodate its needs.

Exceptional cases must be taken to a decision structured by the Governance Committee of the Simulation Center.

Unprevented adverse psychological events that arise in the course of a simulation activity must generate an immediate interruption of the session by the educator.

Participants who may need to be removed from the simulation session for their safety, are to be placed in a psychological safe private room, with a simulation staff providing support at all times and referred to the Psychological Service Center (+55 63 3216-6343), on the first floor of the building. It is the educator's decision to resume the simulation session, and the local program manager can be asked on site if needed.

The Educator, together with the participant and the Psychological Assistance team (NAP) assesses individual needs and draws up an individual improvement plan, to allow for a correct approach and management, with the issuance of a statement to the Local Simulation Program Manager, including personalized feedback and counseling routines.

An Institutional Ombudsman channel is also available for any identified or anonymous contact (+55 63 3216-6346). Any breach of the Simulation Center's rules subjects the user to penalties defined by investigations in accordance with the institution's regulations.

### **iii. AED locations:**

The ITPAC-Palmas building has a public access program to Automatic External Defibrillators (AED). One piece of equipment placed on the wall of the front desk area on the ground floor and another placed on the wall at the entrance to the Simulation Center on the second floor.

The calculated access time from any area inside the building to one of the equipment is less than 90 seconds. Users on the first floor and ground floor must go to the equipment available at the ground floor reception for ready use. Third and second floor users must proceed to the Simulation Center entrance on the second floor to access the AED.

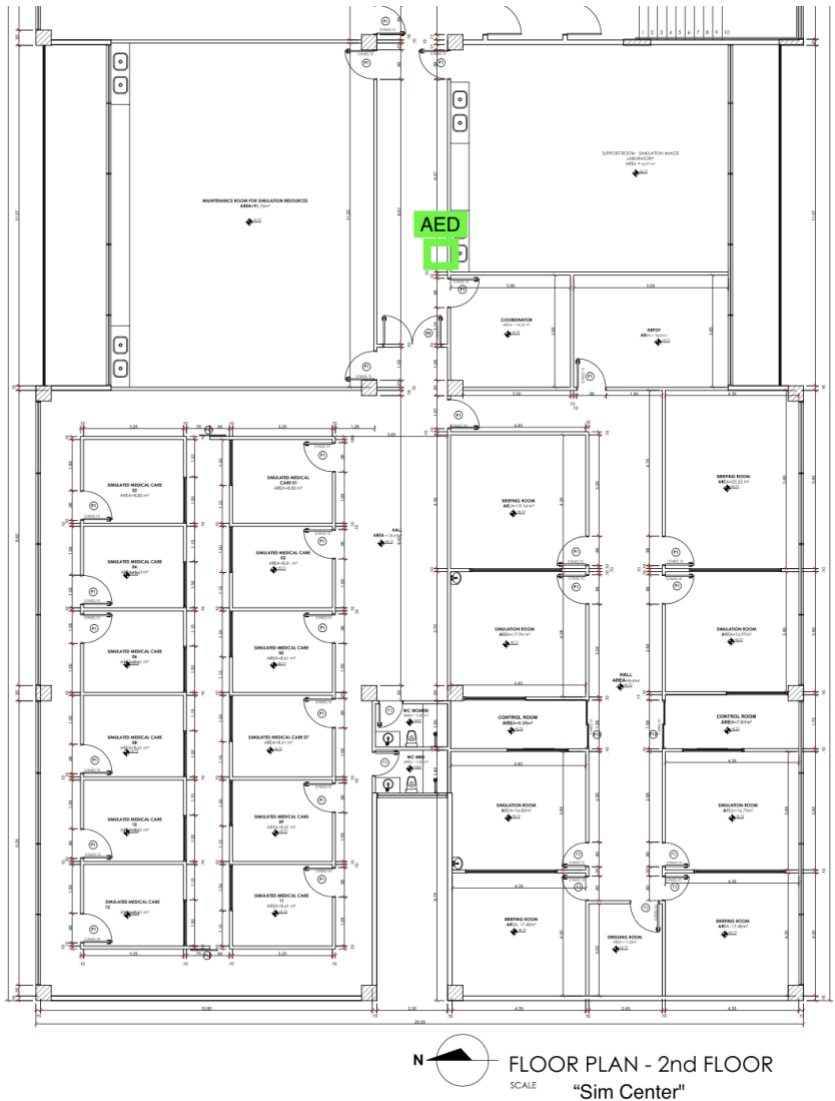
In a visible place, next to each AED, there is affixed the Mobile Emergency



Service System number (dial 192).

Simulation Center Staff and the rapid response team (civilian firefighter and nurse) on duty have training on the use of the AED and CPR.

All Medical Educators at the Simulation Center have specific training to use the AED or, through a valid course in BLS or ACLS. Medical students receive specific guidance and training in the second and sixth semesters of the course.



**b) Identification badges:** Access to the Simulation Center environment must be carried out in an identified manner, bearing a visible badge.

**c) Actors:** Simulation programs develop policies that incorporate the Associate of Standardized Patient Educator (ASPE) Best Practice Standards (2017).

The following SOBP domains are used: safe work environment, case

development, standardized patient training, and program management and professional development.

The guidelines listed by the Program are as follows:

**i. Regarding the safe work environment:** isolation of the student before the event, during breaks and after the event is concluded; private dressing room, in a restricted environment and out of sight of the participants; privacy during physical exams (drapes closed in rooms, protection from unnecessary observers and safeguarding of any video/digital recordings of exams); standardized patient mental and physical safety feedback and approach standardized during and after the event (no exposure to sharp objects, no biohazardous materials, no weapons); no restrictions on questioning the instructor, course director, or program staff after the event to address any questions or concerns that arose during the session with participants; ongoing training of actors on any equipment being used by and/or on; treat the actor with respect as part of the educational team.

The safety of the work environment (including accessibility and prevention of physical damage) was consolidated in accordance with the rules of Ordinance 1884 / GM of November 11, 1994 ([https://bvsmms.saude.gov.br/bvs/publicacoes/normas\\_montar\\_centro\\_.pdf](https://bvsmms.saude.gov.br/bvs/publicacoes/normas_montar_centro_.pdf)), aimed at examining and approving the physical projects of Health Care Establishments, to be observed throughout the national territory. Any change or event must be notified to the Simulation Project Manager at the email address (itamar.goncalves@itpacpalmas.com.br) or by phone +55 63 98121 2047.

**ii. Case Development:** alignment of case materials with the event's learning objectives and goals; joint creation with the team of case educators, so that they accurately reflect the authentic patients and situation to avoid prejudices and stereotypes; adequate time to prepare and practice the case before the event; providing accurate and sufficient details (ie medical history, family history, social history, medications, etc.) permanent availability to run a practical pilot session; regular periodic offer (monthly) of specific practical training for cases/scenarios, with possible example provided through video.

**iii. Training of the team of actors:** carried out by the coordinating actor of the team of actors, aligned with the management of the simulation program and the educators. Work on role playing, how to provide appropriate feedback to participants and

instructions on assessment tools. Face-to-face group training is preferred, allowing for robust discussion and practice, and video examples may be used for basic instructions and demonstrations.

**iv. Program Management:** the management of the team of actors is carried out by a professional with specific training in the Arts, with provision to the other actors, course directors and instructors of the best practices for the incorporation of standardized patients so that expectations are clearly defined.

**v. Professional development:** continuous and systematized feedback from the team of actors with the Program Directors and Instructors so that individual needs are detected and an individual improvement plan is defined by the team, with the supervision of the actor responsible for the management of standardized patients. Funding and support to national and international activities are available to Afya employees, and must be addressed and requested to the local Simulation coordinator within 60 days prior the activity starting date.

## **8. Mechanisms to appropriately separate simulation and actual patient care materials**

### **8.1. Sign in and sign out procedure:**

There is no real-patient care in the building of ITPAC-Palmas where the simulation center is located and simulation activities are held.

In the ITPAC-Palmas Simulation Program, no material or equipment can be used outside the Simulation Center. The Program does not carry out "in situ" training activities.

The unit nurse is responsible for accurately record what is being used in the physical space of the program, in a physical logbook belonging to the Institution. Sharps, medicines and medical equipment are stored in a closed and controlled place, being made available for use at the time of the activity, returning to the storage place soon after.

The material control policy for the emergency cart (crash cart) has a flow established in a document issued by the Governance Committee (Attached of the

Simulation Center Policy Manual).

During the execution of the simulation activities by the students, the real drugs available in the crash cart are not used to load the syringes or use on the mannequins.

Only the use of a syringe identified with the drug label, filled with water for injection, is allowed. Any breakage of seal or ampoule must be immediately discarded and recorded in the event notebook labeled “Discarded Drugs”, for compulsory communication to the nurse at the end of the activity.

The nurse on duty is responsible for locking and opening crash carts containing drugs and sharps when requested by educators.

Educators are oriented not to use any real drugs/sharps during simulation activities, unless for demonstration purposes.

Learners are to be supervised at all times by educators when the crash cart have been unlocked by the nurse.

By the end of any simulation session where real drugs/sharps were used for demonstration purposes, the nurse on duty will count the drugs/sharps, check for any missing materials/drugs/sharps in the educators presence and lock the crash cart.

If any drugs/sharps are missing or any inconsistency is found, the local Simulation Coordinator is to be notified immediately by the on duty nurse.

## **8.2. Checklist for each event policy:**

The entry and exit procedure for materials and medicines consists of the following steps:

- i. maintaining an accurate record of the professional who lends the material or equipment.
- ii. the expected return date.
- ii. his condition when he left the program.
- iii. his condition when he returns to the program.

## **8.3. Labeling policy:**

In addition, each activity has a checklist for supplies and equipment that must be checked before the event, immediately after the event and immediately upon returning to the care of the responsible nurse, thus ensuring that all equipment and supplies have been returned.

The ITPAC-Palmas Simulation Program has a policy that allows labeling of medical supplies to allow rational and safe use of these drugs, which must include "restricted use for training and non-use in patients". Any participant is not allowed to use any medication for any purpose other than the exclusive use related to the practice defined for simulation.

For **GROUP A** (Potentially Infectious Waste): The entry and use of any type of biological material (anatomical parts, blood components, carcasses, guinea pigs, animals, waste, etc.) on the premises of the Simulation Center is not allowed. Appropriate environments for this purpose are available in other laboratories of the institution.

For **GROUP B** (Chemical Waste): The chemical products allowed on the premises of the Simulation Center are restricted to those necessary for cleaning the equipment, according to the guidelines specified in the specific manuals for each product and for cleaning the environment. Examples of products with permitted use are: mild soap, detergent, 70% alcohol, bleach.

The use of drugs, chemical reagents or products considered hazardous according to the ABNT NBR 10.004 classification (toxic, corrosive, flammable and reactive) is not allowed (<https://analiticaqmcresiduos.paginas.ufsc.br/files/2014/07/Nbr-10004-2004-Classificacao-De-Residuos-Solidos.pdf>).

All hazardous waste must be segregated and packaged in isolation, in a container made of compatible, resistant, rigid and watertight material, with a screw cap and appropriate seal for each type of chemical substance, and identified with a hazardous substance symbol and risk phrase. Waste is treated in accordance with MSDS recommendations. When there is a need for waste collection, the technical team of the sector must contact the contracted company responsible for the disposal of hazardous waste, which will go to the site and collect the waste directly in the laboratory.

For **GROUP C** (Radioactive Waste): It is not allowed the entry and use in the Simulation Center of any materials resulting from human activities that contain radionuclides in quantities greater than the exemption limits specified in the CNEN rules.

For **GROUP D** (Common Waste): Common waste (which does not present a biological, chemical, radiological, sanitary or environmental risk) must be packed in black plastic bags, contained in bins with lids and pedals, present in the various areas of the institution, which can be filled up to 2/3 of its capacity. The institution's cleaning staff will collect the material daily for proper disposal.

For **GROUP E** (sharp and sharp waste): Sharps waste will be disposed of in a rigid and sealed container (descarpack type) identified with a biohazard symbol. These containers are held by wall-mounted brackets in the Simulation rooms. After filling 2/3 of its total capacity, the container must be removed by the laboratory technician, using the appropriate PPE to carry out the work, and stored in the white mobile container, which will later be collected by the special waste collection employee to its final destination, in accordance with the rules of the Municipal Sanitary Surveillance. Recapping syringes and needles is not permitted and must be discarded immediately after use.

## **9. Video Recording**

### **9.1. Free and Informed Consent Term:**

Before the first simulation activity, all participants have access to the Simulation Center Policies Manual which includes the Free and Informed Consent Term for participation in the Simulation Center activities.

Only by agreeing to the aforementioned term will the student be able to participate in the activities. The video recording, storage, distribution and destruction of stored audiovisual material policies follow the General Law for the Protection of Personal Data (LGPD) of Brazil ([https://www.planalto.gov.br/ccivil\\_03/ato2015-2018/2018/lei/l13709.htm](https://www.planalto.gov.br/ccivil_03/ato2015-2018/2018/lei/l13709.htm)), in addition to the guidelines informed below that are described in the Free and Informed Consent Form attached to the end of the Simulation Center Policies Manual.

### **9.2. Video Recording Policy:**

On that occasion, the participant receives the following information: that the video recording resources cover the entire Program, that is, the cameras are scattered throughout the environments and can actively record.

The recordings are stored on the ITPAC-Palmas local server, managed by the ITPAC-Palmas Board, through the Information Technology area.

All activity rooms support real-time audio and video streaming to any other room

in the simulation center to meet practical needs.

### **9.3. Video Distribution Policy:**

The additional audio and video recording of the simulation activities, when requested by the teacher, for use in the debriefing, can be made available in the cloud through the Canvas® platform, with exclusive and individualized access for each student, through institutional login and password. (afya.instructure.com).

The Canvas platform integrates with institutional Zoom® through a specific API. Any audio and video recording needs are configured by the Simulation Program Manager and hosted on Zoom's institutional cloud, with restricted and limited access to students and faculty.

Any availability of recorded material to students will be linked to the course in which the student is enrolled and carried out in the Canvas® restricted environment and requires authorization from the Governance Committee of the Simulation Center.

For situations involving research and reviews, institutional authorization from the ITPAC-Palmas Board is mandatory, in the use of stored images, in addition to the formal release of all participants, without exception, to allow the request for a favorable opinion to the National Research Ethics Commission (CONEP) that involves human beings (<http://conselho.saude.gov.br/plataforma-brasil-conep?view=default>).

### **9.4. Video Destruction Policy:**

The retention/deletion and destruction of local recordings on the server is the responsibility of the ITPAC-Palmas Board of Directors through the Governance Committee of the Simulation Center, being carried out periodically at the end of the semester. Cloud recordings linked to Zoom and Canvas are configured to remain permanently in the cloud.

## **10. Record and data retention**

### **10.1. Record and data retention:**

Before the first simulation activity, all participants have access to the Simulation Center Policies Manual, which includes the Free and Informed Consent Form to participate in the Simulation Center activities. Only by agreeing to the aforementioned term can the student participate in the activities.

Data related to simulation activities, such as assessments and forms, are hosted and made available through Canvas® and are not accessible to the general

public. Students of each simulation modality are allocated to the Canvas® subjects in an automated way after registering in Afya Educacional's enrollment management system, with individual access by login and password.

Canvas® provides the interactions needed for each simulation activity, including pre-tests, instructional material and videos prior to simulation activities, a dedicated Zoom room (use if needed), plus measurement instruments (SDS-student version) of anonymous submission by teachers and individualized feedback by Canvas® Speedgrader®. Data recording and retention follows Brazil's General Personal Data Protection Law - LGPD ([https://www.planalto.gov.br/ccivil\\_03/ato2015-2018/2018/lei/113709.htm](https://www.planalto.gov.br/ccivil_03/ato2015-2018/2018/lei/113709.htm)).

## **10.2. Situations involving research:**

Situations involving research on Human Beings require prior ethical analysis submitted to the National Research Ethics Commission (<http://conselho.saude.gov.br/plataforma-brasil-conep?view=default>). The National Research Ethics Commission (CONEP) is directly linked to the National Health Council (CNS).

The multi and transdisciplinary composition brings together representatives from different areas of knowledge to fulfill its main task, which is the evaluation of the ethical aspects of research involving human beings in Brazil. In fulfillment of its mission, the Commission prepares and updates guidelines and norms for the protection of research participants and coordinates the CEP/Conep System.

The CEP/Conep System is formed by Conep (the highest instance of ethical evaluation in research protocols involving human beings) and by the CEP (Research Ethics Committees), regional bodies located throughout Brazil. The System also involves researchers, research assistants, professors and university students in scientific initiation, teaching institutions, research centers, research sponsors and research participants.

Conep has autonomy for the ethical analysis of highly complex research protocols (and special thematic areas, such as human genetics, human reproduction, indigenous populations and international cooperation research) and in research projects proposed by the Ministry of Health, while the CEP are responsible for low and medium complexity research protocols and are the gateway to all research projects involving human beings. In this way, the analyzes that are the responsibility of Conep first pass through the CEP and are automatically forwarded to Conep for analysis.



## **11. Prioritization of simulation resources**

### **11.1. Approval Process:**

The ITPAC-Palmas Simulation Program has its own dedicated physical space located on the second floor of the institution. The prioritization processes are discussed and classified by the Simulation Center Committee (as per the Planned Governance Committee), according to organizational priorities, strategic objectives, resource needs, number of participants, and potential impact, and also related to the availability of facilitators. These policies support undergraduate curriculum activities, permanent education policies and community dialogue.

The following objectives were established for the operation of ITPAC-PALMAS Simulation Program during the term of the Institutional Development Plan (IDP 2021 to 2025). The overall purpose of ITPAC-Palmas Simulation Center aims to prepare students to face professional routine situations without putting the lives and health of real patients at risk. The specific purposes are: provide didactic-pedagogical resources for carrying out practical teaching, research, and extension activities; allow the student to safely develop the practice of normal and pathological clinical examination; promote the learning of medical techniques and procedures, as well as the correct use of instruments and equipment; minimize the student's psychological impact when facing a real situation in medical practice and, therefore, reduce initial embarrassment; encourage students to understand the importance of collaboration and teamwork; awaken in students and monitors the teaching vocation, as well as scientific practice.

### **11.2. Scheduling process**

Once every semester, a commission of Educators in Simulation meets in person during a planning week to define the pedagogical matrix for the next semester. At this meeting, activities are classified according to taxonomy and a contextualized and timely offer is generated for simulation students for the next semester, after approval by the Simulation Governance Committee.

Simulation activities are scheduled every January for the first semester and July for the second semester by the local simulation program manager.

Simulations using human patient simulator or actors have the priority in

scheduling.

The local simulation program manager is responsible for scheduling rooms according to the simulation sessions learning objectives and modalities.

### **11.3. Priority of use:**

The local Simulation Program Manager is responsible for adjusting the schedule if needed.

Simulation spaces previously scheduled in January (first semester) and July (second semester) approved by the simulation governance committee will have priority.

All other simulation scheduling requests are to be made by e-mail to the local program manager ([itamar.goncalves@itpacpalmas.com.br](mailto:itamar.goncalves@itpacpalmas.com.br)) within 7 business days in advance to claim priority and will be accommodated according to availability.

### **11.4. Availability of facilitators**

The current team of Educators in Simulation for the entire undergraduate medical course has forty physician educators in simulation, from different medical backgrounds.

Facilitators schedule and availability are determined every January to the first semester and every July for the second semester.

Any change on facilitators schedule is to be approved by the local simulation program manager, and requests are to be made by e-mail ([itamar.goncalves@itpacpalmas.com.br](mailto:itamar.goncalves@itpacpalmas.com.br)) within 20 business days.

### **11.5. Cancellation Policy / Rescheduling:**

The Local Simulation Manager is the focal point defined by the Planned Governance Committee for any case that requires rescheduling.

Requests are to be made by e-mail ([itamar.goncalves@itpacpalmas.com.br](mailto:itamar.goncalves@itpacpalmas.com.br)) at least one business day in advance, detailing the reason for the cancellation and the proposed date for rescheduling.

Upon receipt, the Simulation Project Manager performs the analysis and decides whether the activity will be rescheduled, sending an electronic response to

the applicant's institutional email. It is the responsibility of the Simulation Center to notify the support team and actors in case of rescheduling. It is the responsibility of the Educator requesting the notice to the students of the referred discipline that teaches classes, in a timely manner. If several requests for rescheduling arrive at the unit, the Commission will define the order of priority of service based on the complexity of the activity.

#### **11.6. Alignment with organizational priorities:**

The ITPAC-Palmas Simulation Center advances towards its institutional vocation, which is to train professionals in various areas of knowledge, ensuring interdisciplinarity, teamwork, a humanist vision, and ethical principles.

The pedagogical proposal is participative and it continuously challenges itself to provide professionals with quality training so they are able to have competitive advantages in the globalized labor market and critically and reflexively assess and influence their social context. To this end, the pedagogical project relies on the following principles:

- Champion its commitment to democracy, education, and social justice by increasing its social inclusion and positioning itself in the local and global environment;
- Work for the improvement of academic quality and favor the formal and social qualification of individuals by providing the development of political, academic, and administrative actions relevant to its mission;
- Expand the frontiers and diversity of knowledge;
- Update and modify itself by integrating teaching, scientific investigation, and extension;
- Adopt a continuous assessment and monitoring system for the actions that make up the institutional work, with emphasis on the parameters and criteria compatible with its mission;
- Ensure the quality of actions by modernizing work processes and adapting the organizational structure of human, physical, managerial, and technological resources to the requirements of its academic, technical, and administrative mission.

Higher education institutions have been challenged to insert themselves into the contradictions of the social system, often without having reached the required

maturity for a more effective performance. Being inserted in a society of uneven development, lacking qualified human resources and leaders capable of acting as agents of change, HEIs need a critical analysis that leads them to diagnose their needs and develop a project that establishes their strategic priorities of changes.

Consequently, a higher education institution must have the desire to promote creativity, an explicit function of collaborating in finding solutions to today's problems. Its concern should be to produce development models based on human values and focused on real problems.

### **11.7. Alignment with Program Strategic goals:**

Furthermore, being critical is a basic function and turns the classroom and laboratories into venues for continuously challenging previously acquired values and assumptions, that is to say, learning scenarios that contribute to the transformation of students and educators into agents of change. As a determining agent, Simulation Program acts on the social context in which it is embedded, and through its operational dynamics, helps promote local, regional, and national socio-educational development.

Implicit in these functions, the Simulation Program prioritizes alignment with the strategic goals:

- Students are encouraged to use existing knowledge to be creative. They are prepared to accept and promote change, to turn their interest to the consideration of human values, with the capacity to criticize and challenge, as well as to respond and build.
- The experiences organized and provided by ITPAC-Palmas consider issues that are significant and relevant to their lives and professional training.

Students are provided with experiences that lead to the formation of critical awareness, interdisciplinary knowledge, and teamwork involving students and educators, ratifying the institution's commitments in light of the problems that the socio-political-economic development of the region pose.

In the case of ITPAC-Palmas, the challenge for its insertion is mainly the development of society – and consequently, of the Brazilian citizen – for the creation, adaptation, and absorption of important concepts and innovations that are already taking place in more developed societies.

With this in mind, Simulation Program plans its didactic-pedagogical organization in a manner consistent with objectives it proposes to achieve, based on a set of basic principles and propositions that guide the behavior of faculty members, students, and technical-administrative staff. The main propositions and basic principles are presented below so that they can be analyzed, discussed, and incorporated by its peers and put into practice in ITPAC-Palmas's daily routine.

ITPAC-Palmas defines the following pedagogical guidelines, which inform the design of projects for the courses and programs it offers:

- Innovative teaching methodologies that promote the development of skills and competences required in the comprehensive training of students in various higher-level careers;
- Course curricula in compliance with the National Curriculum Guidelines and teaching plans, which provide integration between theory and practice, favoring scientific research and community actions;
- Formative and continuous assessment of learning, with the educator playing the role of advisor/mediator, making efforts to awaken the potential of the student and minimizing quantitative assessments centered merely on the accumulation of theoretical and doctrinal information;
- Room in the curriculum for the development of Complementary Activities, aimed at working interdisciplinary aspects into the formation of students and offering opportunities to expand this formation into related areas;
- Theory and practice working hand-in-hand, where the practical application of theories is promoted and encouraged in all pedagogical actions;
- The student is placed at the center of the pedagogical process by providing them with a quality education and continuously assisting them through their academic life;
- Afford an organizational system that respects individual differences, while harmonizing the student's academic experience at all levels and categories
- Integration of the student into the community through scientific investigation and extension programs in partnership with organizations, businesses, and governmental or private institutions.

#### **11.8. Potencial impact:**

It is essential to establish expectations regarding the profile of graduates as they complete their courses. The student who joins Simulation Center must be capable of taking his or her place in society upon graduation as a qualified professional and responsible citizen.

ITPAC-Palmas aims to train and qualify professionals, as well as stimulate research and promote the development of new processes, products, and services in close coordination with the production sectors and society as a whole, especially those that are local and regional in scope, offering mechanisms for continuing education.

The Pedagogical Project of each course covers the skills, competences, and abilities necessary for a professional future. They must be consistent with national curricular guidelines, course objectives, curricular components, supervised curricular internship, complementary activities, the evaluation system, the scientific initiation project, and the course work.

Therefore, ITPAC-Palmas seeks to provide students with global skills to:

- Develop actions, both individually and collectively, within their professional scope;
- Ensure that their practice is carried out in an integrated and continuous manner and that they are able to think critically, analyze society's problems, and find ways to solve them;
- Carry out their services within the highest quality standards and ethical principles;
- Develop actions based on the ability to make decisions based on human values and the appropriate, cost-effective use of available material resources;
- Be accessible and maintain the confidentiality of the information entrusted to them in their interaction with other professionals and the general public;
- Master both verbal and non-verbal communication, writing and reading skills, as well as communication and information technologies;
- Work in a multidisciplinary team, assuming leadership positions, with the well-being of the community foremost in mind, in addition to commitment, responsibility, decision-making skills, effective communication and management;
- Take initiatives and act with creativity and innovation;
- Be able to learn continuously in their training and in their practice;
- Be an entrepreneur; and

- Have social responsibility in the exercise of their professional activities.

To achieve this professional profile, students acquire the necessary skills and abilities through their course work to:

- Recognize and define problems, come up with solutions, think strategically, introduce changes in the process in which they are involved, act preventively, transfer and generalize knowledge, and make decisions in different degrees of complexity;
- Develop expression and communication compatible with professional practice, including negotiation skills and interpersonal or intergroup communications;
- Reflect on and act critically within the sphere of their activities, understanding their position and role in the structure or system under their responsibility, control, or supervision;
- Master the basic scientific knowledge of their area of expertise and be critical in interpreting data, identifying the nature of problems and solving them;
- Understand the principles of the scientific method to enable them to critically read technical-scientific articles and participate in the production of knowledge;
- Critically deal with the dynamics of the labor market and with the policies of their professional area.

In this way, graduates are qualified to take their place in the labor market at the end of their training.

## **12. Use of spaces and equipment**

The following rules of good conduct stand out, which must be complied with by all involved:

Respect for the timetables of the Simulation Center activities, with delays of up to ten minutes from the time scheduled for the start of the activity being tolerated. After this period, entry into that specific activity will not be allowed, and must wait for the next one, legally implying partial or total absence.

Entrance to teaching or training activities must be done in an orderly manner, always accompanied by the teacher or technician responsible for the activity, being prohibited the manipulation of any material and equipment without supervision or express authorization of teachers and technicians responsible for the Simulation Center. In this way, the professor or technician is responsible for the presence and conduct of academics on the premises of the Simulation Center.

All instructions from teachers and technical staff must be obeyed, with the aim of maintaining the safety of the individuals undergoing training and preserving the integrity of materials and equipment.

The use of cell phones, notebooks, cameras or individual electronic equipment during practical activities at the Simulation Center is prohibited, except by the teacher in charge, for exclusively academic purposes.

Filming or photography of spaces and activities without the knowledge and prior authorization of the Simulation Center coordination is prohibited.

The use of a ballpoint pen on CenSim premises is prohibited. The use of books, papers and pencils is allowed with the authorization of the teacher responsible for the practical activity.

The entry or stay of persons not involved in the activities of the Simulation Center is prohibited.

It is mandatory to respect everyone's right to work, maintaining order, discipline and minimum noise in all facilities and adjacent areas: corridors, classrooms and access hall.

It is mandatory to wear an appropriate lab coat or uniform in all practical activities at the Simulation Center. In addition, the use of closed pants and shoes is mandatory. Thus, the use of shorts, bermuda shorts, short skirts, sandals and open shoes is prohibited.

As most activities aim to recreate the work environment, following the norms of NR32 (<https://www.gov.br/trabalho-e-previdencia/pt-br/composicao/orgaos-especificos/secretaria-de-trabalho/inspecao/seguranca-e-saude-no-trabalho/normas-regulamentadoras/nr-32.pdf>) of the National Permanent Tripartite Commission of the Ministry of Health, the use of adornments such as wedding rings, rings, bracelets, watches for personal use, necklaces, dangling earrings, brooches, exposed piercings, ties and badges hanging with a cord is prohibited. It is still suggested that, preferably, during practical activities, individuals with long hair keep it tied up.

It is essential to use equipment of Individual Protection such as gloves, masks and caps, as previously defined for each of the activities individually.

The consumption of any type of food, liquid or solid, is expressly prohibited, as is smoking on the premises of the Simulation Center.

It is the user's duty and supervisors' responsibility (teachers or monitors) to ensure the cleanliness, organization, conservation and correct use of materials and equipment. At the end of each activity, users must leave the room clean and organized.



The end of activities in the Simulation Center must be informed by those responsible, the teachers involved, the technical team, so that the spaces are inspected and the equipment properly turned off by them.

The Advanced life support mannequins can only be used in the presence of a teacher who performs curricular activities on them.

The Simulation Center keys will only be provided to the coordinators, teachers and technicians responsible. It is expressly forbidden to give any student the keys. Students will not be able to stay in the Simulation Center alone, without the accompaniment of the monitor or teacher and responsible technician.

Invasive practices between students for skills training are not allowed. Such skills should only be practiced on simulators. Exceptionally, in cases where it is justified, a Free and Informed Consent Term (ICF) is required, if the student agrees to participate.

An Institutional Ombudsman channel is also available for any identified or anonymous contact, in addition to the AFYA Educacional Ethics Channels.

Any failure to comply with the rules of the Simulation Center makes the user subject to punishments defined by investigations according to the institution's bylaws.

### **13. Equipment maintenance and replacement**

Reading and complying with the Standard Operating Procedures is mandatory, in order to ensure the safety of all those involved and the preservation of available teaching materials. In case of damage or malfunction of material or equipment, it must be informed to the technicians by the teacher or person responsible for the activity during the period immediately after it.

It is up to them to attempt a local repair and, in case of impossibility, to inform the responsible Governance Committee, which must request a repair quote from the supplying companies. The budget must be informed to the coordinator and the financial sector, which, after consideration by the maintainer, will release the service. The repair deadlines must be pre-determined and informed to the coordinators, so that the activities can be properly programmed.

In situations of theft or damage to the material due to misuse, investigations and disciplinary proceedings will be initiated, according to the institution's rules. The person responsible for damage to laboratory equipment or materials due to misuse is responsible for the costs arising from the maintenance necessary to repair and/or replace the damaged material.

## 14. loan of materials

It is prohibited to remove or change rooms of any type of material or equipment without a prior written request signed in a specific form. The loan will be released after authorization from the Simulation Center coordination.

The introduction of external equipment without the knowledge and prior authorization of the coordination or technicians of the Simulation Center is also prohibited.

All materials that are eventually removed from the place and during the course of classes or in other circumstances, must be documented, returned to the place of origin, properly cleaned and in good condition.

## 15. Basic rules in case of laboratory fire

- Keep Calm
- Start combat immediately with CO<sub>2</sub> (carbon dioxide) extinguishers.
- Keep flammables away from close range.
- If the fire is out of your control, evacuate the area immediately.
- Turn on the alarm that is in the hallway (a small red box), breaking the glass to trigger it, triggering the Unit Fire Brigade.
- Evacuate the building.
- Turn off the main power switch.
- Use a cell phone. Contact the Fire Department at number 193.
- Give the exact location of the fire (teach how to get there).
- State if this is a chemical laboratory; and that they will not be able to use water to fight the fire. Order a truck with CO<sub>2</sub> or dry chemical.

NOTE: If the situation is out of control, leave the area immediately and activate the fire alarm located in the "DON'T TRY TO BE A HERO" lab fire corridor.

## 16. Work accidents

Work accidents that occur on the premises of the Simulation Center must be communicated to the department in charge of ITPAC Palmas (People and Management) and the CAT form (Communication of Work Accidents) must be completed.

Those involved in the accident should be referred to the Emergency Care Unit (UPA) for medical attention. In case of a serious accident, do not remove the victim(s) and call SAMU (192).

These norms (general and specific) must be widely disseminated to the academic community and must be posted for consultation at the Simulation Center's premises.

## **17. Physical structure**

The Simulation Center located on the second floor of the main building of ITPAC Palmas, is divided into several teaching environments, equipped with modern equipment involving cutting-edge technology in medical education, in addition to areas for storage and conservation of materials, as shown in the table below. and photographs. Such space allows the simultaneous setting of the most varied scenarios of medical practice, such as office, infirmary and emergency rooms and delivery room.

## **18. Itpac Palmas simulation center collection**

The collection of the ITPAC Palmas Simulation Center is composed of materials, parts and equipment that enable the training of specific technical skills in medical practice, as well as coping with complex conditions, such as clinical, surgical, pediatric and obstetric emergencies.

The detailed memorial with the quantity and location of storage of all the materials and equipment of the Simulation Center can be found below. Attached are also the details with comments and instructions for the equipment.

## **19. Code of ethics**

The Healthcare Simulationist Code of Ethics asserts key aspirational values important to the practice of simulation: • Integrity • Transparency • Mutual Respect • Professionalism • Accountability • Results Orientation.

Available on page: <https://www.ssih.org/SSH-Resources/Code-of-Ethics>

## 20. Annexes

### 20.1. Annex 01 (Stored material and equipment)

| <b>Stored material and equipment</b>       |  |                          |                             |
|--|--|--------------------------|-----------------------------|
| <b>THE AMOUNT</b>                          | <b>EQUIPMENT NAME<br/>(PATRIMONY)</b>  | <b>BRAND<br/>(MODEL)</b> | <b>LIVING<br/>ROOM</b>      |
| <b>Mannequins and simulators</b>           |  |                          |                             |
| <b>Advanced support – Full body</b>        |  |                          |                             |
| 03   | SimMan ALS Patient Simulator   | LAERDAL                  | Simulation 02,<br>03 and 04 |
| 02   | Advanced birthing simulator<br>full body SimMom  | LAERDAL                  | Support room                |
| 01   | Realistic full-body simulator for<br>pediatric emergencies<br>YesJunior                    | LAERDAL                  | Simulation 02               |
| 02   | Realistic full body simulator<br>for neonatal emergencies Anny                             | LAERDAL                  | Simulation 02               |
| 01   | Mannequin for Training of<br>MegaCode Advanced Life Support<br>Skills                      | LAERDEAL                 | Simulation 01               |
| 08   | neo CPR simulator  | LAERDAL                  | Support room                |
| 01   | Padiatirical mannequin for<br>intraosseous puncture training                               | LIFE FORM                | Support room                |
| 02   | Simulaodor Mannequin RN for CPR<br>and umbilical catheterization                           | Laerdal                  | Support room                |
| 01   | Mannequin simulator for intraosseous<br>puncture training and umbilical<br>catheterization | LAERDAL                  |                             |
| 01   | Simulator for CPR measurements with<br>interactive arrhythmia simulator                    | LIFE FORME               | Support room                |
| 01   | Mannequin Simulator for CPR<br>Measurements with print and storage<br>unit.                | NASCO – LIFE<br>FORM     | Support room                |
| 01   | Resuci Baby dummy simulator  | LAERDAL                  | Support room                |
| 01   | Dummy Simulator for Resuscitation<br>Measurements with ECG Simulator                       | LAERDAL                  | Support room                |
| 01   | CPR and pediatric trauma simulator for<br>one (01) year old children                       | LAERDAL                  | Support room                |
| <b>Advanced Support – Torsos and Heads</b> |  |                          |                             |
| 02   | Pediatric Intubation Head  | LAERDAL                  | Support room                |
| 04   | Neonatal Intubation Head   | LAERDAL                  | Support room                |
| 01   | Pediatric torso for CPR training and<br>endotracheal intubation                            | LAERDAL                  | Support room                |

|   |  |                      |                           |
|---|--|----------------------|---------------------------|
| 08                                      | CPR simulator<br>Adult Little ANNE   | LAERDAL              | Support room              |
| 08                                      | Lite Junior Pediatric CPR Simulator  | LAERDAL              | Support room              |
| 05                                      | Adult Advanced Intubation Simulator  | NASCO /<br>LIFE FORM | Support room              |
| 01                                      | Mannequin Torso Training<br>CPR  | LIFE FORM            | Support room              |
| <b>Mannequins for procedures</b>        |  |                      |                           |
| 03                                      | Auscultation Simulator (Lung,<br>heart)  | LIFE FORM            | Support room              |
| 01                                      | Auscultation Simulator (Lung,<br>heart rate) SAM II  | 3B                   | Support room              |
| 01                                      | Prostate exam simulator  | LIFE FORM            | Support room              |
| 02                                      | female pelvis for examination<br>gynecological (specular examination,<br>touch and vulva examination) (6828) | 3B                   | Support room              |
| 01                                      | female pelvis for examination<br>gynecological   | 3B                   | Support room              |
| 01                                      | Female pelvis for simulation of<br>vaginal delivery (with baby)  | 3B                   | Support room              |
| 01                                      | breast exam simulator  | 3B                   | Support room              |
| 03                                      | Cervical model (6896)  | 3B                   | Living room<br>Of support |
| 04                                      | Simulator for male and female<br>catheterization and care with<br>ostomies                                   | Gaumard              | Support room              |
| 05                                      | Lumbar Puncture Simulator<br>(spinal anesthesia)   | 3B                   | Support room              |
| 04                                      | cricostomy simulator and<br>tracheotomy (Cricotracheostomy)  | 3B                   | Support room              |
| 02                                      | Chest Drainage Simulator   | SDORFO               | Support room              |
| 04                                      | Chest Drainage Simulator<br>(CHEST DRAIN TRAINER)  | Pharmabotics         | Support room              |
| 02                                      | Venous Catheterization Simulator<br>Central  | BLUE PHANTOM         | Support room              |
| 06                                      | Male Multi-Venous IV Training Arm<br>Kit / Arm kit for peripheral venipuncture                               | LAERDAL              | Support room              |
| 03                                      | Venipuncture Simulator Arm<br>peripheral   |                      | Support room              |
| 03                                      | Simulator for otological exam  | LIFE FORM            | Support room              |
| <b>Materials for surgical procedure</b> |  |                      |                           |
| 20                                      | cloak  |                      | support room              |
| 10                                      | barren field   |                      | support room              |
| 100 pairs/each                          | Sterile Glove - (Sizes: 7.0; 7.5 and<br>8.0)   |                      | support room              |
| 40                                      | Protective goggles   |                      | Support room              |
| 01 box                                  | disposable cap   |                      | Support room              |

|                               |   |  |  |
|-------------------------------|---|--|--|
| 01 box                        | pro disposable foot   |  | Surgical support and technique room                          |
| 01 box                        | disposable mask   |  | Salam of support and surgical technique                      |
| 80                            | Small Surgery Pack (Straight Scissors, Straight Forceps, Curved Forceps, Door needle, scalpel handle) |  | surgical technique room                                      |
| 05 box                        | Scalpel Blade No. 22  |  | Surgical support and technique room                          |
| 15 box                        | cotton suture thread  |  | Surgical support and technique room                          |
| 15 box                        | Polypropylene suture thread   |  | Surgical support and technique room                          |
| 15 box                        | 3-0 nylon thread  |  | Deposit  |
| 15 box                        | 2-0 nylon thread  |  | Surgical technique room and support room                     |
| 10                            | Oil canister with 70% alcohol   |  | All  |
| 08                            | Flowmeter for o <sup>2</sup> (for gas ruler)  |  | 2 in the Simulation 1, 2, 3 and 4 and                        |
| 10                            | Cuba kidney   |  | 1 in each Simulation room, 5 in the deposit                  |
| 08                            | Stainless Tray  |  | 2 in each Simulation room, 4 in the warehouse                |
| 10                            | chest drain   |  | Support room   |
| 10                            | tracheostomy cannula  |  | 06 in the support room and 04 in the surgical technique room |
| <b>Rescue and Emergencies</b> |   |  |  |
| 06                            | foam cervical collar  |  | Support room   |
| 02                            | Rescue cervical collar (GG)   |  | Support room   |
| 05                            | Rescue cervical collar (G)  |  | Support room   |
| 03                            | Rescue cervical collar (M)  |  | Support room   |

|   |   |        |              |
|---|---|--------|--------------|
| 03  | Rescue cervical collar (P)                      |        | Support room |
| 01  | Rescue cervical collar (PP)                     |        | Support room |
| 03  | Bachal head immobilizer                         |        | Support room |
| 01  | adult KED                                       |        | Support room |
| 03  | polyethylene emergency board immobilization     |        | Support room |
| 03  | tie rod kit                                     |        | support room |
| 5   | Crepe bandage (12 cm)                           |        | Support room |
| 5   | Crepe bandage (20 cm)                           |        | Support room |
| two                                       | Crepe bandage (15 cm)                           |        | Support room |
| 3   | Crepe bandage (10 cm)                           |        | Support room |
| 4   | Crepe bandage (6 cm)                            |        | Support room |
| 03 (each)                                 | Wire moldable splint (Size S, M, G)             |        | Support room |
| <b>Gynecology and Obstetrics</b>          |   |        |              |
| 15 each                                   | Cervical preventive exam kit uterine            |        | Support room |
| 1 box                                     | Glass slide (secretion collection vaginal)      |        | Support room |
| 20  | Bottle for collection of preventive uterine lap |        | Support room |
| 01 liter                                  | 2% Schiller's solution                          |        | Support room |
| 04  | cytological fixative                            |        | Support room |
| <b>Equipment for physical examination</b> |   |        |              |
| 02  | Adult scale (up to 140 kg) (3806)<br>NS: 5848   | balmak | Support room |
| 06  | tuning fork                                     |        | Support room |
| 20  | Stethoscope                                     |        | Support room |
| 15  | aneroid sphygmomanometer                        |        | Support room |
| 03  | Measuring tape                                  |        | Support room |
| 06  | reflex hammer                                   |        | Support room |
| 06  | Otoscope  |        | Support room |
| 06  | ophthalmoscope                                  |        | Support room |
| 15  | digital clinical thermometer                    |        | Support room |
| 08  | clinical flashlight                             |        | Support room |

## 20.2. Annex 02 (medical emergency supplies)

| <b>Medical emergency supplies</b>       |  |                      |   |
|---|--|----------------------|---|
| 05                                      | emergency cart                                     |                      | 1 simulation 1, 2, 3 and 4 and 1 in the break room                |
| 10                                      | floor serum support                                |                      | 1 in the Simulation room 1, 2 3 and 4, and 6 in the breakout room |
| 02                                      | Biphasic cardioverter defibrillator (2242)         | mindray BeneHeart D3 | Support room  |
| 04                                      | biphasic cardioverter defibrillator                | Ninhon Condens       | 01 in each simulation room  |
| 10                                      | Automatic External Defibrillator – DEA             | LAERDAL              | Support room  |
| 10                                      | adult electrode                                    |                      | Support room  |
| 01                                      | Infusion bomb                                      | B Braun              | simulation 2  |
| 01                                      | Portable ultrasound machine                        | Alfamed – Claris 100 | Support room  |
| <b>general materials</b>                |  |                      |   |
| 04                                      | stopwatch  |                      | Support room  |
| 3                                       | conductive gel                                     |                      | Support room  |
| 5                                       | plaster  |                      | Support room  |
| 01                                      | Vinyl gloves for procedure (Size S, M, L)          |                      | Support room of 01 box in each simulation room                    |
| 08                                      | Latex procedure gloves (Size S, M, L)              |                      | Support room and simulation room                                  |
| 04                                      | micropore tape                                     |                      | Support room  |
| 50 packages                             | sterile gauze                                      |                      | Support room  |
| 2 rolls                                 | Cotton   |                      | Support room  |
| 06                                      | Collector system for SVD                           |                      | Support room  |
| 03 each                                 | Gastric catheter (n°6, 8, 10)                      |                      | Support room  |
| 4 each                                  | Levine No. 4 / 6 / 8 / 10 urethral catheter /14/16 |                      | Support room  |
| 3 each                                  | Indwelling bladder catheter No. 6 / 8 /14/16       |                      | Support room  |
| <b>Venous access, syringes, needles</b> |  |                      |   |
| 08                                      | Equipment for macrodrops serum                     |                      | 01 in the simulation room and 04 in the support room              |
| 04                                      | Microdrop serum kit                                |                      | Support room  |
| 01                                      | Infusion pump equipment                            |                      | simulation room 2   |



|               |  |  |              |
|---------------|--|--|--------------|
| 06            | Multivia - polifix   |  | Support room |
| 15            | Three-way faucets<br>to inject medication)                                       |  | Support room |
| 02 box        | disposable hypodermic needle<br>13x4.5   |  | Support room |
| 02 box        | 25x7 disposable hypodermic needle<br>or 25x8                                     |  | Support room |
| 02 box        | disposable hypodermic needle<br>40x12  |  | Support room |
| 05 box        | disposable hypodermic needle<br>30x70  |  | Support room |
| 04            | BIG type intraosseous puncture kits  |  | Support room |
| 02            | Needle for lumbar puncture   |  | Support room |
| 01 box (each) | Flexible peripheral intravenous catheter<br>- Jelco (No. 24, 22, 20, 18, 16, 14) |  | Support room |
| 01 box (each) | Rigid peripheral intravenous catheter -<br>Scalpe (#21, 23, 25, 19, 27)          |  | Support room |
| 06            | Catheter for central venous access<br>double lumen                               |  | Support room |
| 01 box        | 1 ml syringe   |  | Support room |
| 01 box        | 3 ml syringe   |  | Support room |
| 01 box        | 5 ml syringe   |  | Support room |
| 01 box        | 10 ml syringe  |  | Support room |
| 01 box        | 20 ml syringe  |  | Support room |
| 05            | Isotonic glucose serum 5% 500 ml   |  | Support room |
| 05            | 0.9% saline 500 ml   |  | Support room |
| 05            | Ringer 500 ml  |  | Support room |

|                |  |  |              |
|----------------|--|--|--------------|
| 20             | 10 ml ABD flacones   |  | Support room |
| 4 box          | disposable tourniquet  |  | Support room |
| <b>airways</b> |  |  |              |
| 04             | Silicone resuscitator with mask (Adult Ambu)                               |  | support wing |
| 05             | Silicone resuscitator with mask (pediatric ambu)                           |  | Support room |
| 04             | Silicone resuscitator with mask (Neonatal Ambu)                            |  | Support room |
| 02             | silicone masks for resuscitator (Sizes 1, 2)                               |  | Support room |
| 03             | Oxygen therapy mask with adult reservoir                                   |  | Support room |
| 02             | Pediatric oxygen mask with reservoir                                       |  | Support room |
| 30             | pocket mask  |  | Support room |
| 02             | adult venture mask   |  | Support room |
| 10             | Endotracheal tube without balloon (Multiple sizes for children and adults) |  | Support room |
| 10             | Endotracheal tubes with balloon (Multiple sizes for children and adults)   |  | Support room |
| 05             | Laryngeal tube (size 1 to 5)   |  | Support room |
| 05             | Nasopharyngeal cannula (size 0 to 6)                                       |  | Support room |
| 04             | endotracheal tube fixator  |  | Support room |
| 05             | Laryngoscope cable   |  | Support room |
| 05 of each     | Guedel cannula No. 1,2,3,4 and 5   |  | Support room |
| 10             | Nasal catheter for o <sup>2</sup> (glasses type)                           |  | Support room |
| 05             | No. 4 curved laryngoscope blades   |  | Support room |
| 05             | No. 4 curved laryngoscope blades   |  | Support room |
| 05             | No. 3 curved laryngoscope blades   |  | Support room |
| 05             | No. 2 curved laryngoscope blades   |  | Support room |
| 05             | No. 1 curved laryngoscope blades   |  | Support room |

|    |                                    |  |              |
|----|------------------------------------|--|--------------|
| 05 | No. 0 curved laryngoscope blades   |  | Support room |
| 05 | No. 4 straight laryngoscope blades |  | Support room |
| 05 | No. 3 straight laryngoscope blades |  | Support room |
| 05 | No. 2 straight laryngoscope blades |  | Support room |
| 05 | No. 1 straight laryngoscope blades |  | Support room |
| 01 | No. 0 straight laryngoscope blades |  | Support room |
| 01 | No. 0 curved laryngoscope blades   |  | Support room |
| 01 | No. 0 straight laryngoscope blades |  | Support room |

|         |  |  |               |
|---------|--|--|---------------|
| 01      | No. 00 straight laryngoscope blades      |  | Wardrobe Hall |
| 5       | Laryngeal Mask No. 1                     |  | Deposit       |
| 5       | Laryngeal Mask No. 1.5                   |  | Deposit       |
| 5       | Laryngeal Mask No. 2                     |  | Deposit       |
| 5       | Laryngeal Mask No. 3                     |  | Deposit       |
| 5       | Laryngeal Mask No. 5                     |  | Deposit       |
| 02      | Reservoirless mask                       |  | Deposit       |
| 02      | Face mask with reservoir                 |  | Wardrobe Hall |
| 10      | pocket mask                              |  | Deposit       |
| 04      | adult AMBU mask                          |  | Deposit       |
| 04      | large guide wire                         |  | Deposit       |
| 02      | small guide wire                         |  | Deposit       |
| 01 roll | Tube fastening shoelace                  |  | Deposit       |
| 03      | PVC rubber for oxygen                    |  | Wardrobe Hall |
| 05 each | Tracheal suction tube (#4, 6, 8, 10, 12) |  | Deposit       |

**20.3. Annex 03 (Emergency cart / Crash cart)**

|                   |   |                                       |                         |
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**EMERGENCY CAR  
(Crash Cart)**

|                   |   |                                       |                            |
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**SUMMARY**

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**1. CONCEPT**

The emergency car is a mobile structure made up of drawers provided with materials, medicines and equipment necessary for customer service in urgent or medical emergency situations, in the simulation center.

**2. GOAL**

Establish and standardize the procedures for the routines of organizing medicines, materials and equipment that make up the emergency car at the simulation center.

**3. GOALS**

- Standardize the medicines, materials and equipment that make up the emergency car;
- Standardize routines for organizing, checking, testing and cleaning the emergency car and its accessory components (defibrillator, laryngoscopes, board);
- Define responsibilities;
- Offer safe, efficient and quality assistance to the clients served.

**4. TARGET AUDIENCE**

- Participants in realistic simulation activities at the ITPAC-Palmas Simulation Center that simulate care for hospitalized or outpatient patients who need emergency care for events such as: cardiorespiratory arrest; airway compromise/ventilation; progressive hemodynamic instability; shock; heavy bleeding, skin rash with airway compromise, sudden loss of consciousness; convulsions; among others.

**5. SCOPE OF APPLICATION**

- ITPAC-Palmas Health Simulation Center, in previously defined scenarios, according to measurable learning objectives.

**6. RESPONSIBILITIE**

**S Multiprofessional**

**Team**

- Know the content and arrangement of materials and medicines contained in the emergency car, for exclusive use in simulation.
- Conduct ongoing education with the team;
- Report any adverse event or near miss (near miss) in the Occurrence Record Book (materials and drugs) of the Realistic Simulation Center.

### **Doctor**

- Properly use the materials and drugs listed for the exclusive purpose of realistic simulation, in accordance with the Simulation Center's policies and procedures manual.

### **Nurse**

- Organize the emergency car and its accessory components;
- Develop a service schedule for cleaning the emergency car and its accessory components;
- Monitor the performance of activities by technicians/assistants, according to the duty roster;
- Perform functional testing of the laryngoscope and defibrillator;
- Check the emergency car seals (daily checking of medicines and materials);
- List, quantify and replace the medicines and materials in the emergency car that have been used or expired;
- Periodically check the materials contained in the car as to their presence, quantity and validity.

### **Technician/Assistant**

- Cleaning the emergency car and defibrillator (monitor, cables and accessories), according to the duty roster and/or after the realistic simulation activities.
- Assist the nurse in organizing the emergency car.

### **ITPAC Palmas clerk.**

- Provide in stock the medicines used in the service in realistic simulation, together with the Pharmacy Unit.

### **Simulation Center Manager**

- Supervise compliance with the protocol;
- Propose continuing education, if any contributing factor to the error or adverse event is identified.

## **7. INSTITUTIONAL STANDARD**

### **7.1 Requesting Professional**

- The emergency trolley must consist of a mobile cabinet with enough drawers to store medicines, materials and equipment to be used in situations of emergency and urgency simulation. The composition of the emergency car, in terms of structure and components, should follow the following sequence:

|                   |   |                                       |                         |
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- ✓ **Upper base:** defibrillator; box with laryngoscopes; box with intubation materials (optional); control forms;
- ✓ **Side:** Compression board, serum support and oxygen cylinder;
- ✓ **drawers**

|          |  |
|----------|--|
| Superior | - Medicamentos ( <u>Medicações</u> ) <span style="color: red;">■</span> (tarja vermelha)   |
|          | - Materiais para o acesso intravascular ( <u>Circulação</u> ) <span style="color: yellow;">■</span> (tarja amarela)              |
|          | - Materiais para suporte ventilatório ( <u>Vias Aéreas</u> ) <span style="color: green;">■</span> (tarja verde)                  |
| Inferior | - Materiais de cateterismos vesical/gástrico ( <u>Complementares</u> ) e outros <span style="color: blue;">■</span> (tarja azul) |
|          | - Soluções <span style="color: blue;">■</span> (tarja azul)  |



Figure 1. Type of emergency car



Figure 2. Drawer identification model by color

- The equipped emergency car must be positioned in a strategic location with easy access and mobility;
- The amount of emergency car per unit will vary according to the number and level of complexity of clients assisted and the physical structure of the place;
- The emergency cart drawers must be identified with stripes of standardized colors, with the description of their respective compositions;
- The emergency car that is not in use must remain sealed/closed. The removal of the seal must occur in situations of meeting the demands of simulation in urgencies and clinical emergencies, or when checking and/or auditing;
- The compositions of materials and medications in the emergency car, following the recommendations of the Support and Advanced Life Support Guideline in Cardiology and the Brazilian Society of Cardiology, and appropriate to the institutional reality and



the profile of the assisted clientele, will be classified into three ( 3) categories: ADULT BLOCK; PEDIATRIC BLOCK (neonatal and pediatric) and AMBULATORY BLOCK (APPENDICES A/B/C);

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- The routines for organizing, checking and cleaning the emergency car and its accessory components will take place in two different situations: Routine of Conference and Testing of the Emergency Car and Routine for Reorganizing the Used Emergency Car.

### Emergency Car Checking and Testing Routine

- The emergency trolley and its accessory components must be periodically checked for their integrity/function:

**Table 1.** Description of the Emergency Car Checking and Testing Routine

| car units of emergency | Activity  | Frequency  |
|------------------------|---|--|
| emergency car          | seal conference   | Start in each period (morning, afternoon and evening) - Nurse                  |
|                        | Control periodical From medicines (conference in quantity and validity) | Weekly (Nurse's responsibility) with labeling.                                 |
|                        | Periodic control of materials (quantity and validity)                   | Monthly (1x/month) – Nurse, with labeling.                                     |
|                        | Replacement after use or loss by maturity                               | Immediately after use (Nursing Responsibility)                                 |
| defibrillator          | Defibrillator functional test   | 1 time per day (shift defined by the Nurse).                                   |
|                        | Technical review  | 1 time a year (1x/year), on a date pre-established by the technical assistance |
| laryngoscopes          | Laryngoscope functional test  | Start in each period (morning, afternoon and evening)                          |
| Oxygen cilinder        | Control (quantity and calibration)                                      | Start in each period (morning, afternoon and evening)                          |

- Medicines with an expiration date of up to 15 days must be replaced at the Pharmacy Unit;

Unconformities:

- ✓ If the Pharmaceutical Stock Unit does not have other batches of medicines available, keep the medicines until the expiration date - Nursing Control of that unit.
- ✓ If there is a shortage of materials, keep the materials until the expiration date - Nursing Control of that unit.

It is recommended that oxygenation materials, subjected to disinfection (examples: ventilator mask bag - AMBU; humidifier and oxygen masks), stay in a specific box located on the emergency car.

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- The defibrillator functional test mode will vary depending on the brand of equipment. Follow the manufacturer's recommendations. The defibrillator must be connected to the electrical network, continuously;

Unconformities:

- ✓ If there is any error in the test, inform the Equipment Center to contact the technical maintenance service.
- The functional test of the laryngoscope should consider: lamp with good lighting; perfect adjustment of the handle and blade and cleaning;

Unconformities:

- ✓ If faults are detected, check if the cause is related to the adjustment of the handle with the blade; battery or lamp (burned out or badly adjusted).
- ✓ Laryngoscopes with structural malfunctions and a burned-out summer lamp will be sent to the Equipment Center for repairs.
- The number of laryngoscopes and the type (straight or curved) and the numbering of their blade (0 / 1 /2 /3/ 4) will vary according to the age group of the clients served and the level of complexity of the simulation.
- The emergency car must be submitted to the concurrent and terminal cleaning routines, within the defined deadlines.

**Table 2.**Concurrent Cleaning Routine and emergency car terminal

| <b>Emergency Car Units</b> | <b>Cleaning/DisinfectionCompetitor</b> | <b>Cleaning/DisinfectionTerminal</b>       |
|----------------------------|--|--|
| emergency car              | - 1 time a day (externally)            | - 1 time per month (external and internal) |
| defibrillator              | - 1 time a day                         | -  |
| laryngoscopes              | - 1 time each period.                  | -  |

- The concurrent/terminal cleaning and disinfection of the emergency car and the defibrillator (housing, cables, paddles and monitor) must be carried out with a well-wrung wet compress with a little neutral soap (cleaning), followed by a well-twisted wet

compress (removal of soap and residues), finishing with a clean compress, soaked in 70% alcohol (disinfection), except for the monitor display. Note: Equipment sensitive to moisture and corrosive products;

- Concurrent disinfection of the laryngoscope (daily) should be performed with a compress soaked in 70% alcohol, concomitantly with its functional testing;

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Tested and disinfected laryngoscopes must be stored in a clean, dry box located on the upper base of the emergency cart;

- The control and testing records of the emergency car and its accessory components must be made on specific forms;
- The list of items (description and quantity of medicines and materials) present in the emergency car, as well as the control and testing forms, must be in a folder, located in its upper base.

**Used Emergency Car Reorganization Routine**

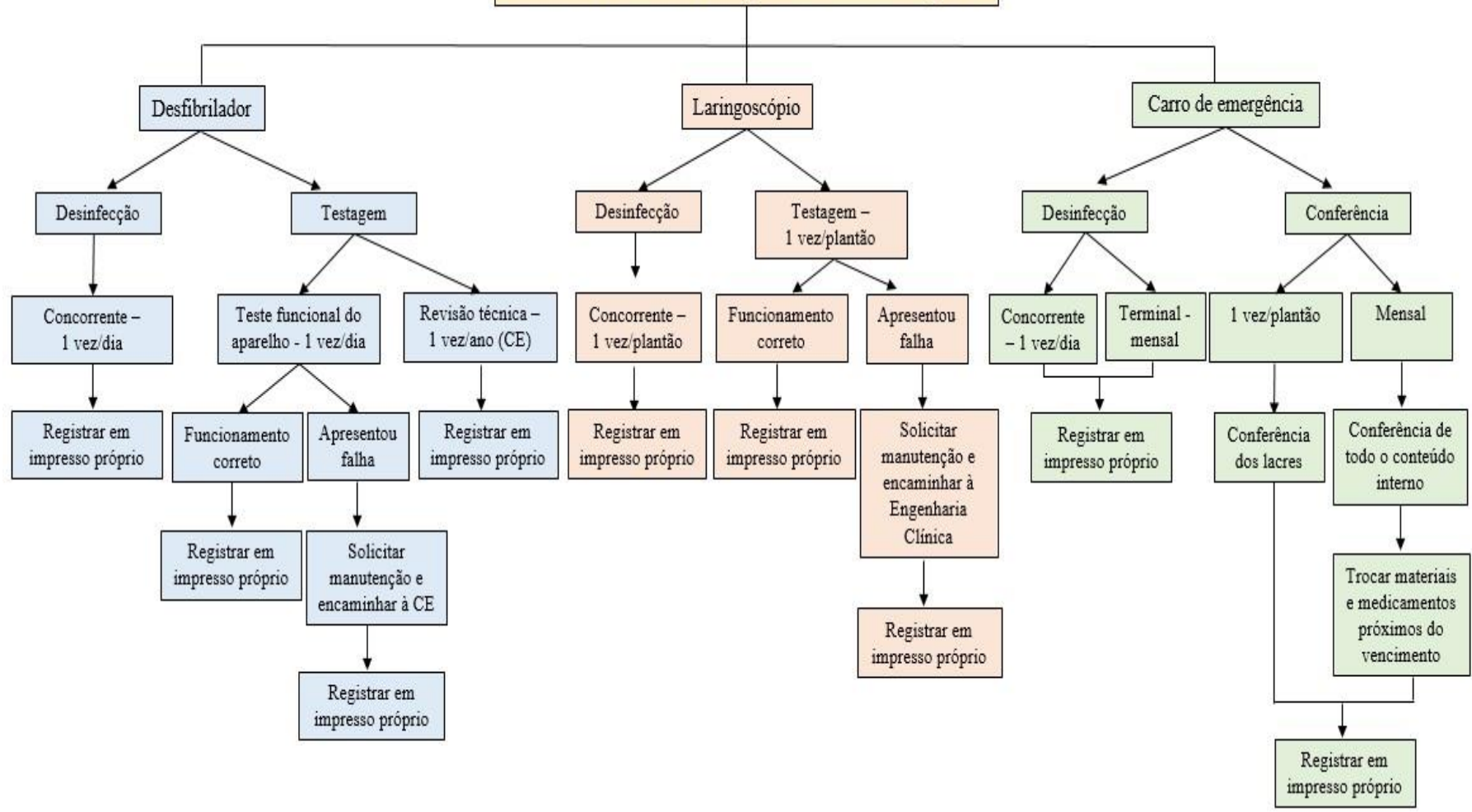
- Medicines and materials used in the care of simulations of clinical urgencies/emergencies must be replaced, in the same work shift;

Unconformities:

- ✓ If it is not possible to replace all materials/drugs before the start of the next activity, the nurse in charge must seal the drawers, record the materials and drugs that were replaced and not replaced, and inform the team that they will be responsible for the replacement.
- Each item removed and replaced from the emergency car (materials and medicines) must be registered on a specific form;
- The cleaning and terminal disinfection of the emergency car and its accessory components must take place immediately after the activity is completed.

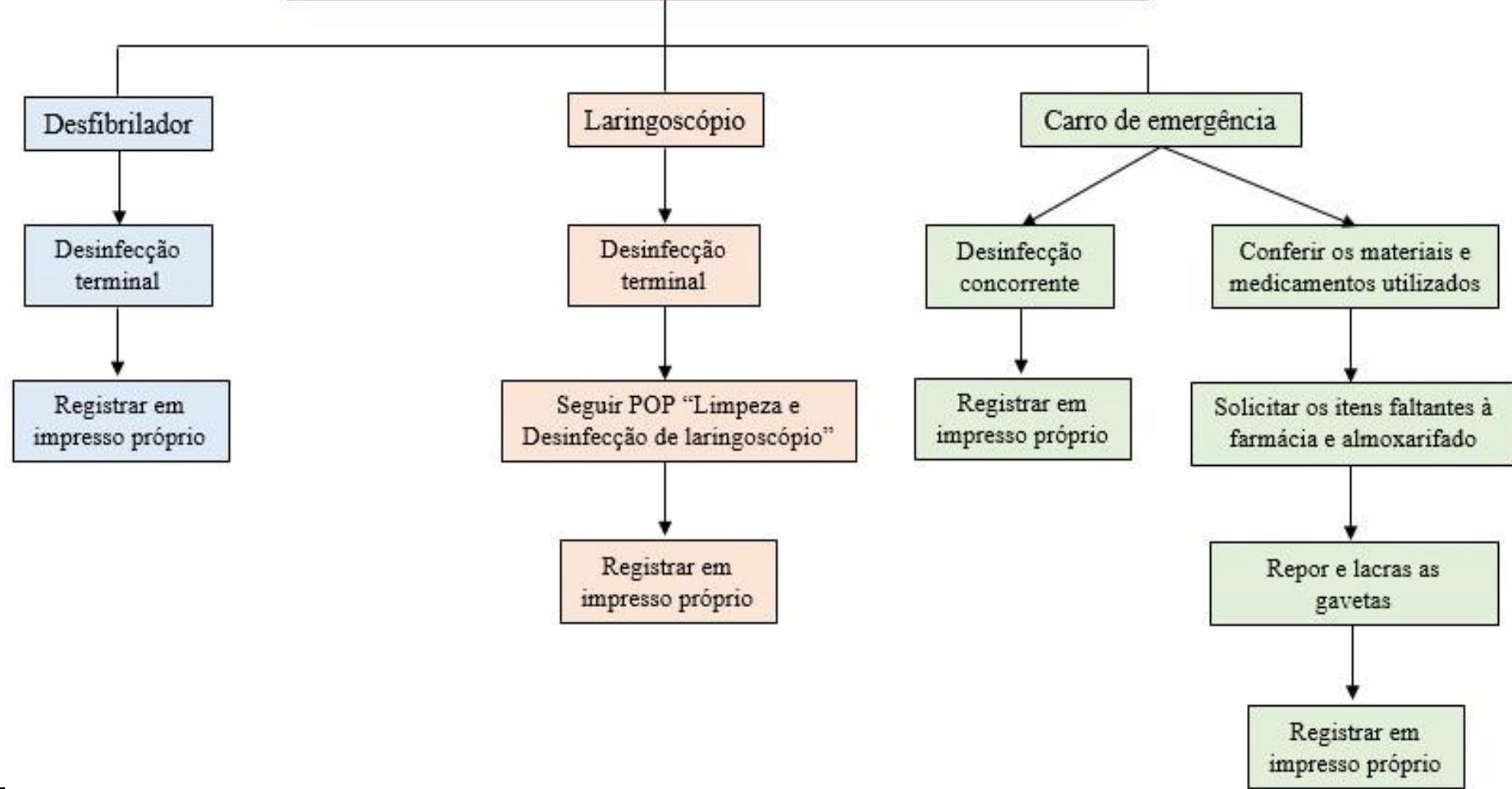
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**Rotina de Conferência e Testagem do Carro de Emergência**



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**Rotina de Conferência e Testagem do Carro de Emergência Utilizado**



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**10. PREPARATION/REVISION HISTORY**

| VERSION | DATE       | DESCRIPTION OF ACTION/AMENDMENT  |
|---------|------------|--|
| 1       | 10/01/2022 | Revision of the Protocol (PRT), in line with the ITPAC-Palmas Simulation Center Policies Manual. |

|  |                               |
|--|-------------------------------|
| <p><b>Preparation, review and update - Version 01</b></p> <p>Mauro Cesar Tavares de Souza<br/>         Jose Roberto Generoso Junior<br/>         Itamar Magalhães Gonçalves<br/>         Aldair Martins Barasuol<br/>         Maria Eugenia Bezerra dos Santos<br/>         Daiana Maria da Silva<br/>         Wellington Luiz<br/>         Marcio Augusto Violent<br/>         Tiago Timerman</p> <p><b>Approval</b><br/>         Governance Committee of the ITPAC-Palmas Simulation Center.</p> | <p>Date: 10/01/2022<br/>2</p> |
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**10. APPENDICES**

**APPENDIX THE**

**STANDARDIZED MEDICATIONS AND MATERIALS FOR THE ADULT BLOCK**

| <b>Medications (Adult Emergency Car)</b>                | <b>The amount</b> |
|---|-------------------|
| Adenosine 6mg/2mL                                       | 05 ampoules       |
| 10mL distilled water                                    | 10 ampoules       |
| Amiodarone, hydrochloride 150mg/3mL                     | 08 ampoules       |
| Atropine, sulfate 0.25mg/1mL                            | 12 ampoules       |
| Deslanoside 0.2mg/ml                                    | 01 ampoule        |
| Diazepam 10mg/2mL                                       | 05 ampoules       |
| Dobutamine, hydrochloride 250mg/20mL                    | 02 ampoules       |
| Dopamine, hydrochloride 50mg/10mL                       | 05 ampoules       |
| Epinephrine 1mg/mL (Adrenaline)                         | 20 ampoules       |
| Etomidate, 2mg /1mL                                     | 02 ampoules       |
| Sodium phenytoin 5% 250mg/5mL                           | 05 ampoules       |
| Sodium phenobarbital 200mg/2ml                          | 02 ampoules       |
| Fentanyl, citrate 0.05mg/mL 20mL                        | 02 bottles        |
| Flumazenil 0.5mg/5mL                                    | 02 ampoules       |
| Furosemide 20mg/2mL                                     | 08 ampoules       |
| Hypertonic Glucose 50% 10mL                             | 10 ampoules       |
| Calcium Gluconate 10% 0.5mEq/mL 10mL                    | 02 ampoules       |
| Haloperidol 5mg/ml                                      | 02 ampoules       |
| Hydrocortisone succinate 100mg                          | 03 bottles        |
| Hydrocortisone Succinate 500mg                          | 02 bottles        |
| Isosorbide, dinitrate 5mg (Sublingual)                  | 02 pills          |
| Lidocaine, 2% hydrochloride without vessel 20mg/mL 20mL | 03 bottles        |
| Magnesium, sulfate 10% 1.81mEq/mL                       | 02 ampoules       |
| Methylprednisolone Sodium Succinate 125mg               | 02 bottles        |
| Methylprednisolone Sodium Succinate 500mg               | 01 bottle         |
| Metoprolol, tartrate 5mg/5mL                            | 02 ampoules       |
| Midazolan, hydrochloride 15mg/3mL                       | 02 ampoules       |
| Morphine 10mg/ml  | 02 ampoules       |
| Nitroglycerin 50mg/10mL                                 | 02 ampoules       |
| Sodium nitroprusside 25mg/2mL                           | 02 ampoules       |
| Naloxone, hydrochloride 0.4mg/mL                        | 02 ampoules       |
| Norepinephrine, hemitartrate 8mg/4ml (Norepinephrine)   | 08 ampoules       |
| Succinylcholine, hydrochloride 500mg                    | 02 bottles        |
| Terbutaline, sulfate 0.5mg/mL                           | 03 ampoules       |
| Verapamil, hydrochloride 5mg/2mL                        | 02 ampoules       |

**Hemodynamics emergency trolley, add:**

| medication                 | The amount  |
|----------------------------|-------------|
| Acetylsalicylic Acid 100mg | 06 pills    |
| Clopidogrel 75mg           | 08 pills    |
| Morphine 10mg/ml           | 02 ampoules |

|   |             |
|---|-------------|
| Protamine, hydrochloride 1000IU             | 02 ampoules |
| Ticagrelor 90mg                             | 02 pills    |
| Tirofiban, hydrochloride 0.25 mg/dL - 50 mL | 02 bottles  |

**Gynecology and Obstetrics emergency car, add:**

| medication                              | The amount  |
|---|-------------|
| Hydralazine 20 mg/mL                    | 04 ampoules |
| Magnesium, sulfate 50% 4.1mEq/mL        | 04 ampoules |
| Methylethergometrine, maleate 0.2 mg/mL | 04 ampoules |
| Oxytocin 5 IU/mL                        | 16 ampoules |

**Surgical Clinic emergency car, add:**

| medication                 | The amount |
|----------------------------|------------|
| Acetylsalicylic Acid 100mg | 06 pills   |

**Medical Clinic emergency car, add:**

| medication                 | The amount |
|----------------------------|------------|
| Acetylsalicylic Acid 100mg | 06 pills   |

**Hospital Dia emergency car, add:**

| medication                 | The amount |
|----------------------------|------------|
| Acetylsalicylic Acid 100mg | 03 pills   |

**Emergency car of the Chemotherapy Center, add**

| medication                 | The amount |
|----------------------------|------------|
| Acetylsalicylic Acid 100mg | 03 pills   |

| Materials (ADULT Emergency Car)                                  | The amount    |
|--|---------------|
| <b>Drawer - Circulation</b>                                      |               |
| Flexible peripheral intravenous catheter #14 / 16 / 18 / 20 / 22 | 02 units each |
| Rigid peripheral intravenous catheter (Scalp) n°19 / 21          | 01 unit each  |
| 13x4.5 needle  | 02 units      |
| 25x7 or 25x8 needle  | 10 units      |
| 40x12 needle   | 10 units      |
| Syringe 1 mL and 3 mL  | 02 units each |
| Syringe 5 mL / 10 mL / 20 mL                                     | 07 units each |
| Photoprotective equipment  | 02 units      |
| macrodrops team  | 04 units      |
| BIC parenteral equipment   | 04 units      |
| extender   | 02 units      |
| multi-way  | 02 units      |
| Three-way faucet   | 04 units      |
| 3-0 nylon thread   | 01 unit       |
| 0.2 cotton suture thread   | 01 unit       |

|  |                 |
|--|-----------------|
| 0.0 polypropylene suture thread                      | 01 unit         |
| Scalpel Blade No. 11 / 21                            | 01 unit each    |
| Electrode  | 10 units        |
| conductive gel                                       | 01 unit         |
| <b>Drawer - Airway</b>                               |                 |
| Sterile glove 6.5 / 7.0 / 7.5 / 8.0 / 8.5            | 01 pair of each |
| Oropharyngeal cannula (guedel) No. 4 and 5           | 01 unit each    |
| Endotracheal Cannula No. 7.0 / 7.5 / 8.0 / 8.5 / 9.0 | 02 units each   |
| Tracheostomy cannula No. 7.0 / 8.5                   | 01 unit each    |
| Shoelace   | 02 units        |
| guide wire   | 02 units        |
| Suction catheter n°12 or n°14                        | 02 units        |
| Suction catheter with rigid nozzle (PSA)             | 02 units        |
| Manual resuscitator with mask (AMBU)                 | 02 units        |
| humidifier   | 02 units        |
| Oxygen mask (continuous nebulization)                | 02 units        |
| <b>Drawer - Complementary Materials</b>              |                 |
| Gastric catheter No. 18                              | 01 unit         |
| Gastric catheter No. 20                              | 01 unit         |
| silicone extensions                                  | 03 units        |
| Foley Urinary Catheter No. 14 / 16 / 18              | 01 unit each    |
| Lidocaine gel  | 01 unit         |
| Open system urine collector                          | 02 units        |
| Closed system urine collector                        | 02 units        |
| Adhesive (optional)                                  | 01 unit         |
| 70% alcohol (optional)                               | 100ml           |
| Procedure gloves (optional)                          | 05 pairs        |
| Cotton (optional)                                    |                 |
| <b>Drawer - Solutions</b>                            |                 |
| 0.9% Physiological Serum 250 mL                      | 5 vials         |
| Sodium Bicarbonate 8.4% 250mL                        | 01 bottle       |

\*\*\* List built/approved by those responsible for the unit.

|                   |   |                                       |                         |
|-------------------|---|---------------------------------------|-------------------------|
| type of Document  | <b>MATERIALS PROTOCOL SIMULATION CENTER (DO NOT USE IN PATIENTS).</b> | CSS Protocol ITPAC PALMAS - Page 1/21 |                         |
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|                   |   | Version: 1                            |                         |

## APPENDIX B

### STANDARDIZED MEDICATIONS AND MATERIALS FOR PEDIATRIC BLOCK - NEONATAL CAR

| Medication (NEONATAL Emergency Car)                    | The amount  |
|--|-------------|
| Adenosine 6mg/2mL                                      | 03 ampoules |
| 10mL distilled water                                   | 10 ampoules |
| Atropine, sulfate 0.25mg/1mL                           | 05 ampoules |
| Sodium Bicarbonate 8.4% 250mL                          | 02 bottles  |
| Dexamethasone, phosphate 4mg/mL                        | 02 ampoules |
| Dobutamine, hydrochloride 250mg/20mL                   | 02 ampoules |
| Dopamine, hydrochloride 50mg/10mL                      | 02 ampoules |
| Epinephrine 1mg/mL (Adrenaline)                        | 10 ampoules |
| Sodium phenytoin 5% 250mg/5mL                          | 02 ampoules |
| Sodium phenobarbital 100mg/mL                          | 02 ampoules |
| Fentanyl, citrate 0.05mg/mL 20mL                       | 02 bottles  |
| Furosemide 20mg/2mL                                    | 02 ampoules |
| Flumazenil 0.5mg/5mL                                   | 02 ampoules |
| Hypertonic Glucose 50% 10mL                            | 02 ampoules |
| Calcium Gluconate 10% 1.5mEq/mL 10mL                   | 02 ampoules |
| Hydrocortisone succinate 100mg                         | 01 bottle   |
| Lidocaine, 2% hydrochloride without vessel 20mg/mL 5mL | 01 ampoule  |
| Midazolam, hydrochloride 15mg/3mL                      | 02 ampoules |
| Naloxone, hydrochloride 0.4mg/mL                       | 02 ampoules |
| Norepinephrine, hemitartrate 8mg/4mL (Norepinephrine)  | 02 ampoules |
| 0.9% Physiological Serum 10 mL                         | 10 vials    |
| Succinylcholine, hydrochloride 500mg                   | 01 bottle   |
| Sodium thiopental 1000mg                               | 01 bottle   |

| Materials (NEONATAL Emergency Car)                          | The amount    |
|---|---------------|
| <b>Drawer - Circulation</b>                                 |               |
| Flexible peripheral intravenous catheter (abocath®) No. 24  | 05 units      |
| Rigid peripheral intravenous catheter (Scalp) No. 25 and 27 | 03 units each |
| Disposable hypodermic needle 13 x 4.5                       | 01 unit       |
| 25x7 / 25x8 disposable hypodermic needle                    | 03 units each |
| Disposable hypodermic needle 40x12 or 30x10                 | 03 units      |
| Macrodrops Team   | 02 units      |
| Parenteral Team   | 02 units      |
| Photosensitive Equipment                                    | 02 units      |
| Multi-way or 3-way faucet                                   | 03 units      |
| 1 ml syringe  | 01 units      |
| Syringe 3 mL / 5 mL / 10 mL                                 | 03 units each |
| 20 ml syringe   | 01 units      |
| neonatal electrodes   | 05 units      |

| <b>Drawer - Airway</b>  |               |
|---|---------------|
| Sterile Glove No. 6.0 / 6.5 / 7.0 / 7.5 / 8.0 / 8.5                   | 01 unit each  |
| Endotracheal Cannula No. 2.0 / 2.5 / 3.0 / 3.5 / 4.0 / 4.5 - uncuffed | 03 units each |
| Tracheal suction catheter No. 6 / 8 / 10                              | 01 unit each  |
| Resuscitation Mask No. 00 / 01  | 01 unit each  |
| Manual resuscitator (AMBU) 250 mL                                     | 01 unit       |
| Glasses Type Oxygen Catheter  | 02 units      |
| <b>Drawer - Complementary Materials</b>                               |               |
| Gastric catheter No. 6 / 8  | 01 unit each  |
| Levine No. 4 / 6 / 8 / 10 urethral catheter                           | 01 unit each  |
| Indwelling bladder catheter No. 6 / 8                                 | 01 unit each  |
| Closed system urine collector   | 01 unit       |
| Open system urine collector   | 02 units      |
| silicone extension  | 03 units      |
| <b>Drawer - Solutions</b>   |               |
| 0.9% saline solution 250 mL   | 01 bottle     |
| 10% glucose serum 500 mL  | 01 bottle     |
| 5% Glucose Serum 250 mL   | 01 bottle     |
| Distilled water 500 ml  | 01 bottle     |

### Medicines and Standardized Materials for PEDIATRIC BLOCK – Pediatric trolley

| Medication (PEDIATRIC Emergency Car)                    | The amount  |
|---|-------------|
| Adenosine 6mg/2ml                                       | 03 ampoules |
| 10ml distilled water                                    | 10 ampoules |
| Amiodarone, hydrochloride 150mg/3mL                     | 02 ampoules |
| Atropine, sulfate 0.25mg/1mL                            | 05 ampoules |
| Sodium Bicarbonate 8.4% 250mL                           | 04 bottles  |
| Dexamethasone, phosphate 4mg/ml                         | 02 ampoules |
| Diazepam 10mg/2mL                                       | 04 ampoules |
| Dobutamine, hydrochloride 250mg/20mL                    | 02 ampoules |
| Dopamine, hydrochloride 50mg/10mL                       | 02 ampoules |
| Epinephrine 1mg/mL (Adrenaline)                         | 10 ampoules |
| Sodium phenytoin 5% 250mg/5mL                           | 02 ampoules |
| Sodium phenobarbital 200mg/2ml                          | 02 ampoules |
| Fentanyl, citrate 0.05mg/mL 20mL                        | 04 bottles  |
| Furosemide 20mg/2ml                                     | 03 ampoules |
| Flumazenil 0.5mg/5mL                                    | 02 ampoules |
| Hypertonic Glucose 25% 10mL                             | 05 ampoules |
| Hypertonic Glucose 50% 10mL                             | 05 ampoules |
| Calcium Gluconate 10% 0.5mEq/mL 10mL                    | 02 ampoules |
| Hydrocortisone succinate 100mg                          | 02 bottles  |
| Hydrocortisone Succinate 500mg                          | 02 bottles  |
| Lidocaine, 2% hydrochloride without vessel 20mg/mL 20mL | 01 bottle   |
| Lidocaine, 2% hydrochloride without vessel 20mg/mL 5mL  | 02 ampoules |
| Methylprednisolone Sodium Succinate 125mg               | 02 bottles  |
| Methylprednisolone Sodium Succinate 500mg               | 01 bottle   |
| Midazolam, hydrochloride 15mg/3mL                       | 03 ampoules |
| Naloxone, hydrochloride 0.4mg/mL                        | 02 ampoules |
| Sodium nitroprusside 25mg/2mL                           | 01 ampoule  |
| Norepinephrine, hemitartrate 8mg/4mL (Norepinephrine)   | 02 ampoules |

|                                      |             |
|--------------------------------------|-------------|
| Promethazine, hydrochloride 50mg/2mL | 02 ampoules |
| Physiological Serum 0.9% 10 ml       | 10 vials    |
| Succinylcholine, hydrochloride 500mg | 01 bottle   |
| Sodium thiopental 1000mg             | 01 bottle   |

| Materials (PEDIATRIC Emergency Car)                                       | The amount    |
|---|---------------|
| <b>Drawer - Circulation</b>   |               |
| Flexible peripheral intravenous catheter (abocath®) No. 24 / 22           | 04 units each |
| Flexible peripheral intravenous catheter (abocath®) No. 20 / 18 / 16 / 14 | 02 units each |
| Rigid peripheral intravenous catheter (Scalp) No. 19 / 21 / 25 / 27       | 02 units each |
| 13X4.5 disposable hypodermic needle                                       | 02 units      |
| 25x7 disposable hypodermic needle   | 03 units      |
| 25x8 disposable hypodermic needle   | 03 units      |
| Disposable hypodermic needle 40x12 or 30x10                               | 03 units      |
| Macrodrops Team   | 02 units      |
| Parenteral Team   | 02 units      |
| Photosensitive Equipment  | 02 units      |
| Multi-way or 3-way faucet   | 03 units      |
| Syringe 3 mL / 5 mL / 10 mL / 20 mL / 60 mL                               | 02 units each |
| Children's disposable electrode   | 01 package    |
| conductive gel  | 01 unit       |
| <b>Drawer - Airway</b>  |               |
| Sterile glove 6.0 / 6.5 / 7.0 / 7.5 / 8.0 / 8.5                           | 01 pair each  |
| No. 4.0 / 4.5 Endotracheal Cannula without cuff                           | 03 units each |
| Endotracheal Cannula No. 5.0 / 5.5 / 6.0 / 6.5 / 7.0 with cuff            | 03 units each |
| Suction catheter No. 8 / 10 / 12  | 01 unit each  |
| Small guide for tracheal cannula  | 01 units      |
| Large guide for tracheal cannula  | 01 units      |
| Oropharyngeal cannula (Guedel) nº 1 / 2 / 3 / 4                           | 01 unit each  |
| Resuscitation Mask No. 01 / 02 / 03                                       | 01 unit each  |
| Manual resuscitator (AMBU) 500 mL and 1000 mL                             | 01 unit each  |
| Glasses Type Oxygen Catheter  | 01 unit       |
| humidifier  | 01 unit       |
| Continuous nebulization mask  | 01 unit       |
| <b>Drawer - Complementary Materials</b>                                   |               |
| Levine No. 8 / 10 / 12 / 14 Urethral Catheter                             | 01 unit each  |
| Indwelling bladder catheter No. / 8 / 10 / 12 / 14                        | 01 unit each  |
| Closed system urine collector   | 02 units      |
| Open system urine collector   | 02 units      |

|  |              |
|--|--------------|
| Gastric catheter No. 8 / 10 / 12 / 14 / 16 | 01 unit each |
| Silicone rubber                            | 03 units     |
| <b>Drawer - Solutions</b>                  |              |
| 0.9% saline solution 250 mL                | 01 bottle    |
| 0.9% saline 500 mL                         | 01 bottle    |
| 10% glucose serum 500 mL                   | 01 bottle    |
| 5% Glucose Serum 250 mL                    | 01 bottle    |
| Distilled water 500 ml                     | 01 bottle    |
| Sodium bicarbonate 250 ml                  | 01 bottle    |
| Ringer Lactate Solution 500 mL             | 01 bottle    |

\*\*\* List built/approved by those responsible for the unit.

|                   |   |                                       |                         |
|-------------------|---|---------------------------------------|-------------------------|
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| title of Document | <b>EMERGENCY CAR (CHASH CART)</b>                                     | Issue: 10/01/2022                     | Next review: 01/02/2023 |
|                   |   | Version: 1                            |                         |

### APPENDIX C

#### STANDARDIZED MEDICATIONS AND MATERIALS FOR AMBULATORIES

| Medications (Emergency Car AMBULATORIES)                | The amount  |
|---|-------------|
| Adenosine 6mg/2mL                                       | 02 ampoules |
| 10mL distilled water                                    | 05 ampoules |
| Aminophylline 240mg/10ml                                | 01 ampoule  |
| Amiodarone, hydrochloride 150mg/3mL                     | 06 ampoules |
| Atenolol 50mg   | 04 pills    |
| Atropine, Sulfate 0.25mg/1mL                            | 06 ampoules |
| Captopril 25 mg   | 10 pills    |
| Sodium Bicarbonate 8.4% 10mL                            | 05 ampoules |
| Dexamethasone, phosphate 4mg/mL                         | 01 ampoule  |
| Diazepam 10mg/2mL                                       | 01 ampoule  |
| Dobutamine, hydrochloride 250mg/20mL                    | 01 ampoule  |
| Dopamine, hydrochloride 50mg/10mL                       | 04 ampoules |
| Etomidate 2mg / 1mL                                     | 01 ampoule  |
| Epinephrine 1mg/mL (Adrenaline)                         | 10 ampoules |
| Sodium phenytoin 5% 250mg/5mL                           | 01 ampoule  |
| Sodium phenobarbital 100mg/mL                           | 01 ampoule  |
| Fentanyl, citrate 0.05mg/mL                             | 01 bottle   |
| Flumazenil 0.5mg/5mL                                    | 02 ampoules |
| Furosemide 20mg/2ml                                     | 04 ampoules |
| Hypertonic Glucose 50% 10mL                             | 05 ampoules |
| Calcium Gluconate 10% 0.5mEq/mL 10mL                    | 02 ampoules |
| Haloperidol 5mg/mL                                      | 02 ampoules |
| Hydrocortisone succinate 100mg                          | 01 bottle   |
| Hydrocortisone Succinate 500mg                          | 02 bottles  |
| Isosorbide, dinitrate 5mg (sublingual)                  | 10 pills    |
| Isosorbide, mononitrate 10mg/mL                         | 02 ampoules |
| Lidocaine, 2% hydrochloride without vessel 20mg/mL 20mL | 01 bottle   |
| Magnesium, sulfate 50% 4.1mEq/mL                        | 04 ampoules |

|   |             |
|---|-------------|
| Methylprednisolone Sodium Succinate 125mg             | 02 bottles  |
| Methylprednisolone Sodium Succinate 500mg             | 01 bottle   |
| Metoprolol, tartrate 5mg/5mL                          | 04 ampoules |
| Midazolam, hydrochloride 15mg/3mL                     | 01 ampoule  |
| Morphine, sulfate 10 mg/mL                            | 02 ampoules |
| Naloxone, Hydrochloride 0.4mg/mL                      | 01 ampoule  |
| Nitroglycerin 25mg/5mL                                | 02 ampoules |
| Sodium nitroprusside 25 mg/2mL                        | 02 ampoules |
| Norepinephrine, hemitartrate 8mg/4ml (Norepinephrine) | 04 ampoules |
| Promethazine, hydrochloride 50mg/2mL                  | 02 ampoules |
| 0.9% Physiological Serum 500 mL                       | 02 bottles  |
| Succinylcholine, hydrochloride 500mg                  | 01 bottle   |
| Verapamil, hydrochloride 5mg/2mL                      | 02 ampoules |



| Materials (AMBULATORY Emergency Car)                                   | The amount      |
|--|-----------------|
| <b>Drawer - Circulation</b>  |                 |
| Peripheral intravenous catheter No. 14 / 16 / 18 / 20 / 22 / 24        | 01 unit each    |
| Rigid peripheral intravenous catheter (Scalp) No. 19, 21, 23, 25       | 01 unit each    |
| 25x7 or 25x8 disposable hypodermic needle                              | 05 units        |
| Disposable hypodermic needle 40x12 or 30x10                            | 05 units        |
| Macrodrops Team  | 02 units        |
| Parenteral Team  | 02 units        |
| Photosensitive Equipment   | 01 unit         |
| Multi-way or 3-way faucet  | 02 units        |
| 3 ml syringe   | 03 units        |
| 5 ml syringe   | 03 units        |
| 10 ml syringe  | 03 units        |
| 20 ml syringe  | 03 units        |
| disposable electrode   | 05 units        |
| Scalpel  | 01 unit         |
| conductive gel   | 01 unit         |
| <b>Drawer - Airway</b>   |                 |
| Sterile gloves 6.5 / 7.0 / 7.5 / 8.0 / 8.5                             | 01 pair of each |
| Endotracheal Cannula No. 4.0 / 4.5 / 5.0 / uncuffed                    | 01 unit each    |
| Endotracheal Cannula No. 5.5 / 6.0 / 6.5/ 7.0/ 7.5/ 8.0/ 8.5 with cuff | 01 unit each    |
| Tracheal cannula guide   | 01 unit         |
| Shoelace   | 01 unit         |
| Oropharyngeal cannula (guedel) No. 2 / 3 / 4                           | 01 unit each    |
| Tracheostomy cannula No. 7.0 / 7.5                                     | 01 unit each    |
| Suction catheter No. 12 or 14  | 02 units        |
| eyeglass oxygen catheter   | 02 units        |
| Oxygen face mask (continuous nebulization)                             | 01 unit         |
| humidifier   | 02 units        |
| Manual resuscitator (AMBU) 500 mL / 1000 mL                            | 01 unit each    |
| Resuscitation Mask No. 01 / 02 / 03                                    | 01 unit each    |

| <b>Drawer - Complementary Materials</b>         |              |
|---|--------------|
| Gastric catheter No. 8 / 10 / 12 / 14 / 16 / 18 | 01 unit each |
| Open system urine collector                     | 02 units     |
| Silicone rubber                                 | 03 units     |
| Adhesive (optional)                             | 01 unit      |
| 70% alcohol (optional)                          | 100ml        |
| Sterile gauzes (optional)                       | 03 packages  |
| Procedure gloves (optional)                     | 05 pairs     |
| Cotton (optional)                               |              |
| <b>Drawer - Solutions</b>                       |              |
| 0.9% Physiological Solution 100 mL              | 01 unit      |
| 0.9% Physiological Solution 250 mL              | 01 unit      |
| 0.9% Physiological Solution 500 mL              | 01 unit      |
| 5% Glucose Solution 500 mL                      | 01 unit      |
| Distilled water 500 ml                          | 01 unit      |

\*\*\* List prepared/approved by those responsible for the unit

**20.4. Annex 04 (medical emergency supplies)**

**LIST OF EQUIPMENTS IN SIMULATIONS CENTER - ITPAC PALMAS**

**1. BASIC BILLY LIFE SUPPORT SIMULATOR**



**2. TRUNK SIMULATOR FOR RESUSCITATION MEASURES, ADULT**



**3. TRUNK SIMULATOR FOR RESUSCITATION MEASURES, CHILD AND BABY**



**4. PEDIATRIC AIRWAY MANAGEMENT HEADS SIMULATOR**



**5. BIRTH SIMULATOR WITH PEDI BLUE NEONATE NOELLE**

**Demo video:**

<http://www.weblabor.com.br/simulador-avancado-de-parto-neonatal-noelle-s550-100/>



**6. CPARLENE CPR SIMULATOR, TORSO WITH ELECTRONIC MONITORING LF03715U**

**Demo video:**

<http://www.medicalexpo.com/en/prod/nasco/product-79136-844656.html>



**7. INJECTION ARM 3B SIMULATOR**



**8. SOINS 3B MANNEQUIN SIMULATOR**



**9. DUMMY SIMULATOR DELUXE PLUS CRISIS 3B**



**10. OMNI BLOOD PRESSURE TRAINING SIMULATOR**



**11. LUXE ARM SIMULATOR FOR IV INJECTIONS**



**12. ARM SIMULATOR FOR ADVANCED VENIPUNCTURE AND INJECTIONS - NASCO FORT ATKINSON**





**13. HEAD SIMULATOR FOR INTUBATION - ECONOMY ADULT AIRWAY MANAGENT TRAINER**



**14. SIMULATOR DUMMY CHEST DRAIN LIFE/FORM**



**15. AIRWAYS AND CPR TRAINING SIMULATOR IN ADULTS**



**16. PATIENT CARE SIMULATOR PRO**



**17. PEDIATRIC CPR SIMULATOR FOR ONE-YEAR-OLD CHILDREN AND TRAUMATIC CARE SIMULATOR**



**18. DUMMY SIMULATOR FOR RESUSCITATION MEASURES WITH ECG SIMULATOR**





**19. MANEQUIMM SIMULATOR FOR RESUSCITATION MEASURES WITH PRINTING AND STORAGE UNIT - ADULT**

**20. AIRSIM ADVANCED MODEL SIMULATOR WITH BRONCHIAL TREE**



**21. MODEL SIMULATOR FOR BREAST EXAMINATION TO TIE**



**22. HEADSET SIMULATOR WITH SMARTSCOPE**



**23. SIMULATOR FOR MALE AND FEMALE CATHETERIZATION AND OSTOMY CARE**



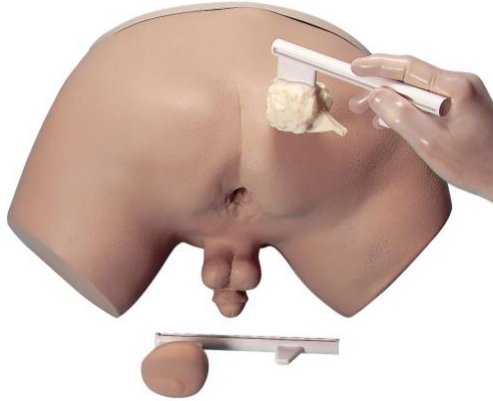
**24. CERVICAL DILATATION AND OBLITERATION SIMULATOR**



**25. ADVANCED BREAST EXAM SIMULATOR - NASCO**



**26. SIMULATOR FOR PROSTATE EXAM**



**27. SIMULATOR FOR OTOLOGICAL EXAM**



**28. SIMPLE LIFE/FORM INTRAORSEAL INFUSION SIMULATOR**



**29. HEAD SIMULATION FOR INTUBATION**



30.

**31. BIRTH SIMULATOR PRO**



**32. LIFE/FORM PERICARDIOCENTESIS SIMULATOR**



**33. SIMULATION OF EPIDURAL AND LUMBAR PUNCTURE**



**34. EPISIOTOMY SUTURE SIMULATOR, 3 PIECES**



**35. GYNECOLOGICAL SIMULATOR - NASCO**



**36. DUMMY SIMULATOR FOR RESUSCITATION MEASURES WITH INTERACTIVE ARRHYTHMIA SIMULATOR - NASCO**



**37. PEDI NEWBORN SIMULATOR**





**38. ADVANCED PATIENT CARE SIMULATOR**



**39. NEWBORN SIMULATOR**



**40. LITTE ANNE CPR SIMULATOR**



**41. LITTE BABY CPR SIMULATOR**



**42. RESUSCI BABY SIMULATOR**



#### **43. CRICOSTOMY AND TRACHEOSTOMY SIMULATOR**



#### **44. PARACENTESIS SIMULATOR**



**45. PORTABLE ULTRASONOGRAPHY DEVICE**



**46. TRAINING SIMULATOR FOR MALE AND FEMALE BLADDER CATHETERISM**



**47. SIM MAN ALS SIMULATOR**



**48. EXTERNAL AUTOMATIC TRAINING DEFIBRILLATOR**



**49. ADVANCED ESSENTIAL MEGACODE SIMULATOR**



**50. MASK FOR POCKET RESUSITATION**



**51. PORTABLE PULSE OXIMETER**



**52. TRAINING DEVICE FOR BIG TYPE PEDIATRIC BONE PUNCH**



**BIG Pediátrico**

Profundidade de penetração recomendada para tibia proximal

|                 |              |
|-----------------|--------------|
| Infantil 0-3    | 0,5 - 0,7 cm |
| Pediátrico 3-6  | 1,0 - 1,5 cm |
| Pediátrico 6-12 | 1,5 cm       |

**BIG**  
SIMPLY SAVING LIVES

**53. TRAINING DEVICE FOR BIG TYPE PEDIATRIC BONE PUNCH**



**BIG Adulto**

Profundidade de penetração recomendada

|                |        |
|----------------|--------|
| Tíbia / Humero | 2,5 cm |
| Meléolo        | 2,0 cm |
| Rádio          | 1,5 cm |

**BIG**  
SIMPLY SAVING LIVES





**20.6. Annex 06 (Scheduling activities)**

**Scheduling activities in the Skills Center and Realistic Simulations**

( ) Class ( ) monitoring ( ) Extension ( ) training

| INTENDED SPACE(S)  |   |
|--------------------|---|
| High Fidelity Room | ( ) 1 ( ) 2 ( ) 3 ( ) 4                               |
| Simulation Rooms   | ( ) 1 ( ) 2 ( ) 3 ( ) 4 ( ) 5 ( ) 6 ( ) 7 ( ) 8 ( ) 9 |
| Simulation Rooms   | ( ) 10 ( ) 11 ( ) 12                                  |

|                                       |  |
|---------------------------------------|--|
| <b>subject</b>                        |  |
| <b>Phase</b>                          |  |
| <b>responsible teacher</b>            |  |
| <b>responsible monitor</b>            |  |
| <b>Day of the week / Date</b>         |  |
| <b>Schedule</b>                       |  |
| <b>Approximate number of students</b> |  |
| <b>Material needed</b>                |  |

Teacher's signature

Signature from the monitor

---

**20.7. Annex 07 (Class Procedure)**

**CLASS PROCEDURE**

|  |                        |                     |               |                   |                               |
|--|------------------------|---------------------|---------------|-------------------|-------------------------------|
| Subject:   | Phase:                 | Living room:        |               |                   |                               |
| Theoretical Hours:   | Charge Practice Hours: | Charge Total Hours: |               |                   |                               |
| Class Topic:   |                        |                     |               |                   |                               |
| Number of students:  | Time to class:         |                     |               |                   |                               |
| <b>General skills to be developed</b>                            |                        |                     |               |                   |                               |
|  |                        |                     |               |                   |                               |
| <b>Specific skills (procedures / maneuvers) to be developed:</b> |                        |                     |               |                   |                               |
|  |                        |                     |               |                   |                               |
| <b>Goals)</b>  |                        |                     |               |                   |                               |
|  |                        |                     |               |                   |                               |
| <b>materials</b>   |                        |                     |               |                   |                               |
| <b>Units)</b>  | <b>The amount</b>      | <b>inputs</b>       | <b>Units)</b> | <b>The amount</b> | <b>Equipment and the like</b> |
|  |                        |                     |               |                   |                               |
| <b>procedures</b>  |                        |                     |               |                   |                               |
|  |                        |                     |               |                   |                               |
| <b>Laboratory technician procedures</b>                          |                        |                     |               |                   |                               |
|  |                        |                     |               |                   |                               |
| <b>Assessment</b>  |                        |                     |               |                   |                               |
|  |                        |                     |               |                   |                               |

palms, \_\_\_\_\_ in \_\_\_\_\_ of 2021.

Responsible Teacher: \_\_\_\_\_

**20.8. Annex 08 (Model for planning Realistic Simulation classes)**

**CLASS PROCEDURE REALISTIC SIMULATION**

|  |                                     |
|--|-------------------------------------|
| Subject:   | Phase:                              |
| Class time:  | Living room:                        |
| Number of students in the group:   | Number of students in the scenario: |
| <b>Target Audience</b>   |                                     |
|  |                                     |
| <b>scenario theme</b>  |                                     |
|  |                                     |
| <b>References for study</b>  |                                     |
|  |                                     |
| <b>Goals)</b>  |                                     |
|  |                                     |
| <b>General skills to be developed</b>  |                                     |
|  |                                     |
| <b>Specific skills (procedures / maneuvers) to be developed:</b>   |                                     |
|  |                                     |
| <b>Description of the scenario (agreement / setting / definition of roles in the scenario / description of the case to be made at the beginning of the scenario for the students</b> |                                     |
|  |                                     |
| <b>Instructions for an actor or student (if needed):</b>   |                                     |
|  |                                     |
| <b>Detailed description of the scenario / evolution of the case (for the teacher):</b>   |                                     |
|  |                                     |

| Laboratory technician procedures         |                                 |        |                                 |            |                        |
|--|---------------------------------|--------|---------------------------------|------------|------------------------|
|  |                                 |        |                                 |            |                        |
| materials                                |                                 |        |                                 |            |                        |
| Units)                                   | The amount                      | inputs | Units)                          | The amount | Equipment and the like |
|  |                                 |        |                                 |            |                        |
| Important information for the debriefing |                                 |        |                                 |            |                        |
|  |                                 |        |                                 |            |                        |
| Assessment                               |                                 |        |                                 |            |                        |
| Sequence of expected actions             | Accomplished                    |        | Adequate                        |            |                        |
| 1.                                       | <input type="checkbox"/> Yes No |        | <input type="checkbox"/> Yes No |            |                        |
| two.                                     | <input type="checkbox"/> Yes No |        | <input type="checkbox"/> Yes No |            |                        |
| 3.                                       | <input type="checkbox"/> Yes No |        | <input type="checkbox"/> Yes No |            |                        |
| 4.                                       | <input type="checkbox"/> Yes No |        | <input type="checkbox"/> Yes No |            |                        |
| 5.                                       | <input type="checkbox"/> Yes No |        | <input type="checkbox"/> Yes No |            |                        |
| 6.                                       | <input type="checkbox"/> Yes No |        | <input type="checkbox"/> Yes No |            |                        |
| 7.                                       | <input type="checkbox"/> Yes No |        | <input type="checkbox"/> Yes No |            |                        |
| 8.                                       | <input type="checkbox"/> Yes No |        | <input type="checkbox"/> Yes No |            |                        |
| 9.                                       | <input type="checkbox"/> Yes No |        | <input type="checkbox"/> Yes No |            |                        |
| 10.                                      | <input type="checkbox"/> Yes No |        | <input type="checkbox"/> Yes No |            |                        |

## 20.9. Annex 09 (Material loan form)

### FORM FOR LOAN OF MATERIALS

|   |                              |                 |
|---|------------------------------|-----------------|
| Subject:  | Phase:                       | Living room:    |
| Class theme:  | Number of students:          | Class time:     |
| Teacher:  |                              |                 |
| <p>I, _____, employee/teacher of _____, I hereby request the withdrawal of the assets identified below, allocated in the _____ and I undertake to take care of him while he is in my custody.</p> |                              |                 |
| <b>Asset number</b>   | <b>Description of assets</b> |                 |
|   |                              |                 |
| <b>Asset destination</b>  |                              |                 |
|   |                              |                 |
| <b>Goals)</b>   |                              |                 |
|   |                              |                 |
| <b>I claim to be receiving it:</b>  |                              |                 |
| <input type="checkbox"/> in perfect conditions of use and in good condition <input type="checkbox"/> with the following problems and/or damages (describe them):                                  |                              |                 |
| Asset delivery date   | ___ / ___ / ___              | Hour: _____     |
| <b>Was the property returned under the same conditions of use?</b>  |                              |                 |
| <input type="checkbox"/> Yes <input type="checkbox"/> no  |                              |                 |
| <b>If not, describe the faults presented:</b>   |                              |                 |
|   |                              |                 |
| <b>Asset return date</b>  |                              | ___ / ___ / ___ |
| Hour: _____   |                              |                 |
| Lab technician:   | Signature:                   |                 |

Release:

| applicants              | subscriptions |
|-------------------------|---------------|
| Responsible Teacher:    |               |
| Responsible Employee:   |               |
| <b>Release</b>          |               |
| Laboratory Coordinator: |               |
| Lab technician:         |               |

## 20.10. Annex 10 (Confidentiality Agreement)

### ITPAC-Palmas Simulation Center - CONFIDENTIALITY AGREEMENT

#### Medicine course

I \_\_\_\_\_, registration: \_\_\_\_\_, period: \_\_\_\_\_, signed below, undertake to maintain confidentiality and secrecy on all information to which I have access on the premises of the ITPAC-Palmas Simulation Center and in any related supervised internship field, regarding to my activities as a participant or non-participant, whether in person or remotely, as well as to comply with the institution's rules of conduct, under my total and absolute ethical and professional responsibility, following the ITPAC-Palmas Rules and the Manual of the Simulation Center of ITPAC-Palmas, committing to fully maintain all my duties, and all rights, especially those related to academic and medical confidentiality, through the following guidelines:

I - Not to use confidential information to which it has access, to generate its own exclusive and/or unilateral benefit, present or future, or for the use of third parties;

II - Not to record or copy confidential documentation to which it has access, including health simulation activities.

III - Not to appropriate confidential material and/or confidential technology that may become available;

IV - Not to pass on knowledge of confidential information and, thus, forcing me to reimburse the occurrence of any damage and/or loss arising from a possible breach of confidentiality of the information provided;

V – To attend remote classes with the presence of the actors in reserved places, without access to the public, without sharing images and sounds, aiming at full compliance with the item above.

VI - Do not discuss the performance of each simulation scenario participant outside of the simulation program (applies to all participants - which include students, educators, staff and actors). This is a safe learning environment and all participants must be protected of judgments and opinions about its performance, in the different moments of the simulation activities

For failure to comply with this Confidentiality Agreement and Rules of Conduct, the undersigned is aware that the appropriate administrative and judicial measures may be adopted.

Palmas, TO, \_\_\_\_\_ of \_\_\_\_\_ of 20\_\_.

\_\_\_\_\_  
(Participant name and signature)

Aware:

\_\_\_\_\_  
(Name and signature of the course coordinator)

\_\_\_\_\_  
(Name and signature of the subject teacher)

[WWW.ITPACPALMAS.COM.BR](http://WWW.ITPACPALMAS.COM.BR)

## 20.11. Annex 11 (Form of Consent and Clarification)

### Form of Consent and Clarifications – To the participant of activities at the ITPAC-Palmas Simulation Center.

Through this specific instrument, I \_\_\_\_\_, bearer of RG \_\_\_\_\_ and CPF \_\_\_\_\_, inform that I am aware of my participation in the activities of the ITPAC-Palmas Simulation Center, my responsibilities and those of the teacher who accompanied me (in the ITPAC-Palmas Simulation), and which I fully agreed before starting the Simulation Activities, using face-to-face and/or remote practices (through existing technologies, which include the use of Canvas and the institutional Zoom videoconference). At the time, I received the following information: the video recording resources cover the entire Program, that is, the cameras are placed throughout the environments and can actively record. The recordings are stored on the local server of ITPAC-Palmas, managed by the Management of ITPAC-Palmas, through the Information Technology department. All activity rooms support streaming audio and video in real time to any other room in the simulation center to meet practical needs. Additional audio and video recording of the simulation activities, when requested by the teacher, for use in the debriefing, can be made available in the cloud through the Canvas® platform, with exclusive and individualized access by each student, through institutional login and password (afya.instructure.com). The Canvas platform integrates with institutional Zoom® through a specific API. Any need for audio and video recording is configured by the Simulation Program Manager and hosted on Zoom's institutional cloud, with restricted and limited access to students and faculty. Any availability of recorded material to students will be linked to the course the student is enrolled in and performed in the restricted Canvas® environment and requires authorization from the Governance Committee of the Simulation Center. The retention/deletion and destruction of recordings is the responsibility of the ITPAC-Palmas Board of Directors through the Governance Committee of the Simulation Center. The retention/deletion and destruction of local recordings on the server is the responsibility of the ITPAC-Palmas Board of Directors through the Governance Committee of the Simulation Center, being carried out periodically at the end of the semester. Cloud recordings linked to Zoom and Canvas are configured to remain permanently in the cloud. For situations involving research and reviews, institutional authorization from the ITPAC-Palmas Board is mandatory, in the use of stored images, in addition to the formal release of all participants, without exception, to allow the request for a favorable opinion to the Research Ethics Council that involves human beings.

I inform that I was duly guided by the teacher about the type of simulation activity performed, which may include the use of mannequins, actors, task-trainer or hybrid station, in the teaching environment of the Simulation Center.

I also declare that I agree and participate in the simulation activity using the strategies above, which include undergraduate students of the Medicine Course supervised by the Educator of the discipline.

I declare that I will previously and directly inform the professional identified above any relevant data about my situation that I deem relevant. I declare that I have authorized the performance of the simulation activities and that I have understood the dynamics of the simulation activity, including the use of technologies and actors.

In addition, I assume responsibility for the information provided and for the rational use of images in accordance with current legislation and accept the limitations and risks related to the practice of health simulation through the use of technologies.

I recognize the fundamentals of the need for social isolation and the objective of protecting my own health and that of other participants in pandemic situations, duly guided by the Health Authorities.

Other data related to simulation activities, such as assessments and forms, are hosted and made available through Canvas® and are not accessible to the general public. Students of each simulation modality are allocated to the Canvas® subjects in an automated way after registering in Afya Educacional's enrollment management system, with individual access by login and password. Canvas® provides the interactions necessary for each simulation activity, including pre-testing, instructional material and videos prior to the simulation activities, a dedicated Zoom room (use if necessary), plus measurement instruments (SDS-student version) of anonymous teacher submission and individualized feedback by Canvas® Speedgrader®.

Palmas - TO, \_\_\_\_\_ from \_\_\_\_\_ from 20\_\_\_\_\_

Student or Professor: \_\_\_\_\_ RG/CPF: \_\_\_\_\_

Signature: \_\_\_\_\_

**INSTITUTO TOCANTINENSE PRESIDENTE ANTÔNIO CARLOS – ITPAC-PALMAS**