

SECTION I: SCENARIO OVERVIEW

Scenario Title:	Scenario 4: Providing cultural sensitive nursing care to the transgender patient complaining of abdomen/pelvis pain.	
Original Scenario Developer(s):	James Donovan MSN, RN, CNL	
Date - original scenario	6/7/14	
Validation:	Stephan Rowniak, PhD, RN, FNP; KT Waxman, DNP, MBA, RN, CNL, CENP, CHSE; Marjorie Miller, MA, RN, CHSE	
Revision Dates:		
Pilot testing:	9/20/2014	
Estimated Scenario Time: 15 minutes Estimated Debriefing time: 15 minutes		
Target group: Nursing learners seeking knowledge on providing culturally sensitive nursing care to transgender patients.		
Brief Summary of Case:		
Mr. Trent Williams is a trans man who has come to the emergency room complaining of lower abdominal/pelvic pain that has been getting worse over the past 36 hours. The patient's vital signs are stable and consistent with a patient in pain. The patient told the triage nurse that he was a trans man and prefers to male pronouns.		
EVIDENCE BASE / REFERENCES (APA Format)		
<p>Coleman, E., Bockting, W., Botzer, M., Cohen-Kettenis, P., DeCuypere, G., Feldman, J. et al. (2012). Standards of care for the health of transsexual, transgender, and gender-nonconforming people, version 7. <i>International Journal of Transgenderism</i>, 13(4), 165-232. Retrieved from http://www.tandfonline.com/doi/abs/10.1080/15532739.2011.700873</p> <p>Kuper, L. E., Nussbaum, R., & Mustanski, B. (2012). Exploring the diversity of gender and sexual orientation identities in an online sample of transgender individuals. <i>Journal of sex research</i>, 49(2-3), 244-254. Retrieved from http://www.tandfonline.com/doi/abs/10.1080/00224499.2011.596954</p> <p>Pettinato, M. (2012). Providing care for GLBTQ patients. <i>Nursing</i>, 42(12). doi:10.1097/01.NURSE.0000422641.75759.d7</p> <p>Polly, R., & Nicole, J. (2011). Understanding the transsexual patient: culturally sensitive care in emergency nursing practice. <i>Advanced emergency nursing journal</i>, 33(1), 55-64. Retrieved from http://journals.lww.com/aenjournal/Abstract/2011/01000/Understanding_the_Transsexual_Patient_Culturally.8.aspx</p> <p>Rounds, K. E., McGrath, B. B., & Walsh, E. (2013). Perspectives on provider behaviors: A qualitative study of sexual and gender minorities regarding quality of care. <i>Contemporary nurse</i>, 44(1), 99-110. Retrieved from http://pubs.e-contentmanagement.com/doi/abs/10.5172/conu.2013.44.1.99</p> <p>Singh, A. A., Hays, D. G., & Watson, L. S. (2011). Strength in the face of adversity: Resilience strategies of transgender individuals. <i>Journal of Counseling & Development</i>, 89(1), 20-27. Retrieved from http://onlinelibrary.wiley.com/doi/10.1002/j.1556-6678.2011.tb00057.x/abstract</p> <p>Snelgrove, J. W., Jasudavisius, A. M., Rowe, B. W., Head, E. M., & Bauer, G. R. (2012). "Completely out-at-sea" with "two-gender medicine": A qualitative analysis of physician-side barriers to providing healthcare for transgender patients. <i>BMC Health Services Research</i>, 12(1), 110. Retrieved from http://www.biomedcentral.com/1472-6963/12/110</p> <p>Unger, C. A. (2013). Care of the transgender patient: the role of the gynecologist. <i>American journal of obstetrics and gynecology</i>. Retrieved from http://www.sciencedirect.com/science/article/pii/S000293781300522X</p>		

ALL DATA IN THIS SCENARIO IS FICTICIOUS

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SECTION II: CURRICULUM INTEGRATION

A. SCENARIO LEARNING OBJECTIVES

Learning Outcomes
1. Differentiate between care that is culturally sensitive and not culturally sensitive.
2. Provide professional nursing dialog that is supportive to all patients, including transgender patients.
3. Correlate signs and symptoms with the need to have a patient undress.
4. Correlate sign and symptoms with appropriate assessment questions that may be sensitive in nature.
Specific Learning Objectives
1. Demonstrate ability to listen actively.
2. Demonstrate verbal and non-verbal cultural sensitivity during patient interaction.
3. Identify what medical conditions might require a transgender patient to need to undress for physical examination.
4. Demonstrate the ability to ask sensitive questions to a patient who is transgender.
Critical Learner Actions
1. Obtain a health history from the patient that is relevant to the patient's presentation in a culturally sensitive way.
2. Determine if the patient will need to remove his clothing and put on a hospital gown based on the obtained history.
3. Provide the patient a hospital gown and explain why it is needed for the presenting condition.

B. PRE-SCENARIO LEARNER ACTIVITIES

Prerequisite Competencies required prior to participating in scenario

Knowledge	Skills/Attitudes
<ul style="list-style-type: none"> -Integrate understanding of multiple dimensions of patient centered care: <ul style="list-style-type: none"> - Information, communication and education - Physical comfort and emotional support - Coordination and integration of care - Transition and continuity -Examine nursing roles in assuring coordination, integration, and continuity of care. - Demonstrate comprehensive understanding of the concepts of pain and suffering including physiological models of pain and comfort. 	<ol style="list-style-type: none"> 1. Elicit patient values, preferences & expressed needs as part of clinical interview, implementation of care plan & evaluations of care. 2. Value seeing health care situations "through patients' eyes" 3. Respect and encourage individual expression of patient values, preferences and expressed needs. 4. Communicate patient values, preferences and expressed needs to other members of the health care team. 5. Provide patient-centered care with sensitivity and respect for the diversity of human experience. 6. Value the patient's expertise with own health and symptoms. 7. Recognize personally held attitudes about working with patients from different ethnic, cultural and social backgrounds. 8. Willing support patient-centered care for individuals/groups whose values differ from own. 9. Participate in building consensus or resolving conflict in the context of patient care. 10. Communicate care provided & needed at each transition in care. 11. Assess levels of physical and emotional comfort. 12. Assess presence and extent of pain and suffering. 13. Recognize that patient expectations influence outcomes in management of pain or suffering.

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SECTION III: SCENARIO SCRIPT

A. Case summary

Mr. Trent Williams (actor) is a trans man who has come to the emergency room complaining of lower abdominal/upper pelvic pain that is diffuse in nature. The pain started 36 hours ago and has progressively worsened. Mr. Williams called his primary care provider who directed him to seek care in the emergency room. The patient informed the triage nurse that he was trans man and he prefers his medical providers use common male pronouns during his ED visit. No other history has been requested before the patient is placed in an ED hospital room containing one wall and three curtains. The triage nurse provides the patient's assigned nurse a quick report on the patient and includes the patient's provided transgender information.

See Appendix D for patient history information. This information will be used by the actor playing the patient.

B. Key contextual details

The learner should obtain a focused health history that includes: history of current problem, history of prior medical disorders, prior surgeries and sex history. This information should be gathered in a way that reduces patient anxiety and is culturally sensitive to transgender patients. The nurse will need to decide to if the patient needs to disrobe and put on a hospital gown (if recommended, the learner should explain why getting undressed is necessary). After obtaining the history from the patient, the learner will need to give report to give a brief report to the ED physician (actor) assigned to the patient.

C. Scenario Cast

Leader/Others	<input type="checkbox"/> High fidelity simulator	
	<input type="checkbox"/> Mid-level simulator	
	<input type="checkbox"/> Task trainer	
	<input type="checkbox"/> Hybrid (Blended simulator)	
	<input checked="" type="checkbox"/> Standardized patient	
Role	Brief Descriptor (Optional)	Actor/Confederate (A/C) or Learner (L)
Mr. Williams	Patient	Actor
Nurse	ED RN	Learner
Physicians	ED MD	Confederate
Triage Nurse	ED Triage Nurse	Actor

Environment, Equipment, Essential props

Recommend standardized set ups for each commonly simulated environment

1. Scenario setting: (example: office, board room, patient room,)

The scene starts with a patient sitting in a chair of an ER room. The room is made up of one solid wall and three overlapping curtains.

2. Equipment, supplies, monitors

(In simulation action room or available in adjacent core storage rooms)

Chairs	Sheet	Clipboard for writing	Pen
Table	Blanket	Hospital Gown	

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Case Flow / Trigger / Scenario Development States
Initiation of Scenario: The triage nurse (actor) provides report to the assigned nurse (learner) that Mr. Williams is a trans man who is complaining of progressive abdominal/pelvic pain for the last 36 hours. Mr. Williams has requested that male pronouns be used during his time in the ER. Scene starts with RN (learner) walks into the patient room.

Participant Status: Desired Learner Action and Trigger to Move to Next State			
Participant Status	Triggers	Learner Actions	Debriefing Points
1. Patient (actor) complaining of lower abdominal/pelvic pain.	Patient is complaining of moderate lower abdominal/upper pelvic pain.	The nurse (learner) must obtain a health history that includes: prior surgeries, medications and sexual history. The questions in the history should be asked in a way that is culturally sensitive for transgender patients.	Was this information obtained in a culturally sensitive way? Did the patient understand why the questions were asked?

2. Patient and nurse dialog.	Completion of the health history.	The nurse must determine if the patient medical condition will require the patient to change into a hospital gown. The nurse must explain why the gown is required for his presenting problem.	Did the patient understand why a physical exam was required?
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3. Patient left in the room to change into a hospital gown.		Nurse give report to the ED physician (actor) that is complete and culturally sensitive.	Was the nurse able to consistently use patient's preferred pronoun during the simulation. Was the physician/nurse dialog professional?
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Scenario End Point: The simulation ends at the completion of the report given by the nurse to the physician.

Suggestions to decrease complexity:

- Patient's pain has a history of kidney stones and this feels like a kidney stone.

Suggestions to increase complexity:

- Patient is having a vaginal discharge.
- Patient not in a monogamist relationship and is sexually active with multiple partners.

APPENDIX A: Digital images of scenario milieu

APPENDIX B: DEBRIEFING GUIDE

General Debriefing Plan			
<input type="checkbox"/> Individual	<input type="checkbox"/> Group	<input type="checkbox"/> With Video	<input type="checkbox"/> Without Video
Debriefing Materials			
<input type="checkbox"/> Debriefing Guide	<input type="checkbox"/> Objectives	<input type="checkbox"/> Debriefing Points	<input type="checkbox"/> Core
Core Competencies to consider for debriefing scenarios			
<input type="checkbox"/> Leadership	<input type="checkbox"/> Communication	<input type="checkbox"/> Evidence-based Practice	
<input type="checkbox"/> Human Factors	<input type="checkbox"/> Team Work (if applicable)	<input type="checkbox"/> Systems Utilization	
Sample Questions for Debriefing			
<ol style="list-style-type: none"> 1. Did you have the knowledge and skills to meet the learning objectives of the scenario? 2. What GAPS did you identify in your own knowledge base and/or preparation for the simulations experience? 3. What relevant information was missing from the scenario that impacted your performance? What did your attempt to fill in the GAP? 4. How would you handle the scenario differently if you could? 5. In what ways did you perform well? 6. What three factors were most significant that you will transfer to your practice setting? 			
Notes for future sessions:			

APPENDIX C

<p>IDENTIFIED PROBLEM/SCENARIO TOPIC TRANSGENDER CULTURAL SENSITIVITY</p>	<p>CASE SUMMARY</p> <p>Mr. Trent Williams (actor) is a trans man who has come to the emergency room complaining of lower abdominal/upper pelvic pain that is diffuse in nature. The pain started 36 hours ago and has progressively worsened. Mr. Williams called his primary care provider who directed him to seek care in the emergency room. The patient informed the triage nurse that he was trans man and he prefers his medical providers use common male pronouns during his ED visit. No other history has been requested before the patient is placed in an ED hospital room containing one wall and three curtains. The triage nurse provides the patient's assigned nurse a quick report on the patient and includes the patient's provided transgender information.</p>
<p>HIGHLIGHTED QSEN COMP/NPS GOALS</p> <p>PATIENT – CENTERED CARE</p>	
<p>SCENARIO OBJECTIVES</p> <ul style="list-style-type: none"> - Demonstrate ability to listen actively. - Demonstrate verbal and non-verbal cultural sensitivity during patient interaction. - Identify what medical condition might require a transgender patient to need to undress for a physical examination. - Demonstrate the ability to ask sensitive questions to a patient who is transgender. 	<p>CRITICAL PERFORMANCE ELEMENTS</p> <ul style="list-style-type: none"> - Obtain a health history from the patient that is relevant to the patient's presentation in a manner that is culturally sensitive to a transgender individual. - Determine if the patient will need to remove his clothing and put on a hospital gown based on the obtained history. - Provide the patient a hospital gown and explain why it is needed for the presenting condition.

CASE FLOW (20 MINUTE SIMULATION TIME MAXIMUM)			
<p>INITIATION OF SCENARIO</p> <p>Triage nurse (actor) gives patient report to the assigned ED nurse (learner). The report includes (Mr. Trent Williams is a 30 year old trans man complaining of lower abdominal/upper pelvic pain that is progressive for the last 36 hours. He prefers the use of male pronouns and nausea or vomiting. The patient is in an ED patient room and scenario begins when the nurse arrives to the room.</p>	→→	<p>FIRST FRAME</p> <p>The patient is complaining of progressive abdominal/pelvic pain that is now up to a 6/7 (0-10 scale). The nurse should obtain a health history that includes history of present illness, prior health history, surgical history including sexual reassignment surgeries and social history that includes sexual history. The questions during this patient interview should be asked in a culturally sensitive manor that is non-threatening to the patient.</p>	→→
<p>SECOND FRAME</p> <p>At the completion of the health history, the nurse should identify that this patient is likely to need an abdominal and pelvis exam or imaging. The nurse will need to explain the need to undress and put on a hospital gown.</p>	→→	<p>SCENARIO END POINT</p> <p>The nurse provides a detail report to the ED physician that is respectful of the patient's transgender culture.</p>	D E B R I E F

APPENDIX D

Health Information for the Actor Playing the Patient

Patient Name: Trent William
Gender Identity: Transgender man
Chief Complain: Abdominal/Pelvis pain

Hx of present illness: Patient began having lower abdominal pain 36 hours that presented as a dull ache (2 on a 0-10 scale) that has progressed. The patient's pain now is a 6/7 (0-10 scale) and includes the upper pelvis and lower abdomen. The patient denies nausea/vomiting. The patient states he first noticed the pain when he woke up yesterday. Eating and drinking fluids does not change the quality of the discomfort. The patient admits to a normal bowel movement yesterday but none today. The patient took tums yesterday without relief. No urinary pain or pressure.

Medications: testosterone prescribed by his primary care provider. No other medications.

Allergies: NKDA

Social: Denies tobacco, alcohol and non-prescribed drug use.

Past Hx

Childhood: No congenital abnormalities or childhood diseases.

Adult illnesses: Denies DM, HTN, Hepatitis, or HIV (Last tested 2013)

Surgeries: Bilateral mastectomy and hysterectomy with bilateral salpingo-oophorectomy ~ 5 years ago.

Health maintenance: The patient has a primary care provider. The patient had a physical ~1 year ago.

Lab results were negative from that visit (STD testing included)

Family History: Both parents living without medical condition. No siblings.

Personal/Social History: The patient is a well educated and employed. The patient is married to a woman who is sitting in the waiting room. They have been married for 3 years and currently in a monogamist relationship. Both have been tested for HIV and STDs in their last physical ~1 year ago.

Appearance: Well dressed, slightly pale male appearing trans man.