

Introduction:

Gridlocked is an interactive game meant to teach those involved in emergency care about the systems level considerations involved in running an emergency department. This game was co-designed with emergency medicine faculty and medical students and can also be used as an important learning tool by incorporating the use of tailored lesson plans to allow players to focus on learning certain objectives.

Lesson plans can be developed in order to tailor learning towards specific objectives. See our website for lesson plans we have created with objectives we consider important in mind. You may also complete the lesson plan template below to develop your own lesson plan. This will involve you filling out the specific goals of the plan, as well as the changes to game setup and gameplay required to achieve these learning goals. Be sure to share your plans with us @GridlockedGame on Twitter.

Section I: Scenario Details

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| Scenario Title | The Critical Consultant |
| Scenario Developer(s) | Gurmun Brar |
| Contact E-Mail | Gbrar102@uottawa.ca |
| Date of Development | July 9, 2018 |
| Target Learning Group | Medical Students |
| Expansion Pack Required | No |
| Summary of Scenario | In this scenario, a relatively large number of patients coming into the ED require a consult. As a result, the consultant gets backed up and it becomes difficult to admit or discharge patients. To make matters worse, at the peak of patient backlog the players will draw a card that will make the consultant unavailable for one turn. Eventually, the consultant will gain a resident and players will have a chance to clear the ED and win the game. |
| Learning Goals | To learn the role and importance of consults in the emergency department, especially in a patient backlog. |
| Approximate Timing | 45 minutes |

Section II: Scenario Setup

This section will teach you how to set up the game to achieve the learning goals mentioned above. Most of the variation in setup comes from the deck setup section, which will outline the desired order of the patient and event cards. The board setup will tell you how (if at all) you should set up the board differently to start the game.

| Scenario Vignette: | <p>It's Saturday evening and you have just come in for your 8-hour shift at the hospital. You were expecting a pretty standard shift, until one of your fellow ER physicians lets you know that it's been "extremely busy...one of those days where everyone needs to be admitted."</p> <p>All you can hope is that it eases up a bit for your shift...</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|---|------------------------------|--------|--------|--------|--------|--------|-----|-----|------|------|-----|-----|-----|-----|-----|------|-----|-----|-----|------|-----|------|------|-----|-----|------|-----|------|-----|------|-----|------|------|-----|------|------|-----|-----|------|-----|-----|-----|------|--|--|--|--|--|------|--|--|--|--|--|------|--|--|--|--|--|------|--|--|--|--|--|-----|--|--|--|--|--|-----|--|--|--|--|--|------|--|--|--|--|--|
| Deck Setup: | <p>During this game, the team does NOT need to use the usual shift counter. You will simply tell them how many cards to draw, or hand them their next draw pile as listed below.</p> <table border="1" data-bbox="472 856 1382 1367"> <thead> <tr> <th>Cards 1-13 (Set up phase)</th> <th>Turn 2</th> <th>Turn 3</th> <th>Turn 4</th> <th>Turn 5</th> <th>Turn 6</th> </tr> </thead> <tbody> <tr><td>1-5</td><td>1-3</td><td>E-23</td><td>1-10</td><td>1-1</td><td>E-3</td></tr> <tr><td>1-6</td><td>2-8</td><td>2-9</td><td>1-12</td><td>2-5</td><td>1-2</td></tr> <tr><td>1-7</td><td>E-21</td><td>1-9</td><td>2-26</td><td>2-19</td><td>1-4</td></tr> <tr><td>2-2</td><td>3-24</td><td>1-8</td><td>E-12</td><td>3-4</td><td>2-18</td></tr> <tr><td>2-1</td><td>4-15</td><td>2-15</td><td>3-9</td><td>3-11</td><td>3-23</td></tr> <tr><td>2-7</td><td>2-6</td><td>4-22</td><td>3-6</td><td>4-6</td><td>5-8</td></tr> <tr><td>3-12</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>3-19</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>3-32</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>5-13</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>5-5</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>4-8</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>4-12</td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table> <p>For the rest of the turns, shuffle the remaining cards.</p> | Cards 1-13 (Set up phase) | Turn 2 | Turn 3 | Turn 4 | Turn 5 | Turn 6 | 1-5 | 1-3 | E-23 | 1-10 | 1-1 | E-3 | 1-6 | 2-8 | 2-9 | 1-12 | 2-5 | 1-2 | 1-7 | E-21 | 1-9 | 2-26 | 2-19 | 1-4 | 2-2 | 3-24 | 1-8 | E-12 | 3-4 | 2-18 | 2-1 | 4-15 | 2-15 | 3-9 | 3-11 | 3-23 | 2-7 | 2-6 | 4-22 | 3-6 | 4-6 | 5-8 | 3-12 | | | | | | 3-19 | | | | | | 3-32 | | | | | | 5-13 | | | | | | 5-5 | | | | | | 4-8 | | | | | | 4-12 | | | | | |
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| 1-5 | 1-3 | E-23 | 1-10 | 1-1 | E-3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1-6 | 2-8 | 2-9 | 1-12 | 2-5 | 1-2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 2-2 | 3-24 | 1-8 | E-12 | 3-4 | 2-18 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2-1 | 4-15 | 2-15 | 3-9 | 3-11 | 3-23 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2-7 | 2-6 | 4-22 | 3-6 | 4-6 | 5-8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 3-19 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3-32 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 5-5 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4-8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4-12 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Board Setup: | No changes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other Changes: | <p>Draw 13 cards on the first turn. Draw exactly 6 cards every turn after.</p> <p>During this game, the team does NOT need to use the usual shift counter. You will simply tell them how many cards to draw, or hand them their next draw pile as listed below.</p> <p>They will NOT roll the die, they will NOT draw extra cards unless instructed to do so in the event cards that are drawn.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Section III: Debriefing Guide

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| Why is this learning goal important? | Being able to appropriately communicate and collaborate with consultants is an essential skill of the emergency physician, and ensures quality patient care. |
| What were the key moments or decisions that took place during the game? | What did you learn about the role of consultants in the ED? How can a consultant back up lead to a backlog in the ED? How do the other staff depend on consultants in the ED? How did you decide which patients to use consultant actions on? How did you prioritize patients when there were no consultant actions remaining? What are some skills in presenting cases to consultants that can be implemented in the real ED? |
| What went well? | |
| What went poorly? | |
| What would you change next time you are in this type of scenario? | How did the group work together as a team? What are some strategies that can be implemented to communicate and collaborate appropriately with consultants? |