

Are your courses built for yesterday's student -or- today's learner?



Amy Morrissey

ARTISAN
LEARNING

What Is Andragogy?

- ▶ “The art or science of teaching adults”
- Merriam-Webster
- ▶ Comes from the Greek for “leading men”
- ▶ Differs from pedagogy (teaching of children)
 - ▶ Adults are self-directed, autonomous learners
 - ▶ Teachers are facilitators.

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MODERATE and DEEP SEDATION

Monitoring Guidelines

General Principles (Direct Observation)

- Clinically significant effects respiratory
- Typically few significant effects on hemodynamics
- Monitoring based on: Sedation depth, Patient, Procedure

Oxygenation (SpO₂)

- Hypoventilation due to UAO and/or reduced respiratory drive is primary cause of hypoxemia
- Common practice to maintain SpO₂ ≥ 90%
- Recommendation: Pulse oximetry required for Mod and Deep

Ventilation (CO₂, Stethoscope)

- Pulse oximetry alone is not sufficient to assess ventilation
- Recommendation: Observation/Auscultation for patients, EtCO₂/Pre-Tracheal stethoscope recommended for Deep



SERIOUS ADVERSE EVENTS

Apnea (Central)

- **Lack of respiratory effort of >15 seconds**, (sedative drug induced)
- **Onset:** abrupt and brief
- **Increased CO₂** precedes hypoxemia
- **Early detection/treatment:** critical to prevent hypoxemia
- **Patient and Sedative Factors**
- **Treatment:**
 - **Apneic Oxygenation:** reduces O₂ desat during apnea
 - Ann Emerg Med. 2012; 59: 165
 - **Bag mask ventilation** if apnea prolonged, low SPO₂ at start or desaturation





Meet Kiran

- 4-year-old
- Developmentally delayed
- Restorative dental work



Kiran's Grandma

- Primary caregiver

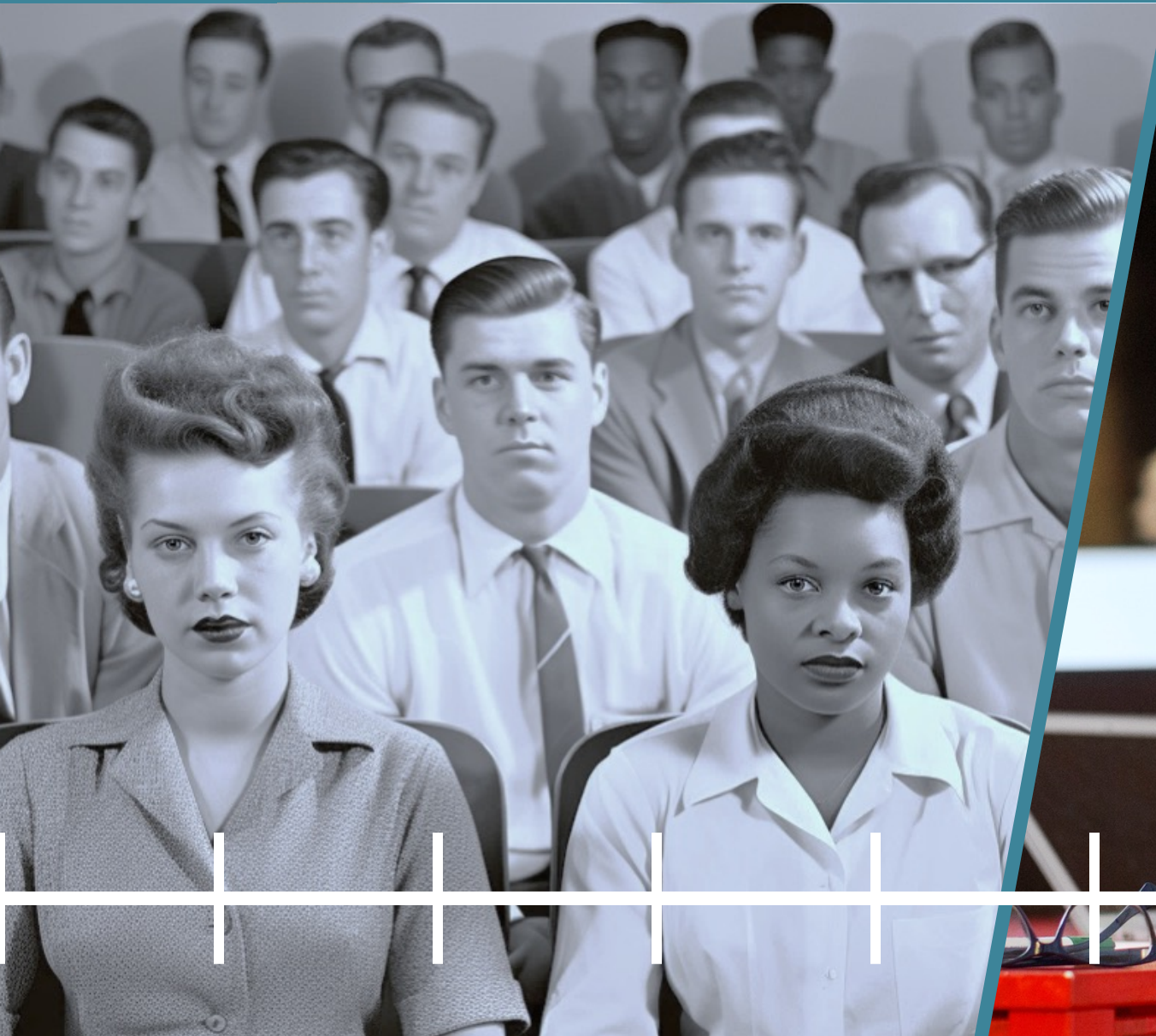




Why is there a disconnect?



Where are you on the scale?





Subject-Matter
Expert


Instructional-
Design Expert

Subject-Matter
Expert

Subject-Matter
Expert

What the
SMEs Think
Is Important

What Will
Help the
Learner
on the Job



**I've got a
Ph.D.**

**I've been
teaching this
for 20 years.**

A blurred background of a green field under a blue sky. The text "If you build it, he will come." is centered in white.

If you build it, he will come.

A blurred background of a green field under a blue sky. The text "If you build it, they will come." is centered in white.

If you build it, they will come.

A blurred background of a green field under a blue sky. The text "Ease his pain." is centered in white.

Ease his pain.

A blurred background of a green field under a blue sky. The text "Ease their pain." is centered in white.

Ease their pain.









Some random
Tuesday in
November

Situation

Decision

Guidance

Reflection

Consequences

Obstacles

Situation

What situations will the learners find themselves in?

Decision

Guidance

Reflection

Consequences

Obstacles

Scenario 4 Situation

XX is a 4-year-old developmentally delayed, ex 34-week gestational age male. History significant for enamel deformities, FTT, and GERD, presenting to your dental office for restorative dental work. Takes H2 blocker. No h/o CHD. + Milk protein allergy. H/o adenoidectomy and PE tubes at age 2. He has no personal history of complications with anesthesia, but has a family history of PONV.

Situation

What situations will the learners find themselves in?

Decision

What decisions will they face? What are the options?

Guidance

Reflection

Consequences

Obstacles

Scenario 4 Decisions

- What are some concerning features of his history?
- What other questions would you like to ask?
- What features of his physical exam would you focus on?
- What are potential sedation risks?
- Based on the procedure and the patient history, what drug considerations should be made?
- What preparations (equipment and room set-up) might you make to increase safety and success?
- What adverse complications could one anticipate?

Situation

What situations will the learners find themselves in?

Decision

What decisions will they face? What are the options?

Guidance


What guidance can help them decide?

Reflection

Consequences

Obstacles

Items of Note in Kiran's Chart



Past Medical History

Birth history and developmental history

- Born at 34 weeks gestation.
- No O2 requirement or ventilation assistance

Previous hospitalizations

- No recent hospitalizations

Chronic medical history

- Mild motor and speech developmental delays
- Failure to thrive (FTT)
- Gastroesophageal reflux disease (GERD) in the newborn period

Family medical history

- Dad has a history of nausea and vomiting postoperatively (PONV)
- No congenital heart disease, kidney disease, colitis, or cystic fibrosis

As you review the chart, what areas cause you concern?

Type your answer in the space provided. When you are finished, select **Compare My Answer** to compare your notes to those of a sedation expert.

Type your concerns here.

Compare My Answer

Situation

What situations will the learners find themselves in?

Decision

What decisions will they face? What are the options?

Guidance

What guidance can help them decide?

Reflection

Consequences

Obstacles

What might keep them from making a good choice?

Situation

What situations will the learners find themselves in?

Decision

What decisions will they face? What are the options?

Guidance

What guidance can help them decide?

Reflection

Consequences

What good, bad, or indifferent things will happen based on their choice?

Obstacles

What might keep them from making a good choice?

Situation

What situations will the learners find themselves in?

Decision

What decisions will they face? What are the options?

Guidance

What guidance can help them decide?

Reflection

What did they learn from the situation that will help them on the job?

Consequences


What good, bad, or indifferent things will happen based on their choice?

Obstacles

What might keep them from making a good choice?

Reaction

Benefits



**I already
have all this
in my slides.**

**I've been
teaching this
for 20 years.**



What resistance have you experienced?



How can you overcome that resistance?

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Society for Pediatric Sedation Case Study

- ▶ SPS had very didactic training where experts talked to slides.
- ▶ This is common in the industry.
- ▶ They wanted to move academic information to pre-work before a simulation.
- ▶ They wanted to be more didactic, interactive, and case based.
- ▶ They worked with Artisan E-Learning to create case-based e-learning.
- ▶ It had scenarios, practice activities, and critical thinking skills.

Yesterday vs. Today

- ▶ Yesterday's students tolerated academic, didactic training.
- ▶ Today's learners want more.
- ▶ Many training teams aren't aligned with what learners want.
- ▶ We should call ourselves instructional design experts.
- ▶ The SMEs don't always recognize what learners need.
- ▶ We need to help people deal with the situations they will face every day.

Framework

- ▶ Situation
- ▶ Decision
- ▶ Guidance
- ▶ Reflection
- ▶ Consequences
- ▶ Obstacles

Moving Forward

- ▶ The course was received well.
- ▶ You might get push back when you try to move away from “sage on the stage.”
- ▶ You can overcome this resistance by clearly explaining the benefits to the learners and the organization.

Should You Sedate?

Should the patient be sedated today?

Yes

No



Submit

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Let's Stay in Touch



Amy Morrissey

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Custom Learning Designers

