A Survey of Current Military Medical Simulation Initiatives

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Military Medical Simulation Survey

- Purpose:
  - Share Survey Findings
  - Identify Common Core Elements

Background: Explosive Growth

- DoD > 50 simulators
- Army > 200 simulators in 25 sites
- Air Force > 100 simulators in 30 sites
- Navy > 80 simulators in 6 sites

NCAMSC: Common Elements

- Senior Leadership Support
  - 1996
  - National Capital Area Medical Simulation Center
- Stated Requirements
  - Alternative ways to teach & evaluate clinical skills
- Funding
  - Initial: $4.5 million
- Planning/Needs Assessment

NCAMSC: Common Elements

- Resourced Site
  - Facility
  - Staff
  - Equipment

- Curriculum Based Program
  - SOM
  - SON
  - GME

- Evaluation

US Army Medical Simulation

2 Separate Initiatives

- Medical Simulation Training Center
- Central Simulation Committee
MSTC: Common Elements

- Senior Leadership Support
  - 2004
- Stated Requirements
  - Resourced, standardized training platform
- Funding:
  - Initial $25 million
- Planning/Needs Assessment FY’05
  - PEO-STRI – DCMT

MSTC: Common Elements

- Resourced Site
  - Facility
  - Staff
  - Equipment
- Curriculum Based Education Program
  - TC3 & CMAST
- Evaluation

CSC: Common Elements

- Senior Leadership Support
  - 2007
- Stated Requirements
  - System wide MS Training Program
- Funding
  - Initial: $2.9 million
- Planning /Needs Assessment
  - 4/07 Ft. Lewis, WA

CSC: Common Elements

- Resourced Site
  - Facility
  - Staff
  - Equipment
- Curriculum Based Education
  - GME, Patient Safety, Re-Deployment
- Evaluation
**DHPS: Common Elements**

- **Senior Leadership Support**
  - 2006
  - Distributed Human Patient Simulator
- **Stated Requirements**
  - System-wide, curriculum based training
- **Funding**
  - Initial: $3.2 million
- **Planning/Needs Assessment**
  - 2007 Contract

**CSAC: Common Elements**

- **Senior Leadership Support**
  - 2006
  - Central Simulation Advisory Committee
- **Stated Requirements**
  - Establish & coordinate MS training program
- **Funding**
  - Initial: Proposed - $3 million
- **Planning/Needs Assessment**
  - April 2007

**Common Elements**

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CSC GME Sites & Clinical Specialties

- Madigan AMC
- Tripler AMC
- Wm Beaumont AMC
- Womack AMC
- Walter Reed AMC/USU
- SAUSHEC/Brooke AMC
- Darnell
- Martin/WMACH
- Eisenhower
- Obstetrics & Gynecology
- Internal Medicine
- Emergency Medicine
- Pediatrics
- General Surgery
- Orthopedics
- Family Medicine
- Anesthesia
- Ophthalmology

CSC Process

Central Simulation Committee (CSC)

Develop/Adjust Curriculum

MTF MTF MTF

Conduct Training
Collect Data
Provide Data & Feedback

DHPS: Level 1 Sites

- 3 University based (CSTARS/CCATT/EMDS* Sites)
  - St. Louis MO
  - Cincinnati OH
  - Baltimore MD
- USAF School of Aerospace Medicine (USAFSAM) Brooks AFB – San Antonio, TX
- 2 RSVP/GME
  - Wilford Hall MC - San Antonio, TX
  - Nat’l Capital Area Medical Simulation Ctr. Silver Spring MD

  - Center for Sustainment of Trauma and Readiness Skills
  - Critical Care Air Transport Team
  - Expeditionary Medical Support

DHPS: Curriculum Requirements

- Pre Hospital Trauma Life Support
- Combat Casualty Care (TC3)
- Advanced Trauma Life Support (ATLS)
- Expeditionary Medical Systems (EMEDS)
- Emergency War Surgery Course (EWS)
- Readiness Skills Verification Program (RSVP)
- Critical Care Air Transport Team (CCATT)
- Patient Safety (TEAM STEPPS)
- Phase II Nursing Education
- Graduate Medical Education (GME)
Current Navy Medical Simulation

Medical Simulation Training Centers

- Fort Bliss
- Fort Carson
- Eighth Army
- Camp Shelby
- Fort Stewart
- Fort McCoy
- Schofield
- Fort Dix
- Fort Bragg
- Fort Drum
- Fort Hood
- Fort Lewis
- Vilseck (USAREUR)
- Balad/MTT
- Kuwait
- Fort Wainwright
- Fort Riley

CSAC: Proposed Simulation Efforts