A descriptive evaluation of clinician's gaze behaviours during simulated paediatric emergencies

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Background/Aims





To define the gaze behaviour, standing positions and clinical performance of clinicians during a simulated paediatric emergency

Methods

- Observational study
- BHSCT governance approval
- Convenience sample
- Participants all undertook a standard 6 minute scenario
- Participants blinded
- Structured debrief



- •SMI ETG®
- •4 key areas of interest airway, algorithm, chest and defib

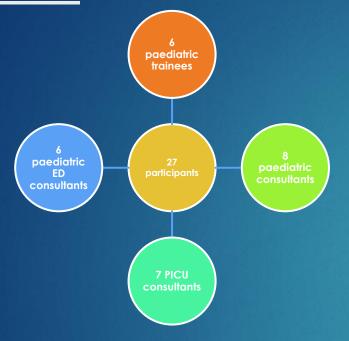
Standing positions

Momentary time sampling

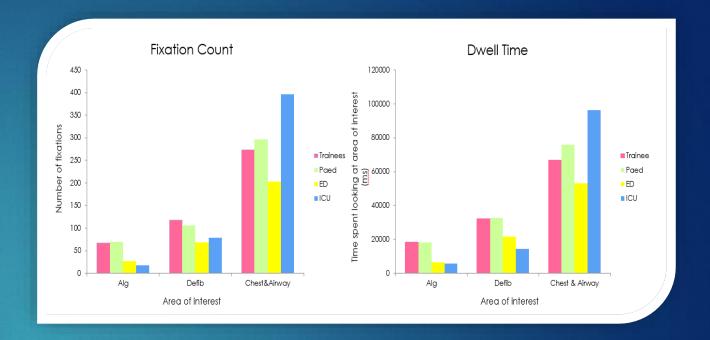
Time to key interventions

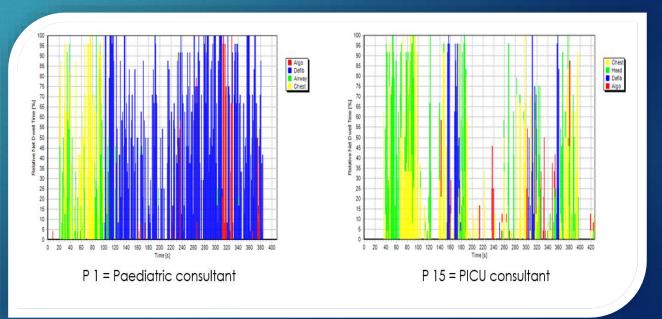
Review of video recordings

Results

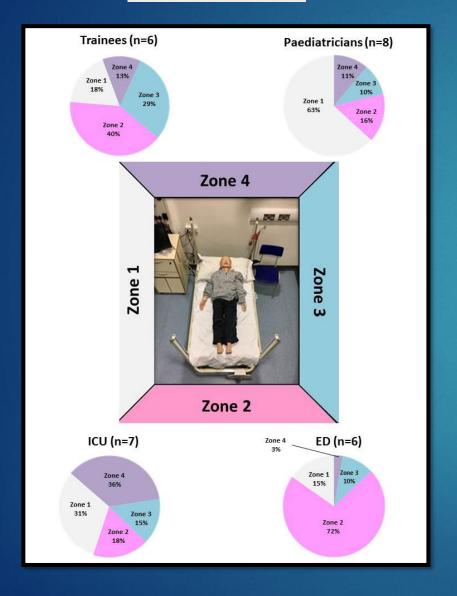


	Median time in seconds		
	Bag and mask ventilation	Chest compressions	1 st Shock
Trainees	29.5	47	129
Paediatricians	34	60.5	142
PEM	34.5	43.5	123.5
PICU	27	32	105





Results



Conclusions

- Our study is the first to describe the gaze behaviour of clinicians in a simulated emergency.
- PICU consultants were fastest to all key clinical interventions and their gaze behaviour is very similar to that observed in experienced pilots.
- Although potentially perceived as experts, consultant paediatricians performed worst and had a similar gaze pattern to true novices [trainees].
- Their tendency to 'perceptual narrowing' in situations of high cognitive load has been described in novice drivers and increases the risk of missing key visual cues.
- Further research is needed to develop and evaluate how this could be used as an educational tool to teach novices.
- This may improve training and ultimately enhance the quality of care offered to patients in the resuscitation setting.