Gynaecology Emergency Management (GEM)
Simulation Training
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Background

Simulation training has a long history, dating back as far as 2000 BC, with early examples including simulated rhinoplasty procedures. Over time, the concept evolved and expanded across various medical specialties. Obstetric simulation training in particular, was first documented in the early 1700s. The American College of Obstetricians and Gynaecologists (ACOG) has highlighted that communication and teamwork failures contribute to approximately 70% of adverse events during drills. Despite advances in technology and methods, the core principle remains the same across all disciplines: repeated training enhances performance and outcomes. The simulation promotes teamwork, strengthens interprofessional relationships, and reduces errors related to human factors.

Methods

Acute gynaecology scenarios are typically developed and evaluated through simulations conducted by rotating multidisciplinary teams. These scenarios reflect common gynaecological emergencies that clinicians frequently encounter in daily practice. Gynaecology simulation training uses simulators and virtual reality to provide a safe, risk-free environment for healthcare professionals to practice technical and non-technical skills, improving surgical dexterity and confidence. Each simulation team includes healthcare professionals who would normally work together in real-life clinical settings, fostering realistic interactions and authentic team dynamics. This approach encourages active participation from all members and promotes a deeper understanding of each other's roles. As part of a broader effort to bridge gaps between specialties, Accident & Emergency (A&E) staff are also invited to participate, helping to strengthen interdepartmental relationships and collaboration. The effectiveness of the workshop was evaluated using a research-based, paper-based pre- and post-test questionnaire, designed to assess changes in knowledge, confidence, and perceived competence as a result of the simulation.

Results

Stations such as miscarriage, ectopic pregnancy, and adult resuscitation are included as part of the simulation training package. In addition to clinical skills, ethical issues are also integrated into the scenarios to provide a more comprehensive and realistic learning experience. During training, it was noted that healthcare staff highly valued these scenarios, particularly because they do not regularly encounter ethical issues involved in the tasks in their routine practice. This exposure was perceived as beneficial in enhancing both clinical decision-making and ethical reasoning in high-pressure environments.

Conclusion

100% of participants agreed they understand different team members role and importance of effective communication among team members.

85%-95% agreed their knowledge and understanding about clinical situations improved.

90-95% agreed they feel more confident to deal with similar situations in real life. They participants suggested it will improve patient prospective and care. We will do a survey for patient satisfaction to test this hypothesis.

References

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