Simulation Support Request Intake Form: Part 2B Sim Equipment Support Team

Instructions:
Submission of the Part 2 form is required at least 6 weeks prior to the session. To complete the request process, it must include templates found on the Simulation Center Resources webpage. Submit additional templates to HS-SimulationEquipmentSupportTeam@ucdavis.edu. (e.g., Scenarios and supply requirements).

Manikin/Task Trainer Equipment Support Assignment:

Official Event Title:
Date(s) of Event:
Time(s) of Event:
School/Department:
IOR or Coordinator Information:
Delivery/Technology Format:
Learner Level(s):
Approximate Number of Participants:

Lead Simulation Staff Person Assigned:
Assigned Space Location:
Training Rooms Assigned:
Part 1 Survey ID:
Q3. Please list any relevant changes that occurred from the above information:

- Official Event Title: ______________________________
- Date(s) of Event: ______________________________
- Time(s) of Event: ______________________________
- School/Department: ______________________________
- IOR or Coordinator Information: ______________________________
- Delivery/Technology Format: ______________________________
- Learner Level(s): ______________________________
- Approximate Number of Participants: ______________________________
- Approximate Number of Training Rooms Needed: ______________________________

Q4. Names of onsite lead instructor/COORDINATOR?

____________________________________________________________
Learner Details

Q5. Total number of learners?

☐ Per Session ________________________________________________

☐ Per Day _________________________________________________

Q6. Will the learners be divided into groups or stations?

☐ Yes

☐ No

Q7. How will learners be assessed?

☐ Pre/Post Test

☐ Individual Rating

☐ Faculty Observation

☐ Other (Please Explain):

__________________________________________________

Q8. How will learners receive feedback?

☐ Immediate Debrief

☐ Follow-up Discussion

☐ Written Evaluation

☐ Other (Please Explain):

__________________________________________________
Task Trainer Information

Q9. Do you require task training equipment for your training session?

○ Yes
○ No

Q10. What types and quantity of task trainers are needed?

   Link to resources: Simulation training equipment resources

________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
Full-Body Manikin Details

Q11. Do you require a full-body manikin(s)?

- Yes
- No

Q12. What type(s) of full-body manikin is needed?

Link to resources: Simulation training equipment resources

________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
Q13. Do you require continuous manikin support?

- Yes
- No

Q14. If using high fidelity simulation-based scenario, please provide overview stem for each case-based learning event. (Example: "Clinic setting, 64 y/o male, complaint of abdominal pain for 8 hours. PE: Pale, cool, diaphoretic, tachypnea, edema to lower extremities").

Link to resources: [Simulation Scenario Template](#)

- Stem 1: __________________________________________________
- Stem 2: __________________________________________________
- Stem 3: __________________________________________________
- Stem 4: __________________________________________________
- Stem 5: __________________________________________________
- Stem 6: __________________________________________________

**Additional Equipment and Technology Required**

Q15. Do you require additional equipment and/or technologies?

- Yes
- No

Q16. Supplies and equipment needed beyond standard room set up?

Link to resources: [Simulation training equipment resources](#)

______________________________________________________________
______________________________________________________________
______________________________________________________________
Q17. Please include any special instructions or requests:

________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

Q18. Is audio-visual support needed?

- Panopto Recording
- Distance Learning Technology (e.g., Zoom)
- None

After submission of this form, please email the completed items below to HS-SimulationTechnologySupportTeam@ucdavis.edu

Items to Email:
- Scenario(s)
- Supply List

A confirmation will be provided to the client from the assigned Simulation Support team member assigned. A follow-up meeting may be scheduled for further discussion.

- I acknowledge Part 2 components to be submitted.