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Creating Video Education: Lessons learned

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Objectives

1

Overview of
Video
Education
program

2

Current
process

3

Lessons
learned



Video Education Program

- Clinical teams identified a need for high-quality, accurate video education that aligned with internal policies
- Launched in 2018
- Program creates patient education videos that meet Children's branding guidelines and patient's needs



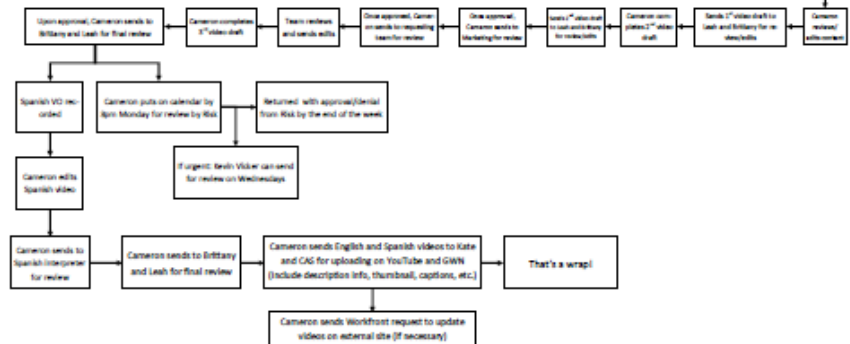
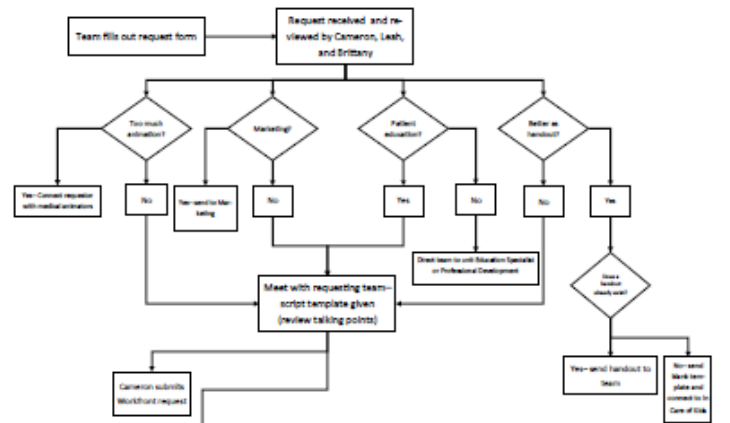
Since 2018...

We've produced 39 videos

We have 29 open projects



Current workflow



Current workflow

1. Vet video requests
2. Meet with requesting team/start script writing
3. Prioritize video
4. Edit script
5. Film
6. Record voiceover/narration
7. Edit
8. Send to requesting team and Marketing for final approval
9. Repeat steps for Spanish video
10. Submit videos to Legal and Risk Management teams for review
11. Upload to YouTube and internal entertainment vender
12. That's a wrap



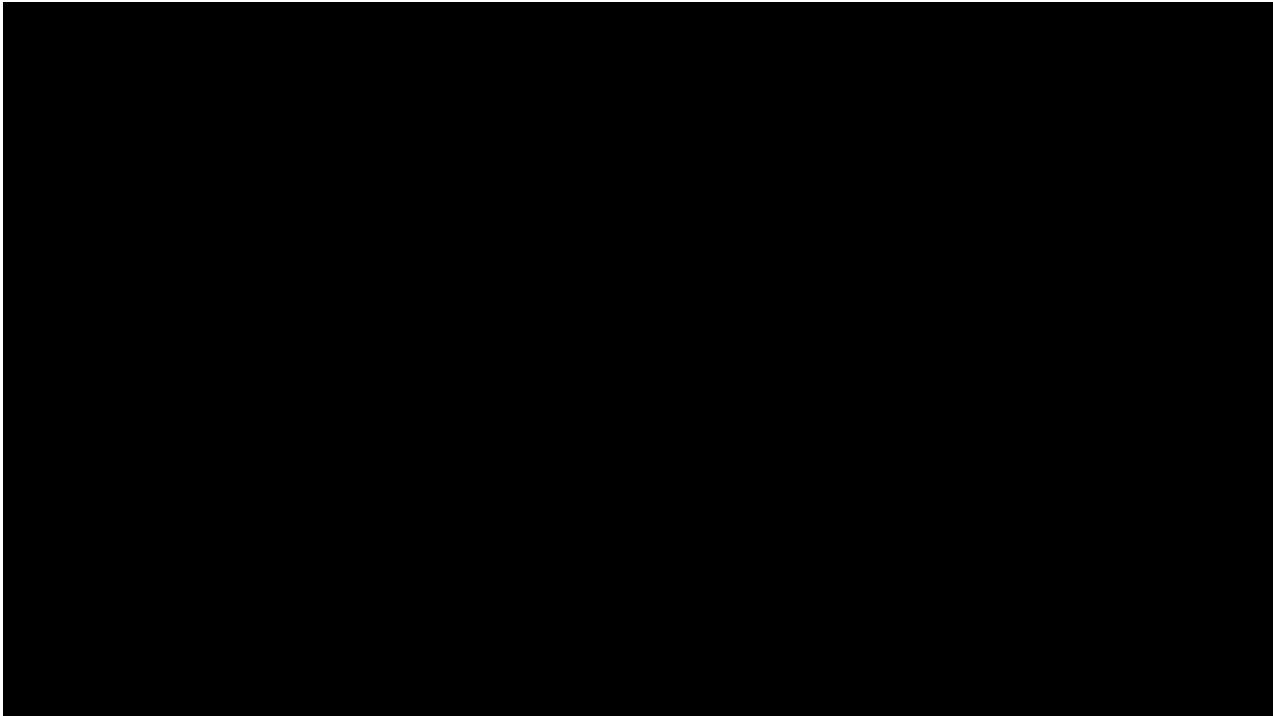
Lessons Learned

- Have a filming plan
 - Who- patients, family members/hospital staff (home vs. hospital, culturally diverse)
 - What- specific shots based on scripting, accurately show the desired action
 - When- time of day based on lighting in room or outside
 - Where-home vs. hospital setting, studio, or patient room
- Be aware of distracting medical machinery/complexities
- Use the most universal equipment
- Steady shots, especially close ups
- Be mindful of facial expressions
- Limit liabilities/conflicts of interest
 - Cleanliness of hands
 - Room/equipment setup in the background
 - No chipping nail polish
 - Brand names on clothes, machinery or medications
- Understanding/adhering to brand standards
- Have a strong partnership with Marketing team
- Be conscientious of YouTube credibility



What's wrong with this video?







	Shot	Voiceover	Text on the Screen
	Title	How to vent a G-tube	
	Filler Footage	Venting the G tube helps get gas and air out of the stomach that may cause your child discomfort.	
1	Static shot of 60 mL syringe	You will need a large syringe and an extension tube for devices close to the skin.	large syringe and extension tube
	Text on screen	Before touching the G tube, wash your hands for 15 seconds or use hand sanitizer.	Wash your hands or use hand sanitizer
	Close-up of priming the extension with water and clamping	If the extension tube is not already attached to the G-tube, prime it with water or formula and then clamp it.	
	Close-up Attaching extension to G-tube	Attach the primed extension tube to the g-tube.	
4	Wide shot of removing plunger from syringe; close-up of attaching syringe to extension	Take the plunger out and attach the open syringe to the extension tube.	
5	Close-up of unclamping; wide shot of air escaping the tube.	Unclamp the tube and allow any air to escape the tube.	
6.6	Wide shot of air and coming up through the tube into syringe	You may see fluid come into the syringe, but this is normal.	
	Close-up of fluid draining back in	When you no longer see air coming up through the tube, allow any fluid in syringe to drain back into the stomach.	Allow the fluid to drain back into the stomach
7	Close-up of clamping G-tube and disconnecting the syringe	Clamp the extension tube and disconnect the syringe.	
	Close-up of flushing the G-tube with water	Flush the extension tube with water to prevent the G-tube from getting clogged.	
	Wide shot of rinsing extension tube in sink	If you're done using the extension tube, remove it, rinse it, and allow it to air dry.	
2	Still shot of Farrell bag on table; parent calling doctor	If your child has problems with gagging or retching, try using a bag made special for venting or call your doctor.	
		For more information, visit childrenscolorado.org/gtube	For more information, visit childrenscolorado.org/gtube

Is this better?



How to vent a G-Tube



Now you try!



Shot number	Suggested video shot	Voice Over (Narration)	Text on screen (optional)
1		Underarm supports should stand 2 inches below the armpit	
2		Adjust the handgrip so the elbow bends a little	
3		Use the bolts and wing nuts to adjust the height	
4		This is how you stand up with your crutches	How to stand up with crutches
5		As you get ready to stand up with your crutches, put your good foot flat on the floor, place both crutches in one hand, and place the other hand on the seat or armrest	
6		Caregivers stand next to your child, not in front. Place your hands around your child under the outside of his/her shoulder blades. If needed, give them support as they stand up. Do not pull them by their hands/arms.	
7		Slide your bottom to the edge of the seat.	
8		Leaning forward, put your weight through your hands and good leg and foot, and then stand.	
9		Caregivers, keep your hands on their shoulder blades if they need help to stay balanced and steady.	
10		This is how you walk with your crutches	How to walk with crutches
11		Place the tips of the crutches about 3 to 4 inches in front of you	
12		Balance on your good leg and keep your sore leg lifted.	
		Do not put weight on your sore leg unless instructed to by your doctor.	
13		Push your weight into the handgrips and step up to the crutches with your good leg.	
14		Caregivers, walk next to your child at a close distance.	
15		unsteady or uncoordinated at first. If they are, have one hand around their back keeping out of the way of their arms and crutches.	they may be unsteady or uncoordinated at first
16		Keep a close eye on them in case they start to lose their balance and need you to help steady them.	
17		Make sure they are not walking too quickly or taking too big of a step as they are learning.	Make sure they are not walking too quickly or taking too big of a step as they are learning.
19			
20			



Shot number	Suggested video shot	Voice Over (Narration)	Text on screen (optional)
1	Show close up	Underarm supports should stand 2 inches below the armpit	
2	Wide shot of adjusting hand grips	Adjust the handgrip so the elbow bends a little	
3	Close-up of how to adjust the hand grip	Use the bolts and wing nuts to adjust the height	
4	Text on screen	This is how you stand up with your crutches	How to stand up with crutches
5	Filler footage; Close-up of each step	As you get ready to stand up with your crutches, put your good foot flat on the floor, place both crutches in one hand, and place the other hand on the seat or armrest	
6	Wide-shot of caregiver standing next to child with hands under armpits. Close-up of where to place hands. Show "X" over caregiver attempting to pull by their hands.	Caregivers stand next to your child, not in front. Place your hands around your child under the outside of his/her shoulder blades. If needed, give them support as they stand up. Do not pull them by their hands/arms.	
7	Close-up of sliding forward on seat	Slide your bottom to the edge of the seat.	
8	Wide-shot of full motion, close-up of pushing up with hand	Leaning forward, put your weight through your hands and good leg and foot, and then stand.	
9	Wide-shot of caregiver providing support	Caregivers, keep your hands on their shoulder blades if they need help to stay balanced and steady.	
10	Text on screen	This is how you walk with your crutches	How to walk with crutches
11	Close-up of distance between feet and crutches	Place the tips of the crutches about 3 to 4 inches in front of you	
12	Wide shot of child walking with sore leg lifted	Balance on your good leg and keep your sore leg lifted.	
13	Wide shot of child walking with sore leg lifted Close-up of hands on grips while walking; close-up of feet while walking	Do not put weight on your sore leg unless instructed to by your doctor. Push your weight into the handgrips and step up to the crutches with your good leg.	
14	Wide shot of caregiver walking next to child	Caregivers, walk next to your child at a close distance.	
15	Wide shot of caregiver walking next to child providing support	As they learn to walk with the crutches, they may be unsteady or uncoordinated at first. If they are, have one hand around their back keeping out of the way of their arms and crutches.	they may be unsteady or uncoordinated at first
16	Wide shot of caregiver walking next to child providing support	Keep a close eye on them in case they start to lose their balance and need you to help steady them.	
17	Show "X" over child taking too big of steps, close-up and wide.	Make sure they are not walking too quickly or taking too big of a step as they are learning.	Make sure they are not walking too quickly or taking too big of a step as they are learning.





	Suggested video shot	Voice Over (Narration)	Text on screen (optional)
1		Before starting the lab draw process, you will need to gather the following supplies: gloves, alcohol wipes, 2 sterile saline syringes, an empty 10 milliliter syringe, 1 heparin 10:1 syringe, lab tubes, patient labels, a transfer device, biohazard bag, hand sanitizer, and sharps container.	
		The sharps container will be ordered by your BMT coordinator and delivered to your home.	The sharps container will be ordered by your BMT coordinator and delivered to your home.
2		Wash your hands using soap and water for 15 seconds or use a hand sanitizer and put on your gloves	
3		When drawing labs from a line with multiple tubes or lumens, make sure you are using the red lumen	
		Remove the saline and Heparin syringes from their packages	
		Notice the air bubble in the syringe, you will need to remove that.	
		To do this, take the cap off the syringe and make sure you do not touch the top of the syringe or cap. Pull back on the syringe and then push the air bubble out, and put the cap back on.	
		Follow those same steps to prepare the other saline syringe and Heparin syringe	
4		Clean the cap for 15 seconds using an alcohol wipe, and let it dry for 15 seconds.	Countdown with clock animation
		The most important part is making sure you let it dry completely	Let it dry completely
6		Attach the saline syringe to the cap. Unclamp the line and push in the recommended amount of saline, this is based on your child's weight and type of line. Push in 1 milliliter at a time and pause in between, this is called the push-pause method.	This is based on your child's weight and type of line
7		Do not disconnect the syringe. Draw the waste blood by pulling back 3 milliliters of blood. If you are drawing blood from a mediport, waste 5 milliliters of blood.	Pull back 3mLs of waste blood or 5mLs with a Mediport.
8		After drawing the waste, clamp the line, remove the syringe and throw it away in the sharps container.	
9		Clean the cap for 15 seconds using another alcohol wipe, and let it dry for 15 seconds.	Clean the cap and let it dry for 15 seconds.



10	Attach the empty 10 milliliter syringe to the cap, unclamp the line and pull back the appropriate amount of blood needed for your labs. The discharge or clinic nurse will tell you how much blood you will need.	The discharge or clinic nurse will tell you how much blood you will need.
11	Once you have the needed amount of blood, clamp the line, and remove the syringe	
12	Clean the cap for 15 seconds using another alcohol wipe, and let it dry for 15 seconds.	Countdown with clock animation
13	Flush the line with saline again following the same steps as before.	
	Clamp the line and remove syringe	
14	Clean the cap again for 15 seconds using another alcohol wipe, and let it dry for 15 seconds.	Clean the cap and let it dry for 15 seconds.
15	Attach the heparin 10:1 syringe to the cap. Unclamp the line and push in the recommended amount of Heparin, this is based on your child's weight and type of line. After flushing, clamp the line and remove the syringe.	This is based on your child's weight and type of line
	If you have an alcohol infused cap, put a new one on the end of the line.	If you have an alcohol infused cap, put a new one on the end of the line.
	Attach the transfer device to the end of the syringe and push the other end into the top of the specimen tube, until the blood fills the tube. Fill the remaining tubes using the same steps.	
	Throw away the syringe and transfer device in the sharps container.	
19	Label the tubes with the provided labels and write your initials, the date and time on each label.	
	Make sure the label includes your child's name, medical record number, date, time, and your initials	name, medical record number, date, time, your initials
20	Place the tubes in the provided biohazard bag.	
	If you're staying at Brent's place use the key that you were given to place labs in lab drop box by 7:45 am Monday-Friday. Otherwise bring them to the clinic.	Place use the key that you were given to place labs in lab drop box by 7:45 am Monday-Friday. Otherwise bring them to the clinic.
	For any questions please call the number on your screen.	720-777-6069



Suggested video shot	Voice Over (Narration)	Text on screen (optional)
Supplies labeled on table,	Before starting the lab draw process, you will need to gather the following supplies: gloves, alcohol wipes, 2 sterile saline syringes, an empty 10 milliliter syringe, 1 heparin 10:1 syringe, lab tubes, patient labels, a transfer device, biohazard bag, hand sanitizer, and sharps container.	
Close-up of biohazard container and text on screen	The sharps container will be ordered by your BMT coordinator and delivered to your home.	The sharps container will be ordered by your BMT coordinator and delivered to your home.
Wide shot of washing hands and close-up donning gloves	Wash your hands using soap and water for 15 seconds or use a hand sanitizer and put on your gloves	
Close-up of both lumens	When drawing labs from a line with multiple tubes or lumens, make sure you are using the red lumen	
Close-up removing syringes from packages	Remove the saline and Heparin syringes from their packages	
Close-up tilting syringe side-to-side to show bubble	Notice the air bubble in the syringe, you will need to remove that.	
Close-up removing cap, removing air bubble, and replacing cap; text on screen	To do this, take the cap off the syringe and make sure you do not touch the top of the syringe or cap. Pull back on the syringe and then push the air bubble out, and put the cap back on.	show arrows and "Do Not Touch" pointing to top of cap and syringe
Show start of the same process	Follow those same steps to prepare the other saline syringe and Heparin syringe	
Close-up cleaning cap; text on screen	Clean the cap for 15 seconds using an alcohol wipe, and let it dry for 15 seconds.	Countdown with clock animation
Close-up letting it dry; text on screen	The most important part is making sure you let it dry completely	Let it dry completely
Close-up attaching the sterile syringe and flushing the line using the push-pause method; text on screen	Attach the saline syringe to the cap. Unclamp the line and push in the recommended amount of saline, this is based on your child's weight and type of line. Push in 1 milliliter at a time and pause in between, this is called the push-pause method.	This is based on your child's weight and type of line
Close-up drawing waste; text on screen	Do not disconnect the syringe. Draw the waste blood by pulling back 3 milliliters of blood. If you are drawing blood from a mediport, waste 5 milliliters of blood.	Pull back 3mLs of waste blood or 5mLs with a Mediport.
Close-up clamping and removing waste syringe	After drawing the waste, clamp the line, remove the syringe and throw it away in the sharps container.	
Text on screen	Clean the cap for 15 seconds using another alcohol wipe, and let it dry for 15 seconds.	Clean the cap and let it dry for 15 seconds.



	Close-up attaching the 10ml empty syringe, unclamping, and pulling blood; text on screen	Attach the empty 10 milliliter syringe to the cap, unclamp the line and pull back the appropriate amount of blood needed for your labs. The discharge or clinic nurse will tell you how much blood you will need.	The discharge or clinic nurse will tell you how much blood you will need.
	Close-up clamping and removing syringe	Once you have the needed amount of blood, clamp the line, and remove the syringe	
	Close-up cleaning cap; text on screen	Clean the cap for 15 seconds using another alcohol wipe, and let it dry for 15 seconds.	Countdown with clock animation
	Close-up attaching the sterile syringe and flushing the line using the push-pause method sped up; text on screen	Flush the line with saline again following the same steps as before.	
	Close-up clamping and removing syringe	Clamp the line and remove syringe	
	Text on screen	Clean the cap again for 15 seconds using another alcohol wipe, and let it dry for 15 seconds.	Clean the cap and let it dry for 15 seconds.
	Close-up attaching heparin 10:1, flush and remove	Attach the heparin 10:1 syringe to the cap. Unclamp the line and push in the recommended amount of Heparin, this is based on your child's weight and type of line. After flushing, clamp the line and remove the syringe.	This is based on your child's weight and type of line
	Text on screen	If you have an alcohol infused cap, put a new one on the end of the line.	If you have an alcohol infused cap, put a new one on the end of the line.
	Close-up showing process and disposal of transfer device	Attach the transfer device to the end of the syringe and push the other end into the top of the specimen tube, until the blood fills the tube. Fill the remaining tubes using the same steps.	
	Close-up disposing of transfer device	Throw away the syringe and transfer device in the sharps container.	
	Close-up writing on label and attaching to tube	Label the tubes with the provided labels and write your initials, the date and time on each label.	
	Text on screen	Make sure the label includes your child's name, medical record number, date, time, and your initials	name, medical record number, date, time, your initials
	Close-up placing tubes in biohazard bag	Place the tubes in the provided biohazard bag.	
	Text on screen	If you're staying at Brent's place use the key that you were given to place labs in lab drop box by 7:45 am Monday-Friday. Otherwise bring them to the clinic.	Place use the key that you were given to place labs in lab drop box by 7:45 am Monday-Friday. Otherwise bring them to the clinic.
	Text on screen	For any questions please call the number on your screen.	720-777-6069



How to draw labs at home



That's a wrap!

