The Magic of Moulage: Switching the Classroom Approach

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The Magic of Moulage: Enhancing the Suspension of Disbelief in Nursing Simulation

Moulage

The term moulage stems from the French word 'mouler', which means to mold. However, the use of this word is synonymous with simulated illnesses or injuries as applied to a person or object for healthcare education. (Healthcare Simulation, 2006)

In the context of nursing education, moulage is the use of artificial wounds or illnesses with materials to replace patient care scenarios. Moulage enhances the realism of the simulation. By creating a more realistic simulated environment, education is enhanced.

Method to Enhance Realism in Simulation

This technique involves the use of rubber, wax, or silicone to simulate injuries or illnesses in the clinic. (Larson & Jobe, 2019)

Methodology of Moulage

Incorporating Simulation

References


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Current use of this word is synonymous with simulated illnesses or wounds as applied to a person or object for health care education (Healthy Simulation, 2015).

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History of Moulage

The history of medical moulage began with the use of wax models. Gaetano Giulio Zumbo (1656–1701) who worked in both Italy and France created life-like sculptures of wax that displayed anatomy and disease (Drexler, 2010).
Like Zumbo, Jules Baretta (1834–1923) used wax to portray human illness. Baretta made more than 4000 wax models on dermatological diseases that were cast from live patients.

Moulages were made for the education of dermatologists worldwide and were direct casts of the person's body affected by the disease. These wax molds were designed to be realistic, informative, and case representations of the pathology being illustrated.
Baretta's wax casts displayed at
La Musée des Moulages
Paris, France
Moulage in Modern Times

Moulage in the 20th and current century have expanded to use within the military and medicine, but most recognizably used in art and special effects for film. Application of moulage to nursing practicum has only recently been a focus in the last 20 years (Sanford, 2010). It is used in conjunction with simulation to create an effective, realistic environment designed to enhance learning.
Experiential Learning as Applied to Simulation

1. Concrete Experience - (a new experience of situation is encountered, or a reinterpretation of existing experience).

2. Reflective Observation (of the new experience. Of particular importance are any inconsistencies between experience and understanding).

3. Abstract Conceptualization (Reflection gives rise to a new idea, or a modification of an existing abstract concept).

4. Active Experimentation (the learner applies them to the world around them to see what results) (Kolb, 1981).
Introducing Moulage to Simulation

Simulation is an event or situation that is made to resemble clinical practice as closely as possible and is used to enhance learning in a safe, structured environment that recreates reality without the risk (Rauen, 2009).

Simulation used in nursing began in earnest following research and endorsements from the National League of Nurses in 2003 (Sunford, 2010). Simulation can foster experiential learning in nursing education by using high-fidelity manikins to dynamically portray patient scenarios for the practice of implementing patient care.

Applying moulage techniques to manikins as a method of instruction is a realistic environment designed to allow the student to forgo the disconnect between real and simulated patients and immerse themselves in the learning process.

The occurrence of immersion in simulation as though it were an actual patient is coined as suspending disbelief.
Suspending Disbelief

This phenomena is defined as the ability "to accept as plausible something one knows to be untrue, especially the setting and plot of a drama or fiction so as to allow the appreciation of art" (Houghton Mifflin, 2015).

The term 'suspension of disbelief' was first developed as a literary term by the poet Samuel Taylor Coleridge in 1817 (University of Pennsylvania, 2015).

Creating a realistic environment that replicates actual patient care scenarios enhances student learning. By utilizing moulage to simulate wounds and illnesses on manikins the idea of being in a non-clinical lab environment is reduced.

The more the student engages in the simulation and participates in a way that mimics the clinical setting, the more effective simulation will be (Elangovan, 2013).
Methods to Enhance Realism in Simulation

Using the senses and how humans engage with others in the clinical setting is the basis for effective moulage and the suspension of disbelief in simulation.

Setting the Stage

Supplies and Tools
Setting the Stage
Supplies and Tools
Methodology of Moulage
Debriefing after Simulation
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