

Essential things to know about perioperative nursing

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Perioperative nurses take the responsibility of safeguarding the rights of surgical patients before, during and after his surgery. The nurse's decisions during this period of the patient's institutionalization are based on universal moral principles. As the patient's advocate or representative during this crucial period, the nurse ensures the quality and continuity of care that a surgical patient needs.

This is simply based on the premise that patients during this period cannot functionally and actively participate, decide and monitor the regimen of care that best suits them particularly during and after sedation. Often, Perioperative nurses are faced with decisions necessary when caring for surgical patients. They are therefore necessarily prepared to recognize that soon ethical dilemmas will occur and the nurse must take appropriate courses of action through responsible nursing decisions. Not only are they expected to make clinical and technical decisions but also ethically and morally sound decisions suitable for the treatment of their patient.

In a daily encounter and exchange with the patient, nurses often have the potential to develop relationships with their patients based on trust. Patient's trust that nurses will support and follow through with any concerns or issues that have been discussed ((Seifert, 2002: 306). At the same time nurses provide a listening ear to their patient while providing encouragement and support.

Likewise, nurses are provided with the opportunity to learn and gather information essential to the health concerns of their patients including fears and apprehensions. This provides an ample opportunity for nurses to exact

information that could be relayed to physicians and other family members pertinent to the regimen of treatment acceptable to the patient. Based on the parameter of therapeutic use of self, nurses are encouraged to maintain a professional and therapeutic relationship between nurses and patients and their family members (Rushton et al, 1996: 186).

The Nurses' Role

Within the framework of the nursing process, nurses' work in collaboration with the other health team members in order to achieve desirable patient outcomes (AORN, 2004: 16). They are enjoined to use the tools of the nursing process to meet the needs of the patient undergoing invasive procedures. Although much of the practice involves technicalities, the patient is still the main focus of the perioperative nurse rather than on her technical functions. The goal is still to provide care and support for the patient and for their families (Spry, 2005: 3).

As the perioperative nurse, one is likewise expected to assist the patient and their families in making sound decisions to meet the overall desired outcome of wellness after surgery and a healthy return to normal life. Along the lines of perioperative nursing, care is provided in various settings based on three major aspects of providing direct care; coordinating comprehensive care and educating patient and their families (Spry: 3).

The impact of illness particularly when invasive procedures are due usually limits the patients' individual autonomy and ability to make decisions, thereby placing the perioperative nurse in a powerful position. Patients and family members often feel helpless in a health care setting; how much more

when a loved one is scheduled for operation? The patient is therefore vulnerable at this stage so the role of the nurse as an advocate for the patient is stressed as vital to patient care.

It would most likely help the patient and his family to know that the nurse during a perioperative setting and procedure ensure a continuous assessment of care for the patient while in the OR, thereby providing ample assurance that the patient's needs are being met. The nurse, as a moral agent of the patient, must therefore be ready and be able to act and advocate for the patient's needs whenever necessary while providing perioperative care.

In addition, the nurse's role includes informing patients of their rights and to ensure that patients are given all the necessary information necessary to make/participate in the decision making and likewise support them in whatever decision they undertake. Although the nurse has a responsibility in safeguarding the patient from the incompetence of other health care professionals her main ethical duty is the prevention of a potential injury to the patient and to third parties (Kohnke, 1980: 2039).

Nurses in general and in particular perioperative nurses must act as an advocate for the patient, co-worker, family members and students (Seifert, 2002: 307). By virtue of her relationship with the patient, her obligation is to provide a safe, professional and ethical care particularly during the perioperative phase when the patient and family members are most vulnerable. Likewise, technically, the patient and the family member are not equipped to understand the aspect of perioperative invasive procedures

which is why the nurse should come as an advocate for the rights of the patient and their families. Thus it is in principle the duty of the nurse to provide patients with ethical care they ought to receive during this particular phase of their treatment.

Promoting perioperative nurses' safety

It is therefore another vital job of a perioperative nurse to ensure and create an environment that fosters ethical behavior. As a duty to herself, the nurse must engage in a life-long learning experience, maintaining competence, and promoting personal and professional values, supports the establishment and maintenance of an ethical workplace (Seifert, 2002: 306).

Nurses must be able to establish, maintain, and improve the work environment and maintain an ability to preserve their integrity and moral self-respect. Other virtues and excellence of character like loyalty and honesty further promote nurses' abilities to fulfill moral obligations and cited as exemplary qualities of the moral person to behave in an ethical manner (ANA, Sec. 20). The environment strongly influences in the acquisition of virtues and excellence that may support or impede

ethical behavior. Certain policies, procedures and position often help in influencing behavior that can affect the delivery of care. Certain intolerable policies that become inconsistent with a nurse job like mandatory overtime can greatly become an impediment to an employee's ethical performance.

When nurses are exposed under a strong foundation of ethical practice, standards can positively guide in her performance in the surgical setting. Not

only will she be able to identify activities and interventions that help her achieve specific patient outcome but also link her actions to ethical behavior. Most set standards are often based on clinical mandates with virtues of wisdom, honesty, loyalty and courage that are the same qualities of the moral person (AORN, 2002: 492). Nurses who are exposed to this professional standard are likely to employ these standards and view them as a normal practice essential to improve unethical and unsafe practices within her responsibility.

Providing a therapeutic work setting or enhancing a safe environment will likewise be a concern to all perioperative nurses. Potential hazards, risks, and unsafe conditions abound in the surgical arena where constant distractions, excessive noise, hasty reviews of patient records, and frequent interruptions can produce situations where the likelihood of error increases. It is always right to alert physicians and others within the health team of any unsafe or deteriorating patient condition that can lead to an active error like sending the wrong patient for surgery; patient morbidity and perhaps mortality. An enlightened approach to this error is to replace blame and punishment with learning and improving (Reeder, 2001: 117).

Facing Ethical Dilemmas

A nurse, for example, has a statutory duty to report suspected cases of abuse or potential for injury, and this situation may arise when a coworker demonstrates incompetent practice. This is an ethical dilemma facing nurses and it seems that nurses are no closer to a solution of how they can be effective advocates for patients without compromising their working identity

or facing conflicts of loyalty (Martin, 1998: 156). In essence, the nurse would exercise moral alignment with the patient rather than with the physician or the hospital.

The nurse will not do any injustice if she takes on the role as the patient's advocate in all aspects of health care (Seifert, 2002: 309). In truth, all health care providers should function as patient advocates (Kohnke, 1980: 2040). In instances such as clarifying consent issues, perioperative nurses may act as advocates in a potential ethical conflict (Spry, 2005: 3). It may be that all cases in which nurses advocate involve ethical action, but not all cases may necessarily involve ethical conflict (Seifert, 2002: 309).

The nurse's role in perioperative practice has two components which implies supporting the patient's autonomy or his right to choose freely, regardless of whether the nurse is in agreement with the patient's decision. One of the fundamental duties of nursing is to promote and defend patients' rights (Segesten and Fagring, 1996: 142). The act of suppressing an individual's rights serves as the catalyst response of the nurse to act as the patient's advocate which is her second role.

If advocacy implies speaking up for someone, then it is her duty to speak up for the welfare and benefit of the patient. Again, this could be an identifiable problem because not all nurses are comfortable with conflict situations. Others may not recognize any rights violations; the nurse may not have a level of experience or communications skills that will facilitate advocacy; they may not be empowered as related to a restrictive care environment; or they

just may not have a level of understanding about advocacy in general (Seifert, 2002: 308).

During an error occurrence during the perioperative phase communication and interdisciplinary relationships is the common cause coupled with disruptive physician behavior; institutional responses to such behavior; and the effects of such behavior on nurse satisfaction, morale, and retention (Rosenstein, 2002: 34).

When errors or mistakes do occur, it is imperative that nurses learn what occurred, identify systems gaps that represent latent conditions that can lead to errors, collectively review the causes of the error, and share lessons learned.(Reeder, 2001 118). Unfair, illegal, or unethical practices challenge the creation of a moral environment thus collaboration, fairness, and respect for patients and all members of the health care team are more likely to support fulfillment of ethical obligations(Reeder, 2001: 118).

Conclusion:

As an ethical practice, the nurse acts in behalf of the patient, the institution and for herself. This creates confusion particularly when the nurse is faced with a dilemma that conflicts between her personal values and professional obligations (Segesten and Fagring: 144). Nurses must therefore act in accordance with the practice standards and code of ethics in coordination with her own values. Speaking up in behalf of the perioperative patient suggest that she is favorably acting as the patient's advocate particularly during the perioperative phase.

This should be viewed as her essential role as a professional and should base her actions according to ethical principle and values. She should speak up when an injustice occurs although in some cases, she would face danger for her actions such as losing her job. Insofar as ethical practice is concern, an individual must be able to choose whether to sacrifice oneself for her patient and follow a principle of justice. Otherwise if a nurse has any problems with this, she can choose a field that may not compromise her personal beliefs, values or ethics when challenged.

The advocacy training for nurses starts within the confines of the nursing education and working environment for the nurse. The philosophy of nursing in which nursing practice stems from supports an individual to promote his/her well-being which is the ethics of practice (Gaylord, 1995: 18). In the nursing school, one must be prepared to identify the ethical issues in patient care and understand the ethical principles and philosophies found in the daily practice and be trained to recognize the patient's rights, wishes and care issues (Seifert, 2002: 312). The knowledge of such ethical principles allows the nurse to stand as an advocate for the patient and speak in his behalf using effective communication skills.

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