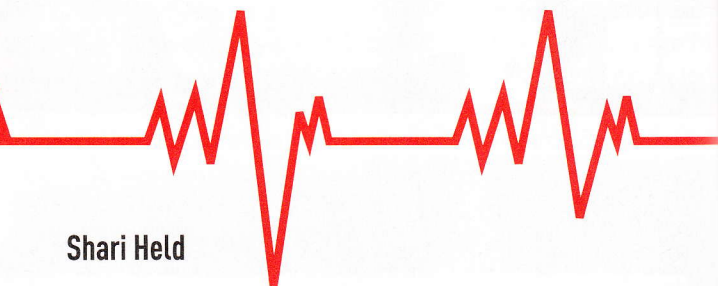




WORKING THE OR

The operating room. There's no other place like it when it comes to critical patient care.



Shari Held



Judy Crowe

It's a fast-paced environment where professional egos can sometimes rival the size of Texas and the acceptable margin for error can fit on the head of a pin.

This highly specialized department includes a host of sub-specialties under its umbrella such as ortho/trauma, cardiac, urology, neurology, and OB/GYN. OR travelers must be competent in all, and excel in several, while always remembering there's only one right way — the way the surgical team they're assigned to says to. And throughout the entire procedure, they can never lose sight of the fact that there's an unconscious person whose life is in their hands.

Photo: iStockphoto.com/Chris Jones

"It takes a lot of mental prowess, but it also takes a lot of physical endurance — there's a lot of lift, tug, shove, and pull," says Judy Crowe, RN, who contracts with Nurses Rx, an AMN Healthcare company. "As the New Englanders say, 'you have to be sturdy to do it.'"

Because of the focus on minute detail and its natural stressors, the OR isn't for everyone. However, Crowe, who has 39 years experience and specializes in ortho/trauma, thrives on the unique challenge.

"It's exhilarating because we're giving someone a second chance at life that they might not have had," she says.

And the winning candidate is . . .

Travelers need first-rate clinical skills and proven experience to land OR assignments, and agencies look for specific skill sets and attributes. San Diego-based AMN Healthcare, for example, requires travelers have a minimum of one-year current experience in an OR setting. Some hospitals require additional experience.

Beth Machado, division president of travel nursing for AMN Healthcare, says hospitals are also requesting travelers experienced in robotic surgery, the ability to cover multiple OR suites, and the skills to fill in as scrub nurses and circulate.

It's not all about competencies, however. Candidates must bring excellent "soft" skills to the table.

"Facilities are realizing they don't want just a talented clinician; they want a talented person," says Kisha Waltzer, senior recruitment manager for RNnetwork, a healthcare staffing firm based in Boca Raton, Fla. "You can have a really good clinician but if they don't have a good attitude, that can affect other staff. For facilities to acknowledge that is a sign that they are recognizing the importance of a great attitude in providing patient care."

Exceptional time management is also important. "Not just keeping track of their routine during the day, but knowing when something has gone from important to urgent, and how to respond appropriately," Waltzer says. "OR travelers must know which muscles to flex at the right time."

Crowe puts it this way: "We have patients whose health is precarious at best. They could arrest at a moment's notice. In a blink of an eye, you've got to be ready."

Travelers must walk a fine line between the desire to share best practices they've gleaned during previous assignments and the wisdom to know when to keep their mouths shut. "You learn to do as the Romans do," says Kim Terry, RN, a traveler with RNnetwork. "Sometimes if the way you are used to is an easier, better, more ef-

ficient way of doing the job, you can inch that into a new place."

One of the advantages OR nurses enjoy is what Terry calls "continuing education on the job."

"I've been doing this for a long time, and there's always something new and different," she says. "Especially with all the technologies."

Travelers who take the time to earn certifications — Terry has an Advanced Cardiac Life Support certification for example — can earn positive points with potential employers.

"AMN supports the Certified Nurse Operating Room (CNOR) certification program for perioperative nurses interested in improving and validating their knowledge and skills and providing the highest quality care to their patients," Machado says. Currently more than 33,500 perioperative nurses hold the CNOR credential.

The quest for the perfect match

The perfect match between job description and candidate is all-important. And it's becoming more challenging for agencies to deliver.

"The number one thing that has changed over the years is that expectations have gone up," Waltzer says. Job orders have gone from "generic" to "specific," and may detail the type of cases, the frequency of cases, and even the age of the patients.

That isn't actually a bad thing, but it does require recruiters to dig deeper for "nitty-gritty" details such as how frequently a candidate's skills have been put to use in the OR setting. In turn, travelers must be candid and openly communicate their skills, experience, limitations, wants, and needs.

"When the recruiter clearly understands what kind of cases travelers are looking for, what passion they have, what motivates them, and why they are looking to go to XYZ facility, it makes it that much easier for the recruiter to do their job," Waltzer says. "We are talking about patient safety and we are talking about saving lives. So for us the match is critical."

On the job

Travelers will tell you that some of the most important traits needed to succeed in the OR environment aren't listed on the job description.

Surgeons aren't the easiest docs on the block to work with, and gaining their trust must be a top priority for travelers. "You have to exude confidence so they trust what you are doing," says Dorothy Hilton, RN, who trav-

» continued on page 22



Beth Machado



Kisha Waltzer

» continued from page 21

els with Utah-based Supplemental Health Care. “You can’t go in there willy-nilly.”

That’s also true of building relationships with the permanent OR staff, who are typically a tight-knit group. “My biggest challenge is to convince the staff that: A. I’m not there to take their jobs, B. I’m there to help; not hinder, and C. I have the talents and skills; I just ask them to tell me how they do things,” Crowe relates.

Travelers also have to be comfortable enough about their value to the team to speak up when they don’t know something.

“Don’t try to wing it in the OR,” Terry says. “There’s too much at risk. Say that you don’t know so someone else can take over or be brought in to help you. There’s no shame in that.”



Kim Terry

Terry did just that when an assignment required her to mix anesthesia drips—something she had never done before. She ended up doing it before her assignment was over, but not until she requested and received proper training.

Terry specializes in cardiac for personal reasons. “I had heart surgery myself,” she says. “I know first-hand just how my patients are feeling before they go into the OR. It’s such a satisfying feeling to help them.”

Duties of OR nurses include assessing the patient prior, during, and after surgery, preparing the room — ensuring supplies, equipment, and instruments in place — being responsible for the sterile technique, learning and abiding by the attending physician’s preferences, coordinating the activities of the team, making certain everything progresses in a timely fashion, and ensuring the “Time Out Protocol” (To Prevent Wrong Site, Wrong Procedure) is followed to the letter.

One of the most important roles of the OR nurse is to be the patient’s advocate, his spokesperson while he is under anesthesia. “That’s our job in a nutshell,” Crowe says.

It’s not an easy undertaking. “The hard thing about working in the OR is that you might only have that patient for 30 minutes or you might have them for the entire day,” Hilton says. “You have to find out all about your patient in a 15-minute interview and then do your case and know that you are doing what’s right for them.”

That calls for exceptional interpersonal skills.

“You have to get your patient to trust you both as a person and as a professional in those first few minutes of the interview,” Hilton says. “The challenge is to relate to them that you are going to care for them as if they were your family member. It’s all about patients.”

Facing surgery can be frightening. Crowe recalls a patient who was so fearful, his whole bed was shaking. She eases patients’ fears using the “human touch” — something she finds many younger nurses aren’t knowledgeable in. Crowe assures OR patients that the entire surgical team is focused on nothing except their welfare, and explains each step of the medical process to reduce any apprehension.

As they drift off to sleep, Crowe always whispers into each patient’s ear: “*We are all here. We all love you and God loves you. When you wake up, you’re going to wake up with a smile.*”

“I’ve done that for every one of my patients for 39 years,” Crowe says. “When they wake up, they may not have a big smile on their face, but they aren’t so terrified.”

Increasing demand and other industry trends

Although challenging, the OR holds great opportunities for travelers and is a terrific field to be in right now. Demand is high and growing.

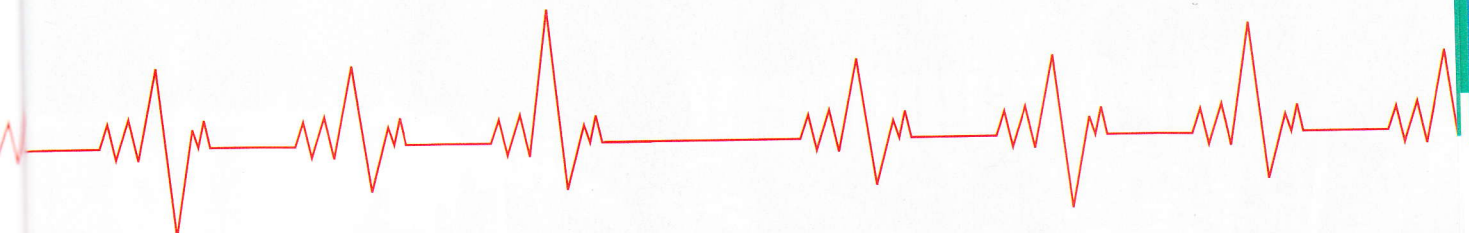
Photos courtesy of Kim Terry

“TIME OUT PROTOCOL” (TO PREVENT WRONG SITE, WRONG PROCEDURE)

OR nurses often are exposed to evidence-based practices described in The Joint Commission’s “Universal Protocol for Preventing Wrong Site, Wrong Procedure, Wrong Person Surgery.” The essential processes found in the Universal Protocol, and performed by the OR team, include:

- marking the surgical site;
- holding a time-out immediately before the start of a procedure.; and
- preoperative verification;
- engaging in the process.

Source: Joint Commission



For example, RNnetwork last year experienced a 33-percent increase in OR placements nationwide, compared to the year before. "That's a giant change," Waltzer says.

Machado notes several factors driving the demand: the increase in elective surgery, the rise in hospital admissions, the increase in the number of insured patients, the strengthened economy, the robust flu season, and the fact that the OR is one of the higher-tenured areas, with a higher percentage of nurses near retirement age.

AMN supports the Association of Perioperative Registered Nurses' (AORN) advocacy of legislation requiring a perioperative RN to supervise during surgery or other invasive procedures.

"Currently only 23 states have laws or regulations in place that require a registered nurse to serve as the circulator in hospitals, and 16 states have similar language for ambulatory surgical centers," Machado says. As more states embrace the legislation, demand will increase.

Kris Cannon, vice president of operations for Blue Ash, Ohio-based On Assignment Nurse Travel, has also

experienced increased demand for OR nurses over the past year, especially for nurses adept at cardiovascular cases and can serve as first assists, and scrub nurses.

"Higher demand should increase compensation levels." That's good news for OR nurses whose pay is typically at the higher end of the scale.

Increased demand doesn't necessarily mean OR travelers are a shoe-in for a job, however. "I believe the supply is there," Waltzer says. "We have a pool of travelers available, they just aren't always a match for the jobs that are out there."

When they find a match, hospitals nowadays expect travelers to start on the job right away. "If new travelers still have a lot of credentialing to get in, it makes it a little bit tougher," says Waltzer, who's also seeing hospitals asking if travelers would be amenable to extended contracts — 17 or 26 weeks. "They are having those conversations upfront, which is something we've never seen before," she adds. **HT**

Shari Held is a freelance writer based in Indianapolis.

It's a
NEW YEAR For **TRAVELERS**
and It's Going to be **GREAT!**

13-26 week
contracts
available
NOW!

- Established in 1987
- RN operated
- Highest Pay in the travel industry
- Allowing financial freedom
- Recruiters have average tenure of 12 years

- Permanent placement opportunities throughout the country.
- Minimum placement bonus for RNS of \$1000!!
- Relocation assistance is available for select assignments

Travel With The Company That You Know.
Progressive Has Been
Staffing Hospitals Since 1987!

We Need all Nursing
Specialties and
Allied Health Providers

progressivetravel@progressivenursing.com

(877-654-1010)



www.progressivenursing.com

you belong here.

EOE

Circle #613 or go to www.healthcaretraveler.com/readerservice