Same-day surgery nursing: It takes teamwork

By Sandra C. Voda, MSN, RN-C, ONC

IF YOU LIKE working closely with your fellow nurses, consider moving into a career in your hospitals same-day surgery unit. Working in such a unit for 10 years, I found it to be a fast-paced and exciting environment that allowed me to learn and grow professionally.

Nurses in the same-day surgery unit may bring experience from different areas of hospital nursing and form a highly competent nursing team. This article will outline this field and how you can move into it. First, consider how it’s defined.

Providing specialized care
The same-day surgery nurse is a specialized ambulatory care nurse, defined as a nurse who provides episodic care to patients for 24 hours or less in many different settings. The same-day surgery nurse cares for patients before and after same-day surgery and some patients undergoing outpatient procedures. Ambulatory care and same-day surgery nurses use cost-effective ways to assist patients in promoting health, preventing disease, and managing chronic or acute health problems. The same-day surgery nurse also promotes self management and assists family members or friends in caring for their loved ones.

The same-day surgery unit is used not only for surgical patients but also for many medical patients. Patients requiring many kinds of I.V. therapy and blood transfusions and those scheduled for radiographic interventional procedures are brought to the unit. Patients recovering from upper endoscopies and colonoscopies spend time here. Patients having pain control procedures such as epidural steroid injections or trigger point injections recover here. Some SDS units also care for pediatric patients having outpatient surgery. Patients may be admitted through this unit for all major elective surgery.

The American Nurses Credentialing Center (ANCC), which is part of the American Nurses Association (ANA), has a specialty certification for Ambulatory Care Nursing. The credential awarded is Registered Nurse-Board Certified (RN-BC). This certification is renewable every 5 years. You may also choose to maintain relevant certifications and join national, state, and specialized nursing associations.

Why choose this field?
Some nurses who have dedicated their careers to hospital nursing want to try a new area of nursing without losing their benefits or leaving long-time nursing colleagues. Moving from one unit of a hospital to its same-day surgery unit can be a welcome change for veteran nurses. Here they’ll still provide direct nursing care and use all of the skills they’ve learned over the years. Also, for nurses nearing retirement age, working in this unit may be a little less physically demanding than work in other units.

Qualities and qualifications needed
Because the same-day surgery unit has a rapid turnover of patients, every day is different. Nurses on this unit must have the ability to adapt to changing situations. They also need to have good assessment skills along with some case management knowledge when caring for short-term patients.

The education required to work in a same-day surgery unit may include a telemetry course and basic life support, advanced cardiac life support (ACLS), and pediatric advanced life support (PALS). Ambulatory care certification may be required, but even if it’s not, having it will give you a better chance of landing a job at this unit. Inquire at your hospital’s same-day surgery staff development department to learn the qualifications for joining this team.

All hospital nursing experience is very helpful when moving into same-day surgery nursing. You can build on your previous knowledge and learn from your nursing colleagues’ experiences. To provide quality care to your patients, partnering with another nurse is important even after the orientation period. The buddy system helps you keep up with rapid patient turnover.

Pros and cons of the SDS unit

**Cons**
- Sometimes need to report early in the morning or stay late
- Very busy the day before or day after a weekend or holiday
- Rapid patient turnover

**Pros**
- Work with an all-RN staff
- No weekend or holiday work
- Less physically demanding than some other areas of nursing
- Pleasant work environment
Moving into this specialty
To find out if any same-day surgery positions are open at your hospital, inquire at the human resources office or go to the hospital’s online career website. Ask what education and experience is required for the position. Obtain the required skills, training, or certifications while waiting for a position to become available. You’ll have a better chance of obtaining that prized position if you already meet the qualifications.

The same-day surgery unit may hire experienced nurses from various backgrounds, such as medical-surgical, orthopaedic, ambulatory care, pediatric, ED, postanesthesia care unit, and endoscopy nurses.

Full slate of duties
Nurses prepare for patient admissions the afternoon before the expected admission day. This involves reviewing each patient’s history in the medical record. A potential medical problem will be discussed with the anesthesiologist. Sometimes a quick telephone call to the patient can clear up a medical question and avoid delay on the day of surgery.

In an emergency, a patient may be sent directly to our unit from the healthcare provider’s office for immediate testing, admission, and surgical procedures. Most medical consultations are done on an outpatient basis before surgery, but if problems occur, some consultations occur on the same-day surgery unit.

By 0600, nurses in our same-day surgery unit are already busy at work. Our unit is open until 2000 or until the last patient is safely discharged from the unit. Nurses take turns admitting patients and preparing them for their surgery or other procedures and overseeing the recovery of patients and discharging them.

Supporting patients
Whether preparing your patients for a procedure or helping them recover, nurses will need to provide psychological support and coaching for patients and their family members. Discharge planning and teaching take place as patients recover. Some patients may need a home care consultation before discharge, and others may need orthopedic equipment for home use. Physical therapists teach crutch walking during pre-admission testing or once patients are stabilized after surgery and near discharge. Family members or friends will be providing care and nurses need to provide teaching before the patient’s discharge. See Major duties for same-day procedures for more detail.

Good communication with the anesthesiologist and surgeon is vital. Nurses follow the same-day surgery policy for monitoring medical patients and helping surgical patients recover. Reporting any changes in condition is especially important because most patients will be discharged home within a few hours. At some same-day surgery units, nurses call patients the following day to see whether they have any questions about their care and are following written instructions. Patients are encouraged to call their healthcare provider for any problems.

Same-day surgery nurses follow-up by telephone the next day to assess pain control, wound care, activity, and follow-up appointments. Nurses encourage the patient to ask questions about the procedure and self care. Finally, they ask patients about their opinions of the nursing care provided in the same-day surgery unit. Then they document these comments and submit them for quality assurance analysis.

Reaping the rewards
You’ll need clear thinking, an organized approach to the delivery of patient care, and supportive co-workers to be a successful as a same-day surgery nurse. Working in this fast-paced unit can be a pleasant, fulfilling, and rewarding career change.

Major duties for same-day surgery
- Make sure the patient hasn’t eaten or taken liquids since midnight. The patient may take prescribed medications with sips of water the morning of surgery. Make sure a patient with a feeding tube has had no liquids administered through it after midnight.
- For patients with diabetes, perform fingerstick blood glucose if the patient hasn’t already done so.
- Make sure the patient has stopped aspirin and other blood thinners such as warfarin (Coumadin) or clopidogrel (Plavix).
- Confirm the patient’s identity.
- Make sure the patient has given informed consent.
- Make sure the patient has a driver for the trip home. Instruct your patient not to drive for at least 24 hours after receiving anesthesia and to follow the healthcare provider’s instructions about driving.
- Check for medication allergies.
- Ensure “right side” surgery (for example, putting a mark over the eye to be operated on).
- Monitor the patient’s recovery from anesthesia.
- Provide both oral and written discharge instructions and postop prescriptions including handouts or written information about prescribed medications.
- Teach the patient how to care for a wound and when to shower.
- Be sure to tell your patient to call the healthcare provider for any problems or questions and to keep follow-up appointments.

RESOURCES
American Nurses Association http://www.nursingworld.org
American Nurses Credentialing Center http://www.nursecredentialing.org
National Association of Orthopaedic Nurses http://www.orthonurse.org

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