



ASPAN

American Society of PeriAnesthesia Nurses

Message from the President

Challenges Lead to the Greatest of Expectations

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This past year has proven to be more than I ever expected it to be in my role as ASPAN's president. It is a rewarding and once in a lifetime experience. In my travels, I have met so many members who are committed to perianesthesia practice. ASPAN is over 15,500 perianesthesia nurses strong, and it must continue to be the premier perianesthesia nursing specialty organization for research, education, standards and nursing practice. On April 27, the Representative Assembly will have the opportunity to review the next edition of ASPAN's *Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements*. Along with the business of the Representative Assembly, the ASPAN National Conference is a time to renew friendships and be surrounded by other perianesthesia nurses. We all have a purpose of attending education sessions to use in our everyday practice upon return to our workplaces to improve care for our patients.

Changing Times

My first nursing job was at a veterans' hospital in 1978. I worked on a general surgery and vascular floor. We had 35 beds, and back then we would have one registered nurse and one aide on the night shift. I remember some nights with 25 IVs, and central lines, Heparin drips, NG tubes with the Riopan regime every two hours, hourly urine output, central venous pressure readings using the glass monometer. Does this sound familiar? We had our patients for a longer period of time, and there were not the "outpatients" as the majority of our cases are today. There were no laparoscopic cases until several years later---so we have come a long way with technology and techniques related to the surgical patient.

My perianesthesia nursing care unofficially started in 1980 when I received a call from the nursing supervisor informing me that a patient would be coming directly to the room for his recovery. I was told to have suction and oxygen ready. Joe Giacchi was the first nurse anesthetist I met. He would come to the floor on the afternoon prior to surgery to discuss the plan of care with the patients. I would listen to him talk with the veterans, and soon learned that he was very caring and compassionate about his practice. He also was a veteran, and would thank the patients for their service. Needless to say, that first patient that came to me from Joe was awake and his protective reflexes were intact. Joe would stay with the patient in the operating room until the patient was more awake. I actually received three patients directly from the operating room during the next few months. Joe suggested that I volunteer to recover patients in the intensive care unit after hours. For the most part, the surgery patient after 1700 in the afternoon would go there for postanesthesia care.

Evolution from Intensive Care to Recovery Room

I did start to volunteer to recover patients after hours if the unit was too busy and they needed someone to be there for postanesthesia care. Joe would bring the patient to me and give a thorough report. I would ask him questions about the different anesthesia agents and why one was chosen over the other one, along with different techniques that he used. He would stay sometimes for twenty minutes to tell me more about anesthesia and possible complications that could happen. I started to buy some anesthesia books, which at the time were just a few with a nursing focus. There came a time for an opening in the "Recovery Room." I interviewed for the job, but did not get selected. There was an opening at the university across the street a few months later. I applied for that position and, surprisingly, was chosen. During the interview, I shared about the times that I recovered patients after hours in the intensive care unit. I was

able to demonstrate that I did have experience, just not in an actual recovery unit. The teaching from Joe gave me a good base of anesthesia knowledge that impressed the manager enough to hire me.

More Learning

I soon found out about the “real world” of a designated level 1 trauma center “recovery room.” My first preceptor was Dixie Wyckoff-Raney, RN, CPAN, CAPA, and I thank her so much for taking the time to be my first preceptor during my orientation. I did not have the ICU experience, but she helped me with “critical thinking” during the first few months as well as critical care classes. We would take call together and she would ask me questions about what I should be expecting when the patient came to us. We took care of multiple traumas that would have been in surgery for hours with three to four services all involved during the operative case. I still remember many patients that came through being involved in motor vehicle accidents, and the tragedies when siblings came to be recovered in the middle of the night to ask for their mother or another brother. It was at that time that I knew the benefit of family visitation so they could be there to comfort the child when they heard the devastating news that not all of the family members survived. We all had tears by the time the patient was ready to go upstairs. I remember one time we waited for the father to come out of surgery so his child was not afraid any more once he saw him.

The Importance of Mentors

None of us can do this alone. We all need mentors along the way to be there to answer questions or assist in finding the answer. I could have not done this without Joe and Dixie to assist me in my perianesthesia journey. I hope they will both be able to join me at this year’s National Conference so that I can share my presidency that started with them believing in me---to believe that I could grow to be the president of the greatest organization.

The author Rich DeVos has written a book entitled, “Ten Powerful Phrases for Positive People.” The ten phrases are as follows:

- “I’m wrong
- I’m sorry
- You can do it
- I believe in you
- I am proud of you
- Thank you
- I need you
- I trust you
- I respect you
- I love you.”¹

These powerful phrases epitomize the development of a trusting relationship with family, friends, peers and people you may meet during your journey to shaping your own personal power, practice and purpose in life and nursing career.

In this, my final *Breathline* article, I want to thank the ASPAN Board of Directors, the past presidents of ASPAN, the National Office staff, as well as my co-workers and the leadership where I work. I could not have done this role without the help and support of all these people. In addition, I want to thank Barb Godden, the *Breathline* editor, my family, friends and so many ASPAN members who have contributed to the success of this past year. Thank you. See you in Las Vegas!

REFERENCE

1. Blog regarding Ten Powerful Phrases for Positive People by Rich DeVos. <http://www.blogface2face.com/2010/12/ten-powerful-phrases.html>. Accessed Jan. 18, 2014.