



ASPAN

American Society of PeriAnesthesia Nurses

Message from the President

With a Song in My Heart

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ASPAN President 1998-1999

It has been my privilege to serve ASPAN as president this year. My commitment and dedication to perianesthesia nurses and to our Society is stronger and richer from all I have experienced with you. Thank you for the awesome opportunity to serve you and promote ASPAN's Mission. I have traveled extensively to represent ASPAN to other specialty organizations, both nursing and medicine. I have accepted invitations from many components to lecture at annual meetings. Whenever possible, I have been privileged to visit perianesthesia nurses in the workplace, in postanesthesia care and same day surgery units, in hospitals, and surgicenters. This has enabled me to reach out to members and nonmembers, to talk about clinical practice, to share stories and mutual concerns with bedside nurses. Many of them have innovative ways to deal with unit conflict, patient assignments, or call coverage. Some have unique strategies to optimize staffing and work collegially to support standards of practice. I have seen nurses who have enthusiasm and commitment; nurses who strive for best practices and lifelong learning. Just as the connections we make with our patients and families may alter our lives and our practice in distinct ways, so too the bonds of friendship with each of you have changed me and will endure. I am convinced that my fondest memories of this year will be those visits.

By the way, I did not visit any unit where nurses believe they have perfect practice or have solved all the problems of nursing. In many situations, nurses were apologetic because there was concern with meeting specific ASPAN standards. Some were frustrated with apathetic or unmotivated staff or unsupportive administrators. There were even units whose practice seemed incongruous with community standards: for instance, a Phase I PACU where cardiac monitoring is not an expectation for any patients! The common thread from every visit is that most are striving towards best practices, creatively and ingeniously. Nurses find job satisfaction primarily in the intrinsic value of the work of nursing and take pride in exemplary practice. It was also evident that perianesthesia nurses take pride in working well together in their units. This may simply be because the units are typically 'wide-open' (the fishbowl phenomenon), and coworkers are visible most of the day. It may evolve because we know we have to rely on our colleagues at a moment's notice, and must maintain high-level competencies to cover for each other. I think it may have more to do with the strength of friendship and caring that can be found in cohesive units. Caring environments energize you, foster integrity and commitment, and raise the bar for excellence. There is a special feeling, need or caring inherent in the nurses we like best. Nurse friends can help you overcome feelings of failure on a terrible day by validating your strengths, or reminding you that you did your best. This is a validation only another nurse can provide.

We recognize human experiences with a connection that is unique in the perianesthesia setting, and the responsiveness and mutual respect that we have for one another relies on the caring aspect of our personalities. One of our PACU nurses had recently been scheduled for an elective laparoscopic cholecystectomy. I reminded the OR charge nurse on the morning of surgery, and she said something that I will never forget; "Of course, Judi is on the friends and family list." Another aspect of nursing friendships is that we seem to have a peculiar sense of humor, although we wisely share only with each other some humorous perspectives. There is a sick humor, or an ability to enjoy laughter in ridiculous situations, which enables us to get through difficult and gruesome times in nursing. (One nurse colleague inadvertently disconnected the cell saver, which was on a pressure bag, while assisting her primary nurse with a post-op open heart surgery patient, and the room quickly resembled a bloodbath. In her embarrassment, she tripped over lines and her own feet, and knocked over the pleurovac. She was told if

she wanted to help it would be best if she sat still, on her hands, or left the room. She has not lived it down.) There are numerous anecdotes shared related to someone's scrub pants falling down during a cart call. These are treasured moments in time, never to be forgotten.

Whatever it is that makes nursing friendships unique may be impossible to define. I have been thoroughly blessed to have shared so many moments and numerous stories with nurse friends all over the country. I know that the song in my heart is beautiful and enriched because of my service this year. Thank you for the honor.