

2011

Clinical Exemplar

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THE ENDO EXPERIENCE

I was the circulating nurse in the Endoscopy Room during a routine colonoscopy being performed with the surgeon, the nurse anesthetist, and the scrub nurse. As I brought the patient to the room we discussed allergies, her prep, what to expect in the room and what to expect when she woke up¹. She was an outpatient coming in on a stretcher from Ambulatory Surgery Center. Once in the room we began attaching her to monitors and explaining what they were for². She said she understood and was willing to comply with any instructions. She turned over on her left side when requested and warm blankets were applied³.

As the surgeon prepared to begin, a time out was done. The nurse anesthetist administered anesthesia and the scrub nurse handed the surgeon the scope. The colonoscopy procedure proceeded per protocol. As the surgeon and the nurse anesthetist watched the television monitor, something did not look right. The surgeon realized the colon had perforated. He immediately

***...something
did not look
quite right....***

¹ The Teaching-Coaching Function; "Seven Areas of Nursing Practice".

² The Teaching-Coaching Function; "Seven Areas of Nursing Practice".

³ The Helping Role, providing comfort; "Seven Areas of Nursing Practice"

stopped the procedure and coordinated with the OR for emergency surgery. Prior to that, STAT abdominal x-rays were taken. When the radiology tech arrived I assisted her with positioning the patient. The nurse anesthetist continued to keep her sedated. The surgeon talked to her husband about the situation. He obtained consent for abdominal surgery and the anesthesiologist explained risks and obtained consent for anesthesia.



The scrub nurse and I continued to monitor the patient closely with the nurse anesthetist⁴. I documented in the electronic medical record. With preparations finalizing, we prepared to move the patient to the main OR with monitors attached. With everyone working together she went into surgery in less than an hour⁵. The patient underwent the emergency abdominal surgery for several hours without further complications. She went to the PACU for recovery. She was later admitted to the CCU where she continued to improve before being transferred to a step down unit to be later discharged to home⁴.

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⁴ The Diagnostic and Monitoring Function; "Seven Areas of Nursing Practice".

⁵ Effective Management of Rapidly Changing Situations; "Seven Areas of Nursing Practice".

⁴ The Diagnostic and Monitoring Function; "Seven Areas of Nursing Practice".