

SPOTLIGHT ON ORNAC MEMBERS

PERIOPERATIVE NURSES: A VITAL PART OF THE OPERATING ROOM

AN INTERVIEW WITH MARLENE HILL, RN



By: Catherine Harley, RN, eMBA, Executive Director, ORNAC



Marlene Hill, RN is a Perioperative Registered Nurse who lives in Hampton, PEI. She works in the operating room at the Queen Elizabeth Hospital in Charlottetown, PEI. Marlene served as the President of ORNPEI from 1991-1993 and as the President of ORNAC from 1999-2001. She also served on several ORNAC Committees such as the Finance Committee, Standards Committee, and By-laws Committee making a strong contribution to perioperative nursing in Canada.

Question: How long have you worked in the operating room and what is your current role?

I was a Perioperative Registered Nurse from 1983 – 2009 working full-time and then part-time for many years. Our OR suite provides general surgery, OB/GYN, vascular (excluding heart), ENT, and eye surgery. Since 2009 I have worked in the Pre-Surgery Unit (a part of the OR suite) teaching patients and their families about their upcoming surgeries, providing assessments, and answering any questions they may have. Because of the close proximity to the OR, and my knowledge of the environment, I am able to obtain additional supplies or seek an anaesthetist/surgeon’s advice as required. My first ‘love’ is OR nursing but my move to Pre-Surgery requires less physical activity, no call and less stress. I plan to retire in 2013.

Question: What was it that first attracted you to this specialty?

As a nursing student (3 year diploma program in Moncton, NB) I spent 3 months working in the OR and recognized that it took a special kind of individual to be an OR nurse. I liked the fast pace and the many learning opportunities it provided.

Question: How has your role in the OR changed over the years?

My role has evolved in that I have had to become very computer knowledgeable, always be adaptable to change (as change is never-ending) and to be an active partner in the decision-making. I have always found it easier to help change things rather than to wait until the changes were made! Technology is changing so rapidly that is essential to continually keep abreast of current information and trends and to increase knowledge and maintain quality nursing skills. This is also true with the change in specialized procedures (ie laparoscopic surgeries).

When I first started in the OR many patients did not wish to know any details of their surgery as they trusted their physician completely. Today, patients want to be educated in what their surgery entails.

Question: What value do Registered Nurses bring to the Interprofessional OR Teams?

They bring effective and efficient leadership skills, good communication skills, great organizational skills, high-quality assessment skills, the ability to trouble-shoot (providing a ‘plan B’ that will work as well), and they

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AN INTERVIEW WITH MARLENE HILL, RN IN PEI

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maintain a good rapport with physicians, administration, other disciplines and areas in the hospital.

I believe that the public has a great deal of respect for the registered nurse. With shrinking healthcare budgets the RN has been replaced with lower-skilled LPNs... and LPNs are being replaced by Resident Care Workers. This has caused tension between the groups and added addition stress to the already high-stress area of the OR. Yes others can perform some of the tasks previously done by RNs BUT we still have a high level of professional abilities and knowledge, skills, and judgement that enable the delivery of safe, quality patient care – and remember, we are also always patient advocates.

Question: What continuing education has supported your journey?

Perioperative CNA Certification. I also continue to read nursing journals, attend conferences, and participate in other learning opportunities such as in-service sessions. I remain a member of ORNAC through ORNPEI.

Question: Who do you consider to be your key "mentor"?

Gloria Stephens, Past President of ORNAC, displayed many fine qualities as a leader, organizer, listener, and perioperative educator. She always put the patient first and had/has integrity. She was instrumental in the publishing of the first ORNAC Standards.

Question: How did you become interested in ORNAC and what motivated you to become involved?

ORNPEI was electing a new president elect in 1989. I wanted to make a contribution to Perioperative Registered Nursing and believed this was a good way to do so. I also like to travel and love OR nursing and decided, with family input, to combine my two interests and let my name stand for the ORNAC position.

Question: What do you see in the future for Perioperative Registered Nurses?

There is a great need for us to act as a 'go-between' by providing a patient's family with updates on his/her progress/condition during the surgical experience and again in the PACU (Post Anaesthetic Care Unit). This is necessary for short surgeries as well as longer ones. Families have fears and anxieties that can be reduced with adequate and simple explanations given in a caring manner.

My hope and prayer is for the Perioperative Registered Nurse to remain a vital part of the OR and that she/he still be considered key to a patient's safe and successful surgical experience. My concern is that the future role of the Perioperative Registered Nurse may be removed from the OR and that would be detrimental to quality patient care and I would consider it very much a regression, not a progression, as it would involve losing the valuable, specialized knowledge, skills and judgement that RNs bring to the Operating Room. ✨