



New Trends and Issues Proceedings on Humanities and Social Sciences



Volume 4, Issue 2 (2017) 218-224

ISSN 2421-8030

www.prosoc.eu

Selected Papers of 1st International Congress on Nursing (ICON-2017) 16 – 18 March 2017 Grand Park Lara Convention Center, Lara – Antalya, Turkey

In which part of operating rooms is ethic? It is where the nurses are

Ozlem Bilik **, Department of Surgical Nursing, Faculty of Health Science, Dokuz Eylul University, 35000, Izmir, Turkey.

Cigdem Kaya ^b, Department of Elderly Care, Vocational School of Health Services, Usak University, 64000, Usak, Turkey.

Suggested Citation:

Bilik, O., & Kaya, C. (2017). In which part of operating rooms is ethic? It is where the nurses are. *New Trends and Issues Proceedings on Humanities and Social Sciences*. [Online]. 4(2), pp 218-224. Available from: www.prosoc.eu

Selection and peer review under responsibility of Prof. Dr. Nesrin Nural, *Karadeniz Technical University*, Turkey

©2017 SciencePark Research, Organization & Counseling. All rights reserved.

Abstract

Health, one of the fundamental human rights, should be eligible and attainable and it should be provided equal to everybody. Advances in the field of medicine and technology today may sometimes cause the line between life and death to become uncertain in health field. Also, along with some value problems the importance of ethic in working life has increased gradually. Ethic is a department of philosophy which investigates the quality and fundamentals of values underlying the relations between people and it is to examine good or bad or right or wrong morally. It leads to what should or should not be do in professional works and presents the necessary moral values so that science and technology do not damage the society. The concept of ethic has a different importance for operating room nursery as well as in all fields of nursery. Operating rooms are the areas where patients expose to a significant attempt like surgery. They are stressful atmospheres that patients are unconscious due to anaesthesia, there are many technological devices around, a multidisciplinary team works together, there are life-threatening situations and the events that require to make fast decisions happen very often in this process. In addition, they are the places where harmful risks such as encountering of patients with injury, infection and toxic materials are high. Because of all of these features, operating room nurses may often experience ethical problems. Eventually, nurses who are important members of health teams often encounter with the situations that require to make decisions due to their expanding roles and responsibilities, continuous communication with patients and team and busy working conditions. Nurses have to decide according to ethical principles and take the responsibility of these decisions. Thus, ethical sensitivity has to be developed in risky environments where ethical problems are often experienced such as operating rooms. In this context, educators in undergraduate education should effort to bring basic ethical principles to nursery students, to make the importance of ethic in professional work to be understood and to develop ethical sensitivity. Nurse administrators also should reinforce this development in post-graduate process. Importance of ethic for operating room nurses, study results for frequently encountered ethical problems and operating room nursery in terms of general ethical principles are presented in this collection.

Keywords: Health; room; nursery.

* ADDRESS FOR CORRESPONDENCE: **Ozlem Bilik**, Department of Surgical Nursing, Faculty of Health Science, Dokuz Eylul University, 35000, Izmir, Turkey.

E-mail address: bilikorama@gmail.com / Tel.: +90 535 577 00 30

1. Introduction

Nurses deal with special issues related to people's lives, past, behaviors, health and illnesses directly in relation to their profession. Nurses who are highly close to special and personal information of human beings often encounter with the situations that require to make decisions in their working life. Nurses who are always in contact with patients in healthcare sector and the main employees of care and treatment should make their decisions in accordance with ethical principles (Utlu, 2016).

Concept of ethic has a separate importance for operating room nurses. Operating rooms are the areas where patients expose to a significant attempt like surgery. They are stressful atmospheres that there are many technological devices around, a multidisciplinary team works together, there are life-threatening situations and the events that require to make fast decisions happen very often (Aslan & Ozturk, 2011; Yavuz & Kaymakci, 2015). In addition, they are the places where harmful risks such as encountering of patients with injury, infection and toxic materials are high. Because all of these features operating room nurses may often experience ethical problems (Karaoz, 2000). In this process the fact that patients are unconscious due to anaesthesia and dependent in all life activities and could not make their own decisions features the patient-advocate role of operating room nurses and makes the operating room nurses to make decisions in accordance with ethical principles more important (Uzun, 2003; Aslan et al., 2003; MacDonald, 2007; Lindwall & Von Post, 2008; Utlu, 2016).

Ethical problems in operating rooms are various. In conducted studies it was determined that most frequently experienced ethical problems in operating rooms were;

- Observers in the operating room without the patient's permission
- Making recommendations to patients about surgeons
- Taking in charge in operation despite thinking that curettage is not correct
- Reporting suspicious drug usage
- Failure to obey sterilization standards
- Surgery to wrong patient and parts
- Doubt about the informed consent
- Problems with making compulsory HIV testing for both family and health care workers
- Rejecting the treatment of HIV-positive patients that require surgical operation
- Knowing the HIV-positive patients by surgical team
- Applying the instruction to not to perform resuscitation
- Failure to provide the patient's physical intimacy during operations in the operating room
- Use of scarce resources
- Invoicing for unused materials
- Supplying the materials used in hospitals
- Supplying the number of nurses
- The problems in patient-doctor relations (Karaoz, 2000; Aslan et al., 2003; Cerit, 2010; Elcigil et al., 2011; Chandrakantan & Saunders, 2016; Utlu, 2016; Shapshay & Healy, 2016). As supported by research results, ethical problems experienced by nurses in operating rooms are observed to be multi dimensional such as patients especially, nurses, doctors and resource usage in operating rooms. Ethical problems should be utilized so that operating nurses can analyze complex ethical problems and make correct decisions (Karaoz, 2000; THD, 2009; Karadakovan & Aslan, 2010; Pope, Hough & Chase, 2016; Shapshay & Healy; 2016; AORN, 2015).

2. Operating Room Nursery in Accordance with General Ethical Principles

2.1. Principle of utility/ no harm

Intraoperative phase of the surgical procedure is a period in which patients are most susceptible to physical and mental trauma, infection, and are totally dependent on the surgical team for protection (Karaoz, 2000). Surgical procedures are not only beneficial to the patient but also pose a risk of causing many complications. Patients under the effect of anaesthesia throughout the intraoperative process are face to face to various threats such as falling, pressure sore occurrence, exposure to infection, ambustions, electric shocks, exposure to tocsic gases and radiation, surgical stress, latex allergy, forgetting a foreign body and surgical procedure on wrong side. Towards these threats by considering the principle of utility and no harm, operating nurses should;

- Support the principle of patient-advocate role and utility
- Ensure patients to have a safe surgical procedure by providing appropriate operating room conditions
- Observe all activities about anaesthetic and surgical procedures carefully and take the precautions for the needs
- Ensure the patients to be properly identified and not to be alone in order to prevent them from trauma by falling
- Take precautions about pressure sore for the patients to remain still during the operation and use the supportive materials for risky parts
- Monitor the whole team concerning acting in accordance with aseptical principles and intervene if necessary
- Provide entire and safe patient care
- Take in inventory for preventing forgotten foreign bodies
- Take the necessary precautions for wrong side surgery (Karaoz, 2000; THD, 2009; Pope, Hough & Chase, 2016; AORN, 2015).

2.2. Principle of autonomy / respect to individuals

Ethical problems in operating rooms related to the principle of autonomy are that informed consent of the patients is not fully performed and they are included in the research without their permissions. It is one of the most frequent problems that information, blood values, surgical information and images of patients are used in scientific researches without the their permission. For this issue by considering the principle of autonomy-respect to individual, nurses should;

- Ensure to have doctors or authorized researchers get the informed consent of patients before the study gets started and the use of patient information for the research
- Protect the patients' rights as the research subject
- Ensure patients' privacy during the data collection
- Determine that patients approve the surgical treatment after they are informed about it and they comprehend it
- Give the opportunity to express the feelings, thoughts and questions of the patients and communicate with the surgeon in order to make the subject open for information deficiency and misunderstanding before surgery.

The fact that surgical procedure is performed by another surgeon apart from the allowed one is also against the nature of informed consent and it is conflicted with the principle of loyalty (Karaoz, 2000; Karadakovan & Aslan, 2010; Pope, Hough & Chase, 2016; AORN, 2015; Shapshay & Healy; 2016).

2.3. Principle of justice and equality

In operating rooms there may be resource shortage in terms of human and material. They can be the use a certain material by two surgeons at the same time, the need for another material urgently in another operating room while one of them is used, failure of nurse shortage to perform safe care practices, etc. For this issue by considering the principle of justice and equality, nurses should;

- Inform the doctor about the materials that they do not have or they have limited in number before the operation
- Make material requests on time
- Check out the stock status of the special materials that the department is responsible for regularly
- Not discriminate on race, language, religion, age, gender, belief, social and economic situation, political opinion
- Provide fair distribution of time, labor and all resources while doing services
- Administrator nurses should plan adequate number of nurses in the operating rooms (Karaoz, 2000; THD, 2009; AORN, 2015).

2.4. Principle of privacy and secrecy

Within the principle of privacy and secrecy in operating room atmosphere there are some various situations such as intimacy of patients and privacy of patient information, observation and recording of operating room for training, operation of HIV-positive patients.

"Failure to ensure physical intimacy (privacy) of patients during the procedures in operating rooms"

It disturbs the patients that body of patients are seen unnecessarily without paying attention during the procedures such as anaesthetic procedures, catheter applications, surgical staining and cleaning, taking the patient to the operating table from the cradle, tourniquet applications, cortical gluing and necessary positioning for surgery. In addition, patients under the influence of anesthesia during the surgical procedure are insufficient to protect their privacy. Operating rooms are also crowded places where a multidisciplinary team works together. For this issue by considering the principle of privacy, operating room nurses should;

- Warn the team about the intimacy of the patient when necessary
- Be sensitive about the protection of privacy during the procedures to patient and pay attention to be seen only the area of procedure
- Cooperate with the management about the supply of operating room aprons according to the types of surgery
- Limit the number of personnel in operating rooms
- Ensure the door of operating room to be kept close
- Care for the protection of intimacy during the transfer of patients
- Keep and maintain the respect for the dead person
- Check whether it is permitted or not by the patient if an observer will be in operation for training

- Take the necessary precautions to fulfill the procedures in a short time
- Raise attention by hanging plates as "male patient" or "female patient" at the door of the operating room
- Pay attention the cleaning team to be called as soon as the operation finishes (Karaoz, 2000; THD, 2009; Karadakovan & Aslan, 2010; AORN, 2015).

"Failure to ensure the privacy of patient information"

The data about patients are kept in computers in hospital atmosphere together with the developments in technology. This method, which facilitates access to the information about patients for healthcare workers, also makes it difficult to protect private information of the patients through seeing the data by everyone easily. For this issue by considering the principle of privacy, operating room nurses should;

- Access to personal information only for patient care
- Shut down the patient records and be careful to log off in order to save the patient information when the computer is left unattended
- Follow the institutional policies concerning electronic information documentation and storage
- Be aware of privacy and security regulations and behave in accordance with them
- Ensure only the relevant personnels to access the patient records and information

Any information about the patient should not be discussed in public and this information should include the necessary information for care. Audial privacy should be provided for the patient and personnel speakings (Karaoz, 2000; THD, 2009; Karadakovan & Aslan, 2010; AORN, 2015).

"Presence of people in operating rooms for the purpose of training, video recording of the operation"

A situation that is frequently experienced in the operating rooms and is treated like a normal situation is the presence of observers for the purpose of training during the operation and the video or photo recording of the surgery for again the purpose of training and these are threats to the principle of privacy. For this issue by considering the principle of privacy, operating room nurses should provide to get the patients' permission before operation for situations such as the participation of students or observers in operation room, video and photo recording of the operation (Karaoz, 2000; THD, 2009; Karadakovan & Aslan, 2010; AORN, 2015).

"Surgical procedures of HIV-positive patients"

Knowing the HIV-positive patients by the surgical team can cause discriminations in the treatment and care of patients. For this issue by considering the principle of privacy, operating room nurses should;

- According to the ethical code of the American Nurses Association, the nurse who knows the patient is HIV-positive should keep this information to protect the patient privacy and care discrimination. Having this information should not affect the level of care in surgery. Because this also conflicts with the principle of justice.
- It is indicated that it is not necessary to say the surgical team that the patient is HIV-positive and to apply universal protection methods and to ensure the isolation of body products (Karaoz, 2000; THD, 2009; Karadakovan & Aslan, 2010; AORN, 2015).

2.5. Principle of Loyalty

Related with the principle of loyalty in operating rooms ethical problems such as not performing of the operation by the promised surgeon and trying to hide the negative developments that arise depending on diagnosis and treatment can be experienced. For this issue by considering the principle of loyalty, operating room nurses should;

- Act to protect the patients and society when health care and safety is affected by inefficiency of a person, an illegal or non-ethical practice (ethical code of ANA)
- Ensure to fulfill the pre-operative promises to patients (Karaoz, 2000; THD, 2009; AORN, 2015).

3. Conclusion and Recommendations

Ethical responsibilities of nurses are increasing in operating rooms where lots of ethical problems are experienced for the reasons such as heavy working conditions, presence of a crowded team, entire dependence of patients to the team. In this context, educators in undergraduate education should effort to bring basic ethical principles to nursery students, to make the importance of ethic in professional work to be understood and to develop ethical sensitivity. Nurse administrators also should reinforce this development in post-graduate process.

References

- Aslan, O., Vural, H. & Avci, P.Y. (2003). Ameliyathane hemşirelerinin etik sorunlara yönelik yaklaşımlarının belirlenmesi. *Gulhane Tıp Dergisi*, 45(2), 147 – 152.
- Chandrakantan, A. & Saunders, T. (2016). Perioperative ethical issues. *Anesthesiology Clinics*, 34(1), 35-42.
- Cerit, B. (2010). Hemşirelik etik ikilem testi'nin geçerlik-güvenirlilik çalışması ve hemşirelerin etik karar verebilme düzeyi. *Hacettepe Üniversitesi Hemşirelik Fakültesi Dergisi*, 17(2), 47-67.
- Ozturk, Z. K. & Aslan, F. E. (2009). Ameliyat sırasında çocukları bekleyen tehlike: Cerrahi alan enfeksiyonları ve kanıt temelli önlemler. *Cocuk Enf. Dergisi*, 4, 29-33.
- Karadakovan, A. & Aslan, F. (2010). *Dahili ve cerrahi hastalıklarda bakım*. Adana: Nobel Tıp Kitabevi.
- Karaoz, S. (2000). Cerrahi hemşireliği ve etik. *CU Hemşirelik Yüksek Okulu Dergisi*, 4(1), 1-8.
- Lindwall, L. & Von Post, I. (2008). Habits in perioperative nursing culture. *Nursing Ethics*, 15(5), 670-681.
- MacDonald, H. (2007). Relational ethics and advocacy in nursing: Literature review. *Journal of Advanced Nursing* 57(2), 119-126.
- Pope, B., Hough, M. C. & Chase, S. (2016). Ethics in community nursing. *Online Journal of Health Ethics*, 12(2), 3-10.
- Shapshay, S. M. & Healy, G. B. (2016). The ethics of running multiple operating rooms simultaneously: Is this Ghost surgery?. *The Laryngoscope*, 126(9), 1959-1960.
- Utlü N. (2016). Hastane ortamında hemşirelerin etik yaklaşımı ve etik ikilemler. *Istanbul Aydın Üniversitesi Dergisi*, 8(29), 17-35.
- Uzun, O. (2003). Cerrahide etik. 4. *Ulusal Cerrahi ve Ameliyathane Hemşireliği Kongresi Kongre Kitabı*, Ege Üniversitesi Basımevi, İzmir, pp. 40-56.
- Yavuz van Giersbergen, M. & Kaymakci, S. (2015). *Ameliyathane hemşireliği*. İzmir: Türk Cerrahi ve Ameliyathane Hemşireleri Derneği Yayını.