



CAREER OPPORTUNITY

Position: Part Time Perioperative Registered Nurse
#35-2022

Department: Nursing

Commencing: TBD

Salary: Per the ONA 81 Hospital wage Schedule

Deadline: Open Until Vacancy Filled

Job Description: Enclosed

Riverside Healthcare Facilities Inc. invites applications from all qualified applicants.

Please apply in writing, using the "Application Form" to: Human Resources

For more information, please contact Human Resources at:

human.resources@rhcf.on.ca



JOB DESCRIPTION

POSITION (Title):	Part Time Perioperative Registered Nurse
DEPARTMENT/SERVICE AREA:	Nursing
SITE:	LVGH
REPORTS TO (Title):	Director, Nursing

QUALIFICATIONS NECESSARY:

- Current registration with the College of Nurses of Ontario;
- Certificate in Basic Cardiac Life support (BCLS), Advanced Cardiac Life Support (ACLS) & Neonatal Resuscitation Program (NRP) are required;
- Three years recent experience in perioperative nursing including both circulating and scrub nurse responsibilities;
- Three years recent experience in acute care nursing, ICU preferred;
- Graduate of a recognized perioperative nursing program acceptable to the hospital;
- Canadian Nurses Association certification in Perioperative Nursing preferred;
- Basic Cardiac Rhythm/Arrhythmia Interpretation;
- Demonstrates extensive knowledge in identification and function of surgical instrumentation in MIS, general surgery, orthopaedic power tools & instrumentation and endoscopy;
- Must have knowledge and competency in the administration of drugs and intravenous therapy;
- Personal commitment to the nursing profession, which is demonstrated by accountability and responsibility for continuing education, quality improvement in nursing practice and involvement in professional associations;
- A caring, humanistic attitude that includes serving as a patient advocate;
- Good communication and interpersonal skills;
- The ability to deal with personal stress and stressful situations in a constructive and positive manner;
- Demonstrated strong written and verbal communication skills;
- Demonstrated strong interpersonal skill with the ability to function effectively independently, within a team, with front line personnel, and management;
- Demonstrated ability to function effectively in a fast paced healthcare environment with excellent organizational and time management skills with the ability to multitask and prioritize workload;
- Dependable with a verifiable acceptable attendance record;
- Proven ability to perform the essential duties of the position on a regular basis.

BASIC RESPONSIBILITIES:

Provide preoperative, intraoperative and postoperative nursing care to the surgical patient consistent with current Standards of Professional Practice with the Ontario College of Nurses and Operating Room Nurses Association of Canada Standards of Practice.

Provides preoperative care:

Preadmission Screening and Assessment via Pre admit Clinic or Pre operative Phone Assessment:

- Systematically assess the patient and ensure that the data is complete, accurate, documented and communicated in order to develop the patient's individualized plan of care during the surgical

experience.

- Preoperative teaching shares information with the patient/family regarding preoperative preparation, the operative course and the postoperative treatments and expectations. Information shared with the patient/family includes patient expectations prior to surgery, pain management, postoperative effects and negative side effects, and transition home with support services where required.

Day of Surgery admission:

- Systematically assess the patient and ensure that the data is complete, accurate, documented and communicated and that the patient has met all of the pre-procedural prerequisites for the procedure under anaesthesia/sedation in order that the patient will be able to reach an optimal recovery.

Provides intraoperative care:

Circulating Nurse:

- The circulator is responsible for managing the nursing care of the patient within the Operating Room and coordinating the needs of the surgical team with other care providers necessary for the completion of surgery. The circulating nurse observes the surgery and the surgical team from a broad perspective and assists the team to create and maintain a safe and comfortable environment for the patient. The circulator assesses the patient's condition before, during and after the surgical procedure to ensure optimal outcome for the patient.

Scrub Nurse:

- The scrub nurse works directly with the surgeon within the sterile field, passing instruments, sponges, and other items needed during the procedure. Surgical team members who work within the sterile field have scrubbed their hands and arms with special disinfecting soap and generally wear surgical gowns, caps, eyewear, and gloves.

Provides postoperative care:

Phase I Recovery:

- Systematically and continuously assess and monitor the patient during the emergence from anaesthesia, ensuring that all data is complete, accurate, documented and communicated and will intervene with nursing interventions when appropriate, or consult other interprofessional healthcare members to assist when required, to ensure the patient reaches an optimal recovery.

Phase II Recovery:

- Systematically and continuously assess and monitor the patient and ensure that the data is complete, accurate, documented and communicated and that the patient is progressing towards his pre-anaesthetic optimal recovery.

SPECIFIC DUTIES:

Provide preoperative care:

Preadmission Screening and Assessment via Pre admit Clinic or Pre operative Phone Assessment:

1. Review all systems from both primary and secondary sources, including vital signs, temperature, oxygen saturation, height, weight, physical and psychological/cognitive attributes
2. Review all recent laboratory and diagnostic tests and results
3. Complete health history, including previous surgical/therapeutic interventions
4. Response to previous surgical/therapeutic interventions assessment, response to anaesthetics (own and family)
5. Recent hospitalizations, and isolation status precautions if known (i.e. antibiotic resistant organisms)
6. Allergies and sensitivities, including latex, environmental, food and drugs
7. Physical growth and development (paediatric), physical and sensory impairment.
8. Family status and cultural background
9. DNR status and End of Life Plan of Care, Power of Attorney, Substitute Decision Maker.
10. Medications including all prescriptions and herbal, nutritional supplements
11. Illicit drug use &/or substance abuse: alcohol and tobacco
12. Patient understanding of procedure

13. Pre-procedural preparation of patient: medications on am of surgery as instructed by the surgeon or most responsible physician, NPO status, arrival time and place, education information specific to type of anaesthetic and procedure
14. Pre-procedural preparation for discharge and home (responsible adult to escort the patient home, remain on procedural night, long term support either internally or externally including nursing services and assistive devices) or admission to inpatient bed or intermediate care unit.
15. Post-procedural expectations: pain management, PONV and management, expected progress to optimal functioning
16. Written instructions are reviewed with patient and remain with patient.

Day of Surgery admission:

1. Vital signs assessment, documentation and interpretation including temperature, pain level
2. Completion of the preoperative checklist including procedure, type of anaesthetic, allergies, isolation status and precautions, NPO status, medications use/most recent dose.
3. Significant abnormal laboratory and diagnostic test results
4. Treatments and test performed: capillary blood glucose monitoring, IV start, preoperative medications and time of administration
5. Significant findings that differ from the PAC or PPA i.e. evidence of change in patient's physical/mental status

Provides intraoperative care:

Circulating Role:

1. Sets priorities and expedites and efficient aseptic set-up for each surgical procedure
2. Participates with the surgical patient and surgical team in the Surgical Safety Checklist
3. Demonstrates extensive knowledge in identification and use of surgical instrumentation in MIS, general surgery, orthopaedic power tools & instrumentation and endoscopy.
4. Performs the surgical counts concurrently with the scrub nurse and documents accurately prior to beginning surgery, intraoperative, prior to closure and final sponge/needle count.
5. Provides equipment and resources for the health care team to function efficiently
6. Demonstrates knowledge on the safe use of surgical equipment including but not limited to laparoscopic tower, tourniquet, electrosurgical unit, smoke evacuator and endoscopy tower.
7. Assesses the physical status of the patient
8. Develops, modifies and documents the individualized plan of care to meet the specific needs of the patient
9. Provides physical comfort measures specific to each surgical patient while also assisting with surgical positioning
10. Provides appropriate care during the admission, pre-induction, induction, intraoperative and emergence phases
11. Uses a surgical conscience to maintain and monitor the integrity of the sterile field
12. Reduces risk by providing continuous, astute and vigilant observation of the surgical team throughout the surgical phase meeting the health care team and patient's needs
13. Acts as the patient advocate throughout the perioperative period
14. Responds appropriately to complications and unexpected events during the perioperative period
15. Prepares all specimens by labelling and handling appropriately
16. Organizes and coordinates appropriate resources in a timely manner in preparation for the subsequent patient
17. Provides and assists with procedures/devices required to complete patient care following the surgical procedure
18. Assists in the patient transfer and postoperative positioning
19. Accurately and appropriately documents nursing, surgical and other health care team activities during the perioperative period
20. Promotes appropriate communication techniques to keep noise levels at a minimum
21. Assists with patient transport to a receiving unit and communicates pertinent patient information
22. Organizes and coordinates appropriate resources to ensure an efficient theatre turnover.

Scrub Nurse Role:

1. Sets priorities and expedites an efficient aseptic set-up for each surgical procedure
2. Participates with the surgical patient and surgical team in the Surgical Safety Checklist
3. Applies knowledge and skills while anticipating and adapting to changes in the surgical procedure
4. Vigilant and attentive throughout the surgical procedure, and responds appropriately to complications and unexpected events
5. Uses a surgical conscience to monitor aseptic technique throughout the procedure
6. Performs the surgical count concurrently with the circulating perioperative Registered Nurse and accounts for all items prior to beginning surgery, intraoperative, prior to closure and final sponge/needle count.
7. Demonstrates extensive knowledge in identification and function of surgical instrumentation in MIS, general surgery, orthopaedic power tools & instrumentation and endoscopy.
8. Organizes, handles and secures sutures, needles and stapling device
9. Assists with draping patient for a variety of procedures as appropriate.
10. Identifies malfunction or breakage of surgical instruments and equipment, and responds appropriately to ensure patient and health care team safety
11. Identifies specimens appropriately to circulating personnel confirming type of testing required
12. Acts as the patient's advocate during the surgical procedure
13. Appropriately teaches and coaches learners throughout the surgical procedure
14. Promotes appropriate communication techniques to keep noise at a minimum
15. Dismantles the surgical set-up in a timely manner to contribute to an efficient turnover ensuring all sharps removed.

Provides postoperative care:

1. Care of patients receiving general anaesthetics, regional anaesthetics, analgesics, muscle relaxants and sedative agents.
2. Airway management
3. Patient comfort related to pain or postoperative nausea and vomiting
4. Management of thermoregulation

Phase I Recovery:

1. Evidence of respiratory effort and rate, effective or not effective (chest rising), chest sounds
2. Management of hypoventilation: bag-mask-valve utilization, oral/nasal airway, positioning of the patient to reduce obstruction, to increase lung expansion and to promote wakefulness
3. Advanced airway devices in place and management, removal, mechanical ventilation
4. Patient colour: circumoral-cyanosis or cyanosis of mucous membrane or skin
5. Skin assessment: diaphoresis, temperature using tactile monitoring
6. Oxygen saturation value (SpO₂),
7. ECG monitoring, interpretation and intervention
8. Hemodynamic monitoring and interpretation (manual or electronically monitored)
9. Intraoperative course including type of anaesthetic/sedation agent or technique, other medications required, procedural intervention, blood loss, cardiac or respiratory complications, fluid balance, glucose monitoring and any other complications.
10. Evidence of hypothermia and management
11. Evidence of complications associated with hypovolemia or extreme blood loss: fluid management and resuscitation, including lines, IV sites and solutions
12. Monitoring of side effects of anaesthetic agents, adjuncts, analgesics and management of re-narcotization, hypotension, cardiac arrhythmias, sensory, motor functioning, level of consciousness
13. Symptoms of perianaesthesia related complications, such as laryngospasms, flash pulmonary edema, Malignant Hyperthermia (MH) symptoms, myocardial infarction (MI)
14. Knowledge of anatomy and physiology of intervention site and procedure performed and responses to intervention
15. Monitoring of neurological and renal changes compared to preoperative state
16. Collection of ongoing diagnostic and laboratory data as appropriate
17. Lab value interpretation

18. Physiological system review and assessment, along with surgical site assessment including dressings, drains, tubes, catheters and reservoirs
19. Management of pain and comfort measures: pain management and PONV interventions, sedation
20. Documentation, interpretation and management of all vital signs at 5 minute intervals, including oxygen saturation values, pain scale score.
21. Fluid intake and output
22. Monitoring and interventions to meet the psychosocial needs of the patient/family.
23. Documentation of assessment data, nursing diagnoses and nursing interventions, including ongoing application of discharge score level (using a scoring system) to anticipate in advance the timely discharge to Phase II Recovery

Phase II Recovery:

1. Evidence of respiratory effort, rate and reoxygenation
2. Management of hypoventilation: oxygen therapy, bag-mask-valve utilization, oral/nasal airway
3. Patient colour: circumoral-cyanosis or cyanosis of mucous membrane or skin
4. Skin assessment: diaphoresis, temperature using tactile monitoring
5. Oxygen saturation value (SpO₂),
6. Hemodynamic monitoring and interpretation (manual or electronically monitored)
7. Intraoperative course including type of anaesthetic/sedation agent or technique, other medications required, procedural intervention, blood loss, cardiac or respiratory complications, fluid balance, glucose monitoring and any other complications.
8. Evidence of hypothermia and management
9. Monitoring of side effects of anaesthetic agents, adjuncts, analgesics and management of reoxygenation, hypotension, cardiac arrhythmias
10. Symptoms of commonly experienced perioperative complications, such as MH symptoms, MI
11. Phase I Recovery significant events
12. Knowledge of anatomy and physiology of intervention site and procedure performed and responses to intervention
13. Monitoring of neurological and renal changes compared to preoperative state
14. Physiological system review and assessment, along with surgical site assessment
15. Management of pain and comfort measures: pain management and PONV interventions
16. Documentation, interpretation and management of all vital signs including oxygen saturation values, pain scale score
17. Fluid intake and output
18. Documentation of assessment data, nursing diagnoses and nursing interventions, including ongoing application of discharge score level (using a scoring system) to anticipate in advance the timely discharge to observation unit or home
19. Monitoring and interventions to meet the psychosocial needs of the patient/family.

General Expectations:

1. Participates in the Quality Improvement Program and demonstrate continuing professional growth
2. Carries out work assignments safely and is knowledgeable of and in compliance with relevant regulations, policies and procedures (ie. Occupational Health and Safety Act).
3. Accept shift rotation and assignments on other nursing units in accordance with staffing needs/patient census.
4. Performs other such duties or responsibilities that may be delegated by the Director of PeriOperative Services or Nursing Supervisor.
5. Must be available for standby and call-back on a rotating basis.
6. Must be within thirty minutes of the hospital when on standby.
7. Demonstrate continuing professional growth.

References:

- Standards of PeriAnaesthesia Nursing Practice-Sixth edition (2009)
- Operating Room Nurses Association of Canada (ORNAC) Standards, Guidelines and Position Statements for PeriOperative Registered Nursing Practice – 10th Edition (2011)

POSITION AVAILABLE:

- This Part-Time position will commence ASAP.

CONDITIONS OF EMPLOYMENT:

1. Human Resource Policies
2. Corporation Policies
3. Department Policies
4. Satisfactory Criminal Background Check