# **Guided Lecture Notes, Chapter 43, Caring for Surgical Patients**

Learning Objective 1. Explain the various reasons surgery is done and the preparation for it. (Refer to PowerPoint slides 2 to 5.)

* Explain that a person may need surgery for many reasons. Discuss the difference between exploratory surgery and definitive surgery.
* Explain that surgeries are often described according to their acuity. Elective surgeries, such as a face-lift or cataract surgery, are not imperative to save the person’s life and can be performed whenever the person is ready. The procedure is planned for and scheduled ahead of time.
* Explain that urgent surgeries, such as removal of a gallbladder or a mastectomy, are planned and scheduled ahead of time, but usually an effort is made to schedule the procedure as soon as possible to prevent the person’s condition from getting worse.
* Explain that emergent surgeries, such as an appendectomy to remove a ruptured appendix, are surgeries that must be performed immediately to prevent the person from dying or becoming disabled.
* Have learners refer to learning activities located at the end of the chapter.

Learning Objective 2. Define the term *anesthesia* and describe the three main types of anesthesia. (Refer to PowerPoint slides 6 to 9.)

* Explain the different types of anesthesia that may be used to prevent the person from feeling pain during the procedure.
* Have learners refer to the learning activities located at the end of the chapter.

Learning Objective 3. Understand the fears and concerns of a preoperative patient and describe actions the nursing assistant can take to help relieve some of them. (Refer to PowerPoint slides 12 to 19.)

* Describe preoperative teaching and explain why it is important. Discuss how the health care team prepares the person emotionally for the upcoming surgical procedure, with particular emphasis on the nursing assistant’s role.
* Ask students to share their personal experiences with having had a surgical procedure. Focus the discussion on situations that may have made them particularly anxious preoperatively.
* Remind students about the concept of informed consent.
* Have learners refer to the learning activities located at the end of the chapter.

Learning Objective 4. Describe physical preparations required for a person before surgery and explain the nursing assistant’s role in these preparations. (Refer to PowerPoint slides 20 to 34.)

* Describe how, in the days leading up to the surgery, the person may have to undergo tests to assess their level of health.
* Explain that a person who is scheduled for surgery will be on NPO status at least 6 to 8 hours before the surgery. Discuss what a nursing assistant can do to make the patient who is on NPO status more comfortable.
* Explain the many things that may be done on the morning of the surgery, such as administering a bowel prep, bathing, grooming, and dressing. Discuss each of these.
* Explain the physical preparation of a patient immediately before surgery. Discuss the difference between preparing an outpatient and an inpatient.
* Have learners refer to the learning activities located at the end of the chapter.

Learning Objective 5. Describe potential complications of surgery and the measures taken to prevent them. (Refer to PowerPoint slides 35 to 50.)

* Describe the person’s condition immediately following surgery, and how the person is cared for while in the postanesthesia care unit (PACU, recovery room).
* Discuss the various things that a nursing assistant should do to prepare the person’s room while the person is in surgery, so that the transfer of the person from the surgery to the room is efficient.
* Describe the various respiratory and cardiovascular complications that a person may experience after surgery.
* List the various respiratory complications, such as pneumonia and atelectasis, and how coughing and deep breathing exercises and incentive spirometry are used to help prevent these complications.
* Demonstrate and have students perform the coughing and deep breathing exercises, using a pillow to help splint the abdomen.
* Explain why thromboembolism is a particularly dangerous cardiovascular complication of surgery. Explain how intermittent pneumatic compression (IPC) devices, antiembolism stockings, and leg exercises are used to help prevent embolism.
* Remind students that TED stockings were covered in Chapter 32. Discuss the basics of their use.
* Have learners refer to the learning activities located at the end of the chapter.

Learning Objective 6. Discuss observations that are important to report to the nurse when caring for a patient who is recovering from surgery. (Refer to PowerPoint slides 52 to 60.)

* Explain the typical schedule for taking vital signs postoperatively. Mention why vital signs are monitored so closely during the postoperative period.
* Discuss that, during the postoperative period, most people need assistance in repositioning themselves every 1 to 2 hours. Discuss special precautions to take when repositioning a person following surgery.
* Explain that a person may need intravenous therapy for nutrition. Describe the nursing assistant’s role in assisting a person with nutrition.
* Explain that, for many reasons, a person may experience difficulty with elimination following surgery. Describe the nursing assistant’s role in assisting with elimination during the postoperative period.
* Explain that people who are recovering from surgery may need help with personal hygiene, and describe the nursing assistant’s role in providing this help.
* Discuss why ambulation is important during the postoperative period, and explain how a nursing assistant assists the person with ambulation.
* Discuss the concerns for older residents who may need to go to the hospital for a surgical procedure.
* Discuss the increased risk for complications that older adults have.
* Discuss the importance of paying extra attention to these residents as they recover, to prevent any possible complications.
* Have learners refer to the learning activities at the end of the chapter.