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Australian perioperative nurses' experiences of assisting in multi-organ procurement surgery: A grounded theory study



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ABSTRACT

Introduction/background: Multi-organ procurement surgical procedures through the generosity of deceased organ donors, have made an enormous impact on extending the lives of recipients. There is a dearth of in-depth knowledge relating to the experiences of perioperative nurses working closely with organ donors undergoing multi-organ procurement surgical procedures.

Aim: The aim of this study was to address this gap by describing the perioperative nurses experiences of participating in multi-organ procurement surgical procedures and interpreting these findings as a substantive theory.

Design: This qualitative study used grounded theory methodology to generate a substantive theory of the experiences of perioperative nurses participating in multi-organ procurement surgery.

Setting: Recruitment of participants took place after the study was advertised via a professional newsletter and journal. The study was conducted with participants from metropolitan, rural and regional areas of two Australian states; New South Wales and Western Australia.

Participants: Thirty five perioperative nurse participants with three to 39 years of professional nursing experience informed the study.

Methods: Semi structured in-depth interviews were undertaken from July 2009 to April 2010 with a mean interview time of 60 min. Interview data was transcribed verbatim and analysed using the constant comparative method.

Results: The study results draw attention to the complexities that exist for perioperative nurses when participating in multi-organ procurement surgical procedures reporting a basic social psychological problem articulated as hiding behind a mask and how they resolved this problem by the basic social psychological process of finding meaning.

Conclusion: This study provides a greater understanding of how these surgical procedures impact on perioperative nurses by providing a substantive theory of this experience. The findings have the potential to guide further research into this challenging area of nursing practice with implications for clinical initiatives, management practices and education. © 2014 Elsevier Ltd. All rights reserved.

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What is already known about the topic?

- The need for organs and increasing organ donation rates through multi-organ procurement surgical procedures is reported as an international issue.
- Perioperative nurses assisting in multi-organ procurement surgical procedures in many countries have reported negative and traumatic experiences as a result of their participation.

What this paper adds

- This paper extends understanding of the experiences of perioperative nurses and their work roles when participating in multi-organ procurement surgical procedures by providing a perspective from an Australian context.
- Using a grounded theory method a substantive theory was developed explaining the perioperative nurses main concern and how they move to resolve the problems they encounter as a result of their participation in these surgical procedures.
- The findings make a substantial contribution to the existing literature on perioperative nurses experiences of participating in multi-organ procurement and provide a detailed view of the challenges experienced by these nurses.

1. Introduction and background

Organs procured through multi-organ procurement surgical procedures continue to be used as a therapeutic alternative for patients in urgent need of healthy organs, with surgeons successfully transplanting a greater number and variety of organs (Starzl, 1992; Tilney, 2003). These surgical procedures are undertaken on brain dead and donation after circulatory death (DCD) donors who have registered their consent during their lifetime or their family (legal next of kin) has consented to donate multiple organs, body parts or tissues for the purposes of transplanting these to a single or multiple recipients (ANZOD Registry, 2012). Increasing the availability of organs from both brain dead and DCD donors has become a priority not only within Australia but worldwide to reduce chronic dependence on organ replacement technologies and improve the quality of life for those with end stage organ disease (ANZOD Registry, 2012; Levvy and Snell, 2008). Yet whilst there has been strong support to boost organ donation rates and hence increase transplantation rates worldwide through the use of multi-organ procurement surgical procedures little attention is paid to health professionals, such as perioperative nurses who are closely involved in these surgical procedures (Smith et al., 2010). As these procedures take place behind the closed doors of operating rooms (often referred to as theatres), worldwide the experiences of these health professionals is largely unexplored from their participation perspective such as, the problems they encounter and how they overcome and manage their work roles (Smith, 2012; Smith et al., 2010).

Perioperative nurses work collaboratively within surgical teams to facilitate these surgical procedures by providing intraoperative assistance to procurement teams at the time these emergency procedures are required (Smith, 2012). Previous international research has suggested that perioperative nurses report participating in these procedures as highly stressful, with effects of personal distress, emotive feelings, strained relationships with visiting surgical teams and negative attitudes to organ donation as a result of their participation (Carter-Gentry and McCurren, 2004; Lloyd-Jones, 1996; Page, 1996; Regehr et al., 2004; Wang and Lin, 2009; Wolf, 1991). Although the research literature has strongly emphasised that these surgical procedures initiated difficult emotive reactions for the nurses involved, there is no consensus on what should be done to assist this group of health professionals (Carter-Gentry and McCurren, 2004; Kent, 2004; Lloyd-Jones, 1996; Page, 1996; Regehr et al., 2004; Wang and Lin, 2009; Wolf, 1991). Whilst the existing research provides a descriptive presentation of the various issues which impact on the perioperative nurse's role there was a relative lack of conceptual consideration for the social, psychological processes and interactions of perioperative nurse's participatory experiences. Previous research has not shed light on how perioperative nurses were trained to undertake these surgical procedures, how they dealt with their experiences and the long term effects on individuals who frequently participated in these procedures. This research aimed to address these identified deficits and add new knowledge from an Australian perioperative nurses perspective.

2. Method

2.1. Aim

The aim of this qualitative study was to better understand the experiences of perioperative nurses when participating in multi-organ procurement surgical procedures highlighting the problems they encountered and the processes they used in managing their experiences. This paper reports the generated substantive theory from the data gathered within an Australian context.

2.2. Study design

A grounded theory methodology was used to explore the experiences of perioperative nurses participating in multi-organ procurement surgery from two Australian states; New South Wales and Western Australia (Glaser, 1978; Glaser and Strauss, 1967). This method was chosen to expand knowledge given the participatory experiences of Australian perioperative nurses in multi-organ procurement surgical procedures was a largely unexplored phenomenon. Grounded theory allowed the discovery and development of a substantive theory generated from the research data to explain the unique viewpoint of the perioperative nurses reflecting their experiences of the problems they encountered and how they overcame these whilst assisting in multi-organ procurement surgery.

2.3. Research sample, setting and recruitment

Thirty five perioperative nurses (33 females and 2 males) were recruited to the study from metropolitan,

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