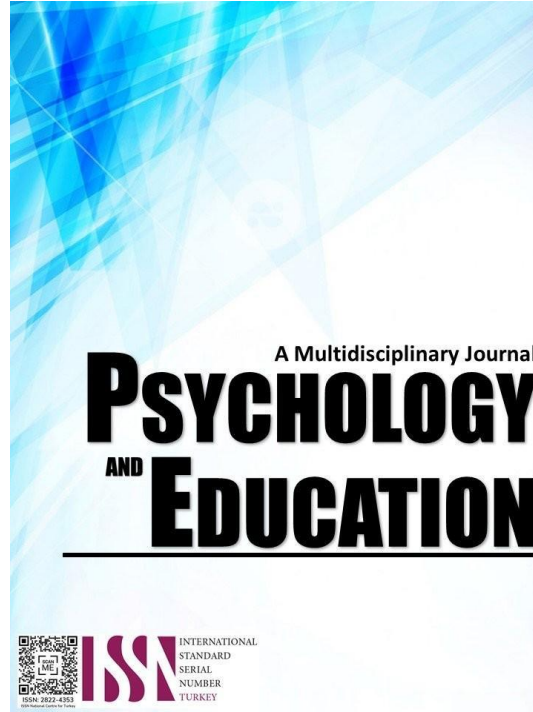


LIVED EXPERIENCES OF NURSES IN DELIVERING PERI- OPERATIVE CARE



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Lived Experiences of Nurses in Delivering Peri-Operative Care

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Abstract

This study, titled "Lived Experiences of Nurses in Delivering Peri-Operative Care," uniquely focused on the challenges faced by 17 operating room nurses in four district hospitals within Pampanga's second district. Employing Colaizzi's descriptive phenomenological method and using criterion-based purposive sampling, participants with at least six months of OR experience were interviewed through semi-structured, face-to-face interviews. The data were systematically analyzed to identify significant statements, formulate meanings, and develop key themes, ensuring trustworthiness through credibility, confirmability, dependability, and transferability. Through rigorous analysis, three major themes emerged: Practicing Patient Autonomy Through Thorough Informed Consent, Trying to Maintain Ethical Standards, and Strict Observance of Sterility Protocols in pre-operative nursing care; Ensuring Patient Safety and Practicing Protective Measures during intra-operative nursing care and Maintaining Sterility in Post-Operative Wound Care during the post-operative nursing care. These findings underscore the crucial role of OR nurses in maintaining patient safety, preventing infections, and addressing the ethical and emotional complexities of their work. The study's findings stress the importance of systematic adherence to protocols, teamwork, and reflective practices in improving patient outcomes and peri-operative care's professional environment.

Keywords: *peri-operative care, lived experiences, operating room nurses, pre-operative nursing care, intra-operative nursing care*

Introduction

The operating room (OR) is a vital hospital department recognized for its revenue potential and the need for specialized management. Operating Room nurses, also known as peri-operative nurses, need specialized skills to manage diverse surgical cases and equipment, working dynamically with other healthcare professionals to ensure patient safety and optimal outcomes.

Peri-operative care includes pre-operative, intra-operative, and post-operative phases, including comprehensive evaluation, risk mitigation, patient surveillance, and recovery assistance to enhance surgical outcomes (Jennifer et al., 2024). Operating room nurses often encounter significant emotional and psychological challenges, as seen during COVID-19 when they suffer from burnout and stress (Behzad Imani, 2024). Their struggles to maintain efficient communication and teamwork are exacerbated by these pressures and the need for quick decisions in high-pressure situations.

The critical role that operating room nurses play in fostering successful surgical outcomes and patient satisfaction is highlighted by the fact that mistakes and near misses continue to occur despite standardized patient safety procedures (Chellam et al., 2023). Stress, time constraints, and communication deficiencies within interdisciplinary teams adversely affect their effectiveness (Peñataro-Pintado et al., 2021).

Peñasales et al. (2017) examine operating room nurses in the Philippines, who highlight their crucial role in providing high-quality peri-operative patient care despite difficult work circumstances. The research emphasizes how operating room nurses in the Philippines must prioritize communication, cooperation, and flexibility as they often deal with little resources, large patient loads, and stressful situations. To ensure patient safety and effective care delivery, these nurses constantly go above and beyond the call of duty by using resiliency and teamwork. Their dedication and resilience in the face of challenges are truly inspiring. The results highlight the essential role of operating room nurses in surgical patient outcomes and reveal the problems they encounter in resource-constrained healthcare environments.

District hospitals in the Philippines are secondary-level institutions offering essential medical services, including emergency, maternity, and surgical treatment, to rural and semi-urban communities. Administered by local government units (LGUs), these hospitals are integral to the referral system, connecting patients to tertiary hospitals for specialist care. Nevertheless, they often encounter constraints in resources and personnel, affecting service capacity (Department of Health, 2020). Operating room nurses in these hospitals encounter unique challenges, such as staffing shortages, high patient loads, and insufficient supplies. They often balance many responsibilities, such as assisting in surgical operations, overseeing equipment, and performing administrative duties owing to insufficient staff, all while maintaining patient safety despite limited access to modern technology (Department of Health, 2020).

The present study was carried out in the second district of Pampanga across four district hospitals to guarantee uniformity and comparative significance. The hospitals include Escolastica Romero District Hospital (ERDH), Romana Pangan District Hospital (RPDH), Jose Songco Lapid District Hospital (JSLDH), and Diosdado P. Macapagal Memorial Hospital (DPMMH). Choosing these facilities within the same district facilitates a consistent evaluation of peri-operative nursing experiences, given the same demographic, administrative, and resource circumstances across the locations, thus enhancing the study's relevance to the district-level healthcare context.

This study examines the experiences encountered by operating room nurses in four district hospitals within Pampanga's second district in delivering perioperative care. It also examines the complex balance nurses maintain between patient needs, surgical responsibilities, and emotional strain, aiming to pinpoint opportunities for augmenting support and resources and implementing best practices to enhance both nurse well-being and patient outcomes. The research highlights everyday stressors, such as communication barriers and procedural inefficiencies, and examines how these issues impact patient care and nurse satisfaction.

Despite the vital role of operating room nurses, research on their abilities, particularly within mobile surgical teams, is limited (Niu et al., 2023). Recent work underscores the significance of experience, cost-effective practices, and evidence-based policies (Yilmaz et al., 2020)

By understanding these experiences, the study may support targeted interventions that improve the delivery of peri-operative care in district hospitals. This would lead to more effective support systems, tailored training, and, ultimately, higher-quality patient care. The insights derived from this research have the potential to significantly enhance training programs, improve policy formulation, and provide a more supportive work environment for peri-operative care providers, thereby improving patient care and outcomes.

Research Questions

The primary objective of this research was to examine the lived experiences of nurses in delivering peri-operative care in the four district hospitals in the second district of Pampanga during the academic year 2023-2024. The researcher aimed to address the following essential inquiries to acquire all pertinent knowledge, data, and information:

1. How do nurses describe their experience in delivering peri-operative care?
2. What insights can be drawn from the lived experiences of nurses in peri-operative care?

Methodology

Research Design

The present study used a descriptive phenomenological methodology to investigate the lived experiences of nurses delivering peri-operative care thoroughly. Descriptive phenomenology was selected to emphasize obtaining individuals' direct experiences without the influence of other ideas or biases. This methodology revealed the intricate realities, experiences of operating room nurses, and insights, which are sometimes neglected by just quantitative data (Sinfield et al., 2023). Descriptive phenomenology enabled nurses to convey their narratives directly, offering a comprehensive understanding of their distinct work environment.

In order to investigate and describe the lived experiences of nurses providing peri-operative care further, Colaizzi's technique aims to reveal the core of human experiences by collecting detailed first-person accounts, which are examined without the influence of preconceived notions. The method offered a systematic approach to data analysis, assisting the researcher in pinpointing essential statements, extracting meanings, and formulating themes that faithfully represented participants' genuine experiences (Gumarang Jr. et al., 2021). This technique mainly benefits novice researchers, providing a rigorous but adaptable framework for comprehending intricate lived experiences in various contexts.

Moreover, the technique facilitated systematic organizing and analysis of the data, emphasizing critical statements and uncovering major themes that represented the fundamental elements of the participants' experiences. This method has benefited other domains, such as design and perception research, where collecting participants' feelings and sensations has yielded profound insights. By using this method, the study offered a logical and flexible framework that clarified the key aspects of nurses' experiences and gave a deep comprehension of the particular difficulties and challenges (Sundler et al., 2019; Rangarajan et al., 2022)

Descriptive phenomenology allowed the researcher to get significant insights from operating room nurses in four district hospitals within Pampanga's second district, exploring the genuine effects of their roles in peri-operative care. By emphasizing the nurses' views, the research offered an extensive overview of this profession's responsibilities, benefits, and personal development.

Participants

The population consisted of twenty (20) operating room nurses from four district hospitals in Pampanga's second district, selected to reflect experiences pertinent to peri-operative nursing. The selection process was meticulously designed to include only nurses actively employed in the operating room, guaranteeing that the collected insights were reflective of the unique, present-day realities of peri-operative nursing. This approach also accommodated potential variations in organizational structures across hospitals, which could impact on the scope of peri-operative responsibilities and the available support networks for these nurses.

Participants who fulfilled predetermined requirements crucial to the study's goals were chosen using criterion-based purposive sampling. This purposive sampling strategy was used to capture the unique viewpoints of full-time operating room nurses with at least six months of continuous experience in one of the district hospitals. Concentrating on this specific cohort enabled the research to investigate the lived experiences of nurses in peri-operative care, guaranteeing that participants have the requisite expertise to provide valuable insights into the intricacies of this domain.

The inclusion criteria were meticulously defined to guarantee that all chosen participants possessed sufficient exposure to the complexities and demands of the operating room environment. This was crucial for obtaining insightful perspectives on the challenges and coping strategies inherent to peri-operative nursing. Thus, criterion-based purposive sampling corresponds with the design to choose people based on essential characteristics necessary for thorough qualitative analysis (Ghosal, 2024)

This sampling method established a robust framework for acquiring insights intimately related to the emotional, practical, and ethical aspects of perioperative care within this regional healthcare context.

Seventeen (17) qualified operating room nurses from the four district hospitals participated in the research. As data saturation was reached, no new themes or insights surfaced. A crucial stage in qualitative research is indicative that the gathered views are enough to answer the study's research (Data Saturation in Qualitative Research, 2024). This approach ensured the results were solid, reflected everyday experiences, and did not call for more participants.

Criterion-based purposive sampling enabled research to concentrate only on the peri-operative nursing demographic, with inclusion criteria stipulating that participants were full-time operating room nurses possessing a minimum of six months of uninterrupted work. These criteria were crucial for obtaining views from nurses with extensive experience in peri-operative care, allowing them to provide meaningful, contextually relevant opinions on the distinct difficulties of their positions.

Instrument

The researcher conducted face-to-face individual interviews using a guided questionnaire to gather essential data on peri-operative care in the four district hospitals of Pampanga's second district. To address particular concerns and document nurses' actual experiences delivering peri-operative care, the interview guide was meticulously designed. Open-ended inquiries, grounded in pertinent literature, encouraged participants to provide comprehensive replies addressing the emotional, ethical, and practical dimensions of peri-operative nursing (Roberts, 2020)

The face-to-face interview technique demonstrated significant efficacy in this qualitative study, generating a trusting atmosphere that encouraged participants to share personal experiences comfortably. This strategy improved data validity by promoting genuine replies that may not emerge via other techniques (Benefits of Conducting Face-to-Face Interviews for Qualitative Research, 2024). The research yielded extensive, detailed findings that accurately represent the reality of peri-operative nursing within the local healthcare system.

Procedure

The data gathering for the research occurred on February 7 and 8, 2024, at four district hospitals in Pampanga's second district. On the first day, the researcher conducted interviews at three district hospitals. Four nurses (N1-N4) participated in the face-to-face individual interviews at Romana Pangan District Hospital, with each session lasting between 10 and 15 minutes. At Diosdado Macapagal Memorial Hospital, four additional nurses (N5-N8) were interviewed, and each session lasted 10-15 minutes. Finally, two nurses (N9-N10) from Escolastica Romero District Hospital participated, and the interview duration was similar.

Day 2 proceeded with visits to three district hospitals. At Jose Songco District Hospital, two nurses (N11-N12) were interviewed, followed by two at Diosdado Macapagal Memorial Hospital (N13-N14) and three from Escolastica Romero District Hospital (N15 – N17), with each interview lasting 10 -15 minutes. All interviews were done in a quiet, separate room at the nurses' workplace to foster a pleasant atmosphere and reduce distractions. All participants were informed of the confidentiality procedures, with all identifying information anonymized by using the letter code "N" to denote "nurse," followed by a distinct number for each individual. The researcher personally performed all interviews, guaranteeing uniformity and connection with each subject.

The research method included semi-structured, face-to-face individual interviews guided by open-ended questions. Participants were encouraged to openly discuss their experiences, describing feelings and events on their own terms. The interviews were digitally recorded using a voice recorder to document comprehensive replies. The spoken words on these recordings were then transcribed verbatim, which excludes non-verbal clues and contextual information like pauses, gestures, or emotional expressions. Verbatim transcription, or denaturalized transcription, focuses only on converting the vocal content of recordings into a clear text format. Fifteen operating room nurses from four district hospitals participated in the research, offering significant insights documented using this transcribing process.

Before data collection, the researcher examined pertinent literature to enhance comprehension of the subjects under investigation and to connect the interview questions with established study findings. This preparation allowed the researcher to conduct each interview from an educated viewpoint rooted in the literature and aimed at eliciting significant replies.

Data Analysis

To ensure methodological rigor, this study employed Lincoln and Guba's (1985) four trustworthiness criteria—credibility, confirmability, dependability, and transferability—which were systematically aligned with Colaizzi's seven-step method of qualitative data analysis. Credibility was established by leveraging the researcher's deep experiential knowledge as an operating room nurse, fostering rapport with participants, and promoting open, honest sharing. Through Colaizzi's Step 2 (Identifying Significant Statements)

and Step 3 (Formulating Meanings), the researcher carefully selected and interpreted participants' statements while preserving their original intent. Step 7 (Validation) reinforced credibility by allowing participants to verify the accuracy of transcriptions and interpretations. Confirmability was supported through methodological triangulation and the researcher's intentional neutrality during interviews. In Colaizzi's method, confirmability was ensured through faithful use of verbatim statements (Step 2), unbiased formulation of meanings (Step 3), and participant feedback (Step 7), allowing findings to remain grounded in participants' genuine experiences. Dependability was achieved by maintaining detailed documentation of protocols, participant responses, and analytic processes. Structured engagement with the data in Step 1 (Familiarization), consistent thematic development in Step 4 (Clustering Themes), and comprehensive synthesis in Step 5 (Exhaustive Description) all contributed to a replicable and coherent analysis. Transferability was ensured by providing rich, contextualized descriptions of nurses' experiences in the peri-operative environment, especially during Step 5 and the distilled summary in Step 6 (Producing the Fundamental Structure). These steps offered insights applicable to similar high-intensity clinical contexts. Collectively, the integration of Lincoln and Guba's trustworthiness principles within Colaizzi's analytical framework enhanced the transparency, credibility, and applicability of the findings, yielding a robust representation of the lived experiences of peri-operative nurses.

Ethical Considerations

The ethical considerations in collecting data for the study began with obtaining formal permission from relevant authorities. Within the second district of Pampanga, the researcher obtained formal permission from the chiefs of hospitals and chiefs of nurses in four district hospitals. This involved presenting a thorough research proposal, including the study's aims, methods, and expected outcomes, and obtaining their consent for the study. Upon receiving hospital authorization, the researcher began the implementation of each step, adhering strictly to ethical and institutional standards.

After obtaining consent, the researcher coordinated with the Chief Nurses to arrange interviews at times that would minimally disrupt the operating room nurses' duties. The interview schedule was meticulously organized to accommodate the nurses' availability and minimize disturbance to their responsibilities. This involved considering their shift timings and workload to ensure that the interviews did not interfere with their work. To avoid any feeling of pressure or hurry, which may have affected the quality and sincerity of their answers during the in-person interviews, each participant was also given a detailed and well-organized schedule. In addition to facilitating accessibility and convenience, conducting the individual face-to-face interviews on hospital grounds fostered an atmosphere that encouraged truthful, thoughtful reflection.

All participants received written informed consent forms before the individual face-to-face interviews. The forms specified the study's aims, methodologies, and confidentiality rules to safeguard participants' identities. Participants examined, signed, and submitted the forms to signify their voluntary participation, with signed forms securely stored to preserve confidentiality and respect the integrity of the participants' agreements. All participants were informed of the confidentiality measures used throughout the interview process, including the utilization of the letter code "N," denoting "Nurse" (e.g., N1, N2, etc.), to anonymize individual identities and secure personal information.

At the commencement of each in-person interview, the informed consent procedure was restated to emphasize the study's goal, objectives, participants' responsibilities, potential risks, benefits, and confidentiality measures. Voluntary participation was highlighted, enabling individuals to determine their research involvement freely. Anonymity was a crucial ethical factor; despite the researcher's access to participants' identities, this information was carefully safeguarded and not disclosed to any third party, assuring adherence to confidentiality rules.

Given the delicate nature of inquiries about participants' professional experiences, especially in the peri-operative context, the researcher facilitated interviews in a confidential and supportive setting. Participants were informed that they might withdraw without implications, thereby mitigating any emotional risk linked to revealing their struggles. Participants benefited from self-reflection on their jobs, perhaps enhancing self-awareness and professional development. The research sought to provide insights that would improve peri-operative nursing practices, facilitating improvements for both individuals and the sector.

The study was designed with multiple precautions to protect participants' welfare and maintain ethical integrity. This included avoiding actions that could result in pain or injury and obtaining consent before initiating any potentially intrusive interactions. Throughout the research, precautions were made to safeguard participants' mental health and ensure all information was appropriately represented and respected. The researcher performed all interviews alone in a separate room to provide a serene and encouraging atmosphere.

All materials, including consent forms, audio files, transcripts, and communications, were securely stored on a password-protected external hard drive and classified as research data safeguarded under Republic Act 10173, also known as the Data Privacy Act of 2012. In conformity with this regulation, the researcher guaranteed that all data would be preserved for two years and disposed of by the legal right to delete data when it is no longer required.

Finally, the researcher followed stringent ethical guidelines to maintain voluntary involvement, safeguard participant anonymity, and guarantee data security. The research design meticulously evaluated possible risks and benefits, emphasizing participants' welfare while optimizing the study's contributions to nursing practice.

Results and Discussion

Characteristics of the Participants

Seventeen (17) operating room nurses, all with more than six months of experience in the operating room and now working full-time, came from the four district hospitals in Pampanga's second district. They participated in this research.

The participants had an average working experience of 5.70 years, with 10 of them being female. Furthermore, a significant majority of the 10 participants are married. All participants in this research have a bachelor's degree and hold the position of Nurse 1.

Emergent Themes

The "Lived Experiences of Nurses in Delivering Peri-Operative Care" encapsulated the core of the experiences. The significant statements about peri-operative care were identified and systematically organized into pre-operative, intra-operative, and post-operative phases.

The following themes were uncovered in Pre-Operative Nursing Care: Practicing Patient Autonomy Through Thorough Informed Consent, Trying to Maintain Ethical Standards, and Strict Observance of Sterility Protocols.

Meanwhile, the Intra-Operative Nursing Care theme was Ensuring Patient Safety and Practicing Protective Measures. Lastly, the Post-Operative Nursing Care theme was Maintaining Sterility in Post-Operative Wound Care.

Pre-Operative Nursing Care

Theme 1: Practicing Patient Autonomy Through Thorough Informed Consent

Modern healthcare practice must prioritize enhancing patient autonomy via comprehensive informed consent, especially in the peri-operative context. This theme highlights the need to give patients complete knowledge about the nature of their surgical operation, including its possible dangers, advantages, and available alternatives. Informed consent is a thorough communication process that involves more than just getting a patient to sign a paper; nurses are essential in helping patients understand complicated medical information. By doing this, nurses support patient-centered care, in which patients actively participate in choices that impact their health and welfare.

In the present study, "The Lived Experiences of Nurses in Delivering Peri- Operative Care," this theme focuses on how nurses deal with the challenges of obtaining informed consent while being professional and empathetic. Nurses are tasked with presenting medical terminology in accessible language while addressing patients' anxieties, cultural sensitivity, and ethical dilemmas. This part of their job shows their dedication to respecting patients' rights and ensuring everyone feels appreciated and respected throughout their surgical experience. For nurses to carry out this vital responsibility, they need ongoing education and assistance, highlighting the broader value of teamwork and mentoring within the peri-operative team.

To guarantee that patients are aware and ready for their surgical operation, it is essential to improve patient autonomy in the pre-operative context via comprehensive informed consent. The process starts with the endorsement phase, during which nurses evaluate the patient's comprehension of the operation, including the procedure's aim, possible dangers, and anticipated results. Nurses interact with the patient to verify their understanding and resolve any inquiries or apprehensions they may possess. This connection enables the nurse to confirm essential facts, like the laterality of the procedure, ensuring that all information corresponds with the surgical plan.

Suppose any elements of the signed permission form need to be clarified. In that case, the nurse plays a role in facilitating communication by obtaining clarification from the patient and working with the attending physician to provide precise explanations. This guarantees that patients possess comprehensive knowledge before starting. If the consent form is unsigned at the time of endorsement, the nurse must refuse acceptance of the patient for surgery until the paperwork is duly completed. This measure safeguards the patient's rights and maintains professional treatment standards. Nurses urge patients to sign the permission form as a requirement for surgery, highlighting its importance in pre-operative nursing care.

By meticulously following these procedures, nurses in the pre-operative phase promote patient autonomy and improve surgical safety and confidence. This procedure highlights the collaborative essence of peri-operative care, whereby nurses and physicians unite to empower patients, promote informed decision-making, and maintain ethical standards, guaranteeing good and respectful surgical experience.

The pre-operative context highlights the importance of promoting patient autonomy via informed consent, which is evident in the practices and experiences nurses share. These actions demonstrate how important informed consent is as a moral and legal need. Before surgery, nurses ensure that patients are well educated on the procedure, including its risks and advantages. This commitment is summarized by the assertion, "Never naming tatanggapin 'yong patient kung walang consent... Hindi naexplain sa kanya 'yong procedure na gagawin sa kanya... 'Yong risk versus sa... 'yong benefit ng OR" (Never accept a patient without consent... The procedure that will be done to them was not explained... The risk versus the benefit of the operation) (N6). This emphasizes nurses' importance in maintaining patient safety by ensuring the patient's autonomy and comprehension are always respected.

Moreover, informed consent promotes transparent communication between the healthcare staff and the patient, including family members. Nurses guarantee that both the patient and their family members are informed and engaged in the decision-making process, as shown by the remark, “We have to inform the... Not just the patient, of course. Pati ‘yong relatives nila na naghihintay sa labas” (We have to inform not just the patient, of course, but also their relatives who are waiting outside) (N14). The cultural and emotional aspects of care are addressed by this inclusion, which emphasizes how crucial family participation is in important choices. As stated in “First and foremost kasi kailangan, uh, pag inendorse na sa’yo ‘yong patient and chart, kailangan check mo muna ‘yong consent... safety first” (First and foremost, when the patient and chart are endorsed to you, you need to check the consent first... safety first) (N15), the procedure also includes confirming the completeness and correctness of consent forms during the endorsement process. By ensuring that the process meets the patient's expectations, this verification eliminates the possibility of misunderstandings or poor communication.

Additionally, nurses understand that obtaining patient consent is a continuous and dynamic process. They adjust to circumstances in which patients may retract their choice at the last minute, as articulated in, “Minsan kasi may mga pasyenteng ando’n na sa OR biglang sabihin ayaw na... Pero inexplain naman ng surgeon ma’am kung ano ‘yong mga risk” (Sometimes, there are patients who are already in the OR and suddenly say they don't want to proceed... But the surgeon did explain the risks, ma’am) (N8). Such instances illustrate the cooperative endeavor of nurses and surgeons to address patients' concerns and provide comfort while honoring their autonomy. By focusing on ethical values and a patient-centered approach, nurses safeguard the pre-operative process's integrity, keeping patients and their families informed and included in decision-making.

Theme 2: Trying to Maintain Ethical Standards

Integrating ethical concepts with compassionate, patient-centered techniques is emphasized in the pre-operative context to uphold ethical standards and promote holistic patient care. While attending to patients' physical, emotional, and psychological requirements, this theme emphasizes respecting patients' rights, dignity, and unique needs. Ethical principles direct nurses to guarantee that patients are treated with dignity, informed consent is secured, and confidentiality is maintained. Holistic care emphasizes seeing patients as distinct people with unique concerns, cultural backgrounds, and personal values, establishing a supportive and empathetic atmosphere during an important part of their surgical experience.

In the context of the study "The Lived Experiences of Nurses in Delivering Peri- Operative Care," this theme highlights the dual role of nurses as ethical advocates and holistic caregivers. Nurses must make moral decisions in difficult circumstances, such as treating patients' anxiety or unwillingness to have surgery yet respecting their autonomy. At the same time, they offer holistic care by considering not only the physical readiness of patients but also their emotional state and familial support system. The difficulties and benefits of peri-operative nursing are reflected in this approach, where ethical integrity and compassionate treatment come together to provide patients with a satisfying and meaningful experience. It also emphasizes how crucial teamwork is within the medical community to guarantee that these values are continuously maintained.

Upholding moral principles and encouraging comprehensive patient care are essential components of nursing practice in the pre-operative context, and they become apparent as soon as nurses receive the patient in the operating room. Ethical standards are maintained by treating each patient with dignity and respect, irrespective of their condition or challenges. Nurses ensure patients feel appreciated and cared for, even in vulnerable or challenging situations. This regard includes the safeguarding of the patient's confidentiality, particularly in instances involving delicate medical situations. Nurses maintain trust and professionalism by protecting personal information and helping patients feel comfortable and respected throughout their surgical experience.

Holistic care, integral to ethical practice, manifests in recognizing and integrating patients' religious beliefs and cultural values. For example, nurses respect patients whose religion forbids specific medical procedures, including transfusions. This aspect requires meticulous preparation and cooperation with the surgical team to uphold patients' beliefs while safeguarding their safety. Such behaviors exemplify the overarching idea of patient-centered care, whereby individual needs, values, and preferences are valued within the nursing process.

Nurses contribute to a courteous and encouraging pre-operative setting by combining ethical principles with comprehensive care. This approach encompasses treatment's physical and medical aspects and the emotional, spiritual, and cultural components of the patient's experience. It ensures that care is provided compassionately and morally soundly by strengthening the bond between the nurse and the patient. In doing so, nurses represent the fundamental principles of peri-operative nursing and play a crucial role in preparing patients for surgery with assurance, comprehension, and trust.

Nurses prioritize ethical principles by adhering to established policies and guidelines, thereby substantially mitigating the risk of errors and harm. As one participant asserts, "Syempre, pag... nag-follow ka ng mga ethical... aspect... syempre le-less ‘yong...mistake... Less ‘yong mga... harm sa pasyente syempre may sinusunod kang ethical policy or ethical something” (Of course, if you follow ethical aspects... naturally, mistakes will be reduced... There will be less harm to the patient because you're adhering to some ethical policy or ethical guidelines) (N1). This reveals that ethical adherence protects patient welfare by reducing risks and fostering trust in the care process. In addition to strengthening professional accountability among nurses, the methodical application of ethical standards guarantees that patient rights are continuously respected.

Ethical practice and holistic care in the pre-operative context are intertwined, especially when attending to patients' religious and cultural needs. Nurses prioritize respecting and acknowledging these beliefs, as evidenced by the participant's note: "When it comes sa mga... religion... INC na hindi pwede sa mga blood transfusion. Syempre kailangan kina-consider mo din... para at least hindi mo nalalabag 'yong... karapatan o 'yong paniniwala nung isang pasyente" (When it comes to religion..INC... who don't allow blood transfusion, of course, you also need to consider that... so at least you don't violate the patient's rights or beliefs) (N9). This regard for cultural and religious diversity enables nurses to uphold patients' autonomy while synchronizing care plans with their values. By being aware of these needs, nurses foster empathy and inclusiveness, critical to holistic nursing.

Furthermore, ethical and thorough nursing care is exemplified in the pre-operative environment, including obtaining informed consent and assessing the patient's history and religious beliefs. One participant note, "Like 'yong pagpirma ng consent bago 'yong operation. Tapos 'yong aalamin mo 'yong religion ng pasyente. Kasi tulad sa mga ibang religion bawal 'yong blood transfusion" (Like signing the consent before the operation. Then, you also need to know the patient's religion because, in some religions, blood transfusion is not allowed) (N10). This highlights nurses' deliberate efforts to ensure patients fully understand the treatment and its implications while respecting their cultural or religious restrictions. By highlighting the vital role of nurses in providing ethical, patient-centered pre-operative care, these actions reinforce ethical standards and build trust and collaboration between patients and the healthcare team.

Theme 3: Strict Observance of Sterility Protocols

Improving sterility procedures and safety standards for best surgical outcomes highlights the essential need to sustain a sterile environment and follow stringent safety precautions in the pre-operative context. This theme emphasizes the meticulous execution of protocols by nurses to avert infections, protect patient well-being, and guarantee favorable surgical results. Thorough preparation is required for sterility measures, which include sterile instrument handling, appropriate disinfection, and maintaining a clean operating environment. Safety standards include verifying patient identification, procedural details, and preparedness, ensuring that each step adheres to established protocols to reduce risks.

This theme highlights the essential role of nurses in establishing a safe and sterile environment as part of their pre-operative responsibilities in the study "The Lived Experience of Nurses in Delivering Peri-Operative Care." In addition to adhering to these procedures, nurses are expected to inform and emphasize their value to the surgical team. Their dedication to sterility and safety directly impacts patient outcomes, reducing the probability of problems and fostering trust in the treatment administered. The need for careful planning and collaboration in the peri-operative context, when every little detail affects the surgical procedure's outcome, is reflected in this theme.

In the pre-operative setting, augmenting sterility measures and safety standards is a crucial aspect of nursing care to guarantee good surgical outcomes. Nurses meticulously protect the sterility of the operating room, which is essential for all surgical operations. To minimize the danger of surgical site infections and avoid contamination, the operating room is maintained very sterile and clean. This entails regular cleaning and compliance with stringent disinfection protocols before and after each process. Since a sterile environment creates the conditions needed to perform surgical operations without introducing dangerous infections, nurses understand that it is essential for patient safety.

In addition to preserving a sterile operating room, nurses guarantee that all surgical equipment, linens, packs, supplies, and soaking materials comply with the necessary sterility requirements. Every surgical instrument is subjected to a rigorous process to guarantee compliance with the highest standards of sterility and cleanliness, essential for safe surgical operations. By closely following predetermined processes, the autoclave process guarantees that the instruments are completely sterile and safe for use. This thorough preparation guarantees that all surgical instruments support the highest standards of pre-operative care and promote patient safety. Nurses are accountable for ensuring that instruments and materials are adequately sanitized and contamination-free. This meticulous attention to detail is crucial to the preparatory procedure, guaranteeing that all surgical instruments foster a safe and sterile environment.

These practices demonstrate the nurses' dedication to enhancing safety and mitigating difficulties in the surgical environment. Nurses are essential in lowering the risk of infections and improving patient outcomes because they uphold strict sterility regulations and safety requirements. Their commitment to these practices shows the importance of their involvement in peri-operative care, where each action adds to a good surgical experience and the patient's total well-being.

Improving sterility procedures and safety standards is fundamental to nursing care in the pre-operative environment, as it guarantees that all facets of patient preparation are executed with accuracy and compliance with sterile practices. Nurses possess a profound understanding of the essential function of sterility in infection prevention and the protection of patient health. One participant asserts, "Dito kasi puro sterile lang eh. Basta as much as possible sterile 'yong gawin mo do'n sa pasyente, okay siya" (Here, it's all about being sterile. As long as you do everything sterile for the patient, it's okay) (N3). Ensure that all procedures performed on the patient are as sterile as possible since preserving sterility is fundamental to all pre-operative practices. This demonstrates the nurses' persistent commitment to establishing and maintaining a sterile environment to facilitate effective surgical results.

Additionally, nurses are aware of the serious consequences that might result from gaps in sterility, including potentially life-threatening infections. The sentiment, "Ah malaki ma'am kasi kung mula instrument hanggang pag-sterile ng area, kailangan alam mo kasi pag may mali kang gawin, kawawa 'yong pasyente. Kawawa patay" (Ah, it's significant, ma'am, because from the instruments to sterilizing

the area, you need to know what you're doing. If you make a mistake, the patient will suffer. Worse, they could die) (N3), stresses the significance of their duty in maintaining safety standards. To safeguard patients from harm, nurses diligently check that instruments, supplies, and the operating environment adhere to the utmost sterility requirements. Their attentiveness in this matter illustrates their dedication to patient safety and embodies the ethical obligation intrinsic to their role.

Nurses reduce risks and preserve the integrity of the surgical procedure by prioritizing sterility and safety standards. Their rigorous adherence to procedures and attention to detail are not just standard duties but crucial components of patient-centered care. This technique guarantees that patients have the utmost quality of care, exemplifying the professionalism and commitment of nurses in the pre-operative setting.

Intra-Operative Nursing Care

Theme 1: Ensuring Patient Safety

The intra-operative theme "Ensuring Patient Safety " focuses on maintaining patient safety during surgical procedures. Although they happen infrequently, intra- operative falls may cause serious harm to patients, prolonged hospital stays, and poor surgical results. By stressful alertness, communication, and the use of evidence-based safety procedures, this theme emphasizes the need for nurses to take a proactive approach. Nurses play a critical role in avoiding these accidents by keeping a close eye on the surgery site, ensuring patients are positioned correctly, and eliminating any dangers that might raise the risk of falls. Nurses actively reduce risks and strengthen the operating room's safety culture by working with the surgical team and using technology, such as positioning devices and monitoring systems.

This theme underscores the emotional and professional obstacles nurses face in safeguarding patient safety, as discussed in the research "The Lived Experiences of Nurses in Delivering Peri-Operative Care." It represents their moral duty to foresee and manage hazards, often necessitating increased situational awareness and prompt decision-making under pressure. In addition to demonstrating their flexibility and resilience, the proactive actions done by nurses also support theoretical frameworks that emphasize holistic and environment-focused care, such as Florence Nightingale's Environmental Theory and Jean Watson's Transpersonal Caring Theory. The research highlights nurses' vital role in promoting patient safety by highlighting their attempts to avoid intra-operative falls as a crucial component of their dedication to providing high-quality peri-operative care.

In the intra-operative setting, safeguarding patient safety to prevent intra-operative falls is crucial to nursing care. Nurses diligently supervise the transfer of patients to the operating table, ensuring that alert and conscious patients are securely positioned. Patients are more cooperative throughout the transfer since they are conscious, which lowers the chance of falling. Nurses place a high value on open communication, advising patients of important safety measures, including fastening their arms to the armrests of the operating table. In addition to preventing inadvertent movements, this approach promotes patient comfort and confidence by informing them of the safety protocols.

Nurses maintain vigilance and do not leave unconscious patients unsupervised during the intra-operative period. Continuous monitoring is necessary in the operating room to avoid unanticipated hazards like falls. Ensuring patient safety entails a proactive approach, including meticulously applying safety straps, positioning devices, and continuous monitoring. Nurses regularly check the patient's alignment to ensure that no body parts are in danger of sliding or hurting because of incorrect placement. By delivering safe, high-quality peri-operative care, the nurse upholds their ethical and professional commitment to patient safety, embodied in this attentive care.

The focus on ensuring patient safety throughout the intra-operative period demonstrates the proactive and careful strategies nurses use to reduce fall risks. These practices comply with safety regulations and embody a patient-centered care philosophy, guaranteeing that conscious and unconscious patients are handled with respect and the highest level of caution. Nurses play a vital role in protecting patients during surgery by being vigilant, working as a team, and following best practices. Success, with each member performing designated responsibilities to facilitate the procedure's seamless execution and protect the patient.

A nurse participant underscores the significance of collaboration in this situation, asserting, "Teamwork, ano... Functional naman kami. Ikaw 'yong... Ikaw ito 'yong gawin mo, ito 'yong gawin mo.. Para maano 'yong trabaho namin. At kung halimbawa, 'yong isa bantayan mo 'yong pasyente baka mahulog sa OR table, 'wag mong iiwan para... 'Yon nga. Functional... Flexible 'yong bawat isa sa'min" (Teamwork, you know... We are functional.

You do this, you do that... so that our work gets done. And, for example, one person watches over the patient to make sure they don't fall off the OR table; don't leave them alone so... that's it. We are functional... Each of us is flexible) (N4) . The preceding line illustrates the collaborative endeavor of the surgical team, whereby each member comprehends and executes their responsibilities proficiently. Nurses can take turns or assign responsibilities to ensure the patient is never left unattended because of the team's adaptability and efficiency. In addition to lowering the chance of falls, this proactive strategy promotes a culture of safety and responsibility in the operating room.

In addition to technical duties, intraoperative nursing care includes making the patient's environment safe. While keeping open lines of communication with their team, nurses use techniques such as employing safety straps and placing the patient's arms on armrests.

Nurses' dedication to patient safety is shown by their constant presence and monitoring, which shows how flexible and functional collaboration concepts improve their capacity to avoid falls. This smooth integration of attentiveness, teamwork, and patient-centered care best shows the essence of nursing in the intraoperative context.

Theme 2: Practicing Protective Measures

The intra-operative theme "Practicing Protective Measures" emphasizes the critical role of infection prevention and control within the operating room. The potential of transmissible illnesses during surgical operations presents a considerable danger to both patients and healthcare professionals. This theme emphasizes the need to follow rigorous aseptic protocols, use personal protection equipment (PPE), and maintain a sterile surgical environment to reduce these hazards.

Nurses play a vital role in ensuring constant adherence to procedures, including good hand hygiene, the wearing and doffing of PPE, and disinfection of instruments and equipment. The surgical team is kept safe from infectious agents by taking these precautions, protecting patients from post-operative infections.

This theme highlights the physical and mental challenges associated with upholding strict protective measures in the study "The Lived Experience of Nurses in Delivering Peri-Operative Care." PPE demonstrates nurses' dedication to ethical care and awareness of the serious risks of infectious diseases in surgical environments. Although wearing personal protective equipment (PPE) may be physically demanding, especially during long operations, it is an essential element of the nurses' job to ensure patient safety and public health. As a result, they fulfill their vital function in the surgical care team and represent a professional and ethical obligation to avoid injury.

In the intra-operative setting, the theme "Improving Protective Measures by Reducing Communicable Disease Hazards in Surgical Procedures" is essential to nursing care, as nurses actively use measures to reduce infection risks for patients and healthcare professionals.

\Double gloving is a common practice used while doing procedures on individuals who have known bloodborne illnesses. This measure lowers the possibility of infection transmission and shows how dedicated nurses are to keeping themselves safe. The use of supplementary personal protective equipment (PPE), including surgical masks and caps, enhances the protection of patients and the surgical team from possible contamination throughout the entire procedure.

The COVID-19 pandemic underscored the need for personal protective equipment (PPE), as nurses often used masks, caps, gloves, and sometimes additional protective gear such as face shields and gowns to reduce the spread of viruses. The nurses, patients, and other surgical team members are shielded from airborne infections by taking these precautions. Additionally, nurses strictly follow the right donning and doffing procedures, guaranteeing that safety precautions continue to work throughout the surgery. This cautious approach highlights the essential function of nurses in infection control in the operating room.

Furthermore, lowering the risks of communicable diseases requires efficient communication. Nurses do comprehensive inspections before the surgery, guaranteeing that the whole surgical team is informed of the patient's infectious condition and any particular safety measures that must be followed. This open and transparent exchange of information encourages teamwork and alertness, enabling the team to take the necessary precautions for the patient and themselves. These actions show how proactive and all-encompassing intra-operative nursing care is, with a strong emphasis on safety and dedication to maintaining strict infection control guidelines in surgical settings.

This is especially true when it comes to patients who have infectious diseases like syphilis (RPR positive) or Hepatitis B. A participant said, "Uhh...sa case naman po namin, usually ang mga ino-OR lang namin 'yong positive hepa B o kaya RPR, gano'n. Ang ginagawa lang naman namin is double protection lang, double gloving, mask, at saka cap lang" (Uhh... in our case, we usually only perform surgeries on patients who are positive for Hepatitis B or RPR. What we do is just double protection, like double gloving, wearing a mask, and a cap) (N7). These protocols demonstrate the proactive measures the nurses take to safeguard patients, coworkers, and themselves against possible exposure to bloodborne infections during surgical operations.

As nurses have the moral and emotional weight of protecting their immediate surroundings and their families from secondary exposure, the focus on protective measures extends beyond simple safety measures.

One participant expressed this fear, noting, "Sobrang ingat sa bloodborne diseases... iniisip mo baka ma-expose ang pamilya mo" (You're extremely careful with bloodborne diseases... you're thinking about the possibility of exposing your family) (N11). This illustrates that infection control is both a professional and profound personal responsibility for nurses. Their increased awareness highlights the importance of nursing care in lowering the risks of infectious diseases in the operating room.

Additionally, the nurses' consistent use of double gloving indicates their compliance with safety procedures. As another participant said, "Mostly kasi, 'yong mga patient na naha-handle natin dito, 'yong mga hepa patient... Ang ano lang do'n, uh, ano nga tawag do'n? Mm... Nakadouble ano lang kami... gloves" (Mostly, the patients we handle here are Hepatitis patients... What we do is, uh, what do you call it? Mm... We just wear double gloves) (N15). This simple yet efficient method demonstrates the nursing profession's flexibility and dedication to risk mitigation in high-stakes situations. When taken as a whole, these behaviors and attitudes demonstrate how nurses ensure infection control is effectively integrated into intraoperative care, protecting the health of all surgical participants.

Post-Operative Nursing Care

Theme 1: Maintaining Sterility in Post-Operative Wound Care

The theme "Maintaining Sterility in Post-Operative Wound Care" emphasizes the diligent efforts of nurses to preserve aseptic procedures throughout the crucial period of

post-operative care. The significance of maintaining a clean environment in preventing surgical site infections—a major problem in the healthcare industry—is emphasized by this theme. As the main care providers, nurses constantly ensure that evidence-based practices are followed, including hand cleanliness, the use of sterile equipment, and wound dressing guidelines. Nurses are committed to patient safety and recovery, which aligns with the larger objective of lowering hospital-acquired infections. Patients recovering from surgery have less physical and mental strain due to this attentiveness, promoting recovery.

In the context of the present study, "The Lived Experience of Nurses in Delivering Peri-Operative Care," this theme highlights the continuous challenges and duties that nurses have when it comes to maintaining sterility as a component of their work. The theme underscores nurses' ethical obligation and perseverance, highlighting their steadfast commitment to infection control despite limited resources or extended shifts. In creating a supportive atmosphere for peri-operative care, this perspective supports the study's findings on the importance of teamwork, mentoring, and ongoing education.

Since SSIs may seriously impede a patient's ability to recuperate and cause more physical, mental, and financial stress, this practice is essential to nursing care. Through strict adherence to sterile procedures, including hand washing, using sterile equipment, and applying wound dressings with care, nurses lower the risk of infection and promote a healing environment. Patients who acquire SSIs may encounter worry and frustration, extending their healing process, which nurses strive to alleviate via diligent care methods. The success of intraoperative and post-operative treatment strategies may also be questioned by the existence of an SSI, highlighting the surgical team's and post-operative nurses' joint accountability. Maintaining cleanliness in wound care guarantees that the high standards of the operating room are carried over smoothly into the recovery phase and shows nurses' dedication to professional excellence. This devotion instills trust and confidence in the nursing staff among patients. Patients are more inclined to provide good feedback when they see that their wounds are healing without infection, which enhances the credibility and reputation of the medical staff.

Additionally, doctors depend on the post-operative nursing staff to maintain the sterility and attention initiated during surgery. The nurse's benefit from a successful, infection-free recovery, and the surgeons and the operating room team do as well. Consistently preventing SSIs improves the healthcare team's collaborative dynamic, strengthening a surgeon's confidence in the nursing staff. Maintaining sterility is not just a clinical duty for nurses but also a means of demonstrating their commitment to providing high-quality care, which benefits patients and the larger healthcare organization.

The sterility principles that nurse carefully adhere to wound care to guarantee the best possible healing results are embodied in this practice. One participant highlighted, "Ah 'yon pong siguro 'yong mga in sterility gano'n uhh...syempre pagka alam mo 'yong mga principles ng ano ma- 'yong...pag post-op ma-ano mo sa pasyente na 'yong pagka- sa dressing nila sterile po." (Ah, maybe it's about sterility, like that... Of course, if you know the principles, when it comes to post-op, you can ensure for the patient that their dressing remains sterile)(N2). This statement emphasizes the importance of fundamental knowledge and sterile method adherence, which is essential for keeping a clean and infection-free environment when caring for wounds.

Post-operative wound care requires technical proficiency and assurance of patient security and confidence in their recovery. By maintaining sterility, nurses show their patients they are dedicated to their professional standards and welfare. An infection-free wound shows that nurses are using the right methods, improving how patients see their treatment. This corresponds with the participant's assertion, emphasizing the actual implementation of sterility standards to maintain contamination-free dressing operations. Nurses may immediately aid with the patient's physical recovery and mental comfort by emphasizing sterility, which lessens the worry that comes with problems like SSIs.

Additionally, keeping everything sterile shows the team's integrity, including the surgeons and operating room personnel. When there are no surgical site infections (SSIs) in post-operative patients, surgeons are more confident in the nursing team's proficiency and commitment to infection control. This collaboration elevates the quality of patient treatment and bolsters the healthcare facility's reputation. As seen by the participant's understanding of the significance of sterility in post-operative wound care, nurses play a critical role in attaining these results via their steadfast dedication to sterile procedures.

Pre-operative nursing care is essential for preparing patients for surgery, as it matches their informational, emotional, and physical requirements. The practice of patient autonomy via full informed consent is essential to this phase because it enables people to make knowledgeable choices about their treatment, as the first theme, "Practicing Patient Autonomy Through Thorough Informed Consent," states.

Nurses play a crucial role in empowering patients throughout the pre-operative period by ensuring that patients are properly educated on the surgical process, related risks, and anticipated results. Gardiner et al. (2023) strongly support this method, stressing the need for patient education and clear communication in gaining consent. The research emphasizes how comprehensive explanations catered to the patient's comprehension level promote trust between patients and healthcare professionals and enhance autonomy. Hanssen et al.

(2020) highlight the moral duty of nurses to act as patient advocates by answering their concerns and assisting them in making knowledgeable choices regarding their healthcare. This topic, which focuses on encouraging collaborative decision-making and lowering patient anxiety before surgery, emerges as a pillar of pre-operative nursing care in the lived experiences of peri-operative nurses.

Additionally, pre-operative nurses cater to patients' emotional and psychological needs in conjunction with their physical care, highlighting the importance of ethical practices and holistic care, as reflected in the theme "Trying to Maintain Ethical Standards." Jeon et al. (2023) talk about how important it is to uphold ethical norms, especially when honoring cultural and religious views that might affect a patient's decision-making before surgery. By demonstrating how nurses provide compassionate care, particularly in emotionally charged circumstances like organ donation procedures, Smith (2020) further supports this concept. The lived experiences of nurses demonstrate that empathy and resilience are necessary to balance moral concerns and the pressing need for surgical preparations. Nurses fulfill their ethical responsibilities by attending to patients' holistic requirements while preparing them for physical and mental surgery. This highlights the need for moral and patient-centered pre-operative care.

Lastly, the theme "Strict Observance of Sterility Protocols" underscores that the foundation of pre-operative nursing is the maintenance of sterility and adherence to safety protocols, which directly influence surgical outcomes. Pre-operative nurses carefully prepare the operating room to reduce infection risks and guarantee adherence to evidence-based sterility measures, as Peñataro-Pintado et al. (2021) noted. Further information on nurses' attention to skin preparation and equipment cleaning is given by Markström et al. (2020), who emphasize the proactive role that nurses play in reducing surgical site infections. These results are supported by the lived experiences of nurses providing peri-operative care, highlighting the significance of comprehensive evaluations, precise documentation, and strict adherence to safety protocols. Nurses help provide the best surgical results and uphold their vital role in protecting patient health by prioritizing sterility and safety throughout the pre-operative phase.

The study's pre-operative nursing care themes are "Practicing Patient Autonomy Through Thorough Informed Consent," "Trying to Maintain Ethical Standards," and "Strict Observance of Sterility Protocols." also closely correspond with the theories applied in "The Lived Experience of Nurses in Delivering Peri-Operative Care." Jean Watson's Transpersonal Caring Theory highlights the profound, comprehensive bond between nurses and patients, and it is shown in the work to respect patients' autonomy and uniqueness while empowering them via informed consent. The emphasis on keeping a sterile and secure atmosphere is supported by Florence Nightingale's Environmental Theory, which acknowledges the vital role that a clean and regulated environment has in patient outcomes and recovery.

To ensure ethical standards and comprehensive care during the pre-operative period, Virginia Henderson's Need Theory emphasizes the nurse's responsibility in attending to basic patient needs, such as safety, communication, and emotional support. Similarly, Dr. Carol L. Montgomery's Theory of Caring emphasizes the value of tailored, compassionate treatment that resonates with honoring patients' well-being, beliefs, and choices. When taken as a whole, these theories provide a strong foundation for comprehending how pre-operative nursing care combines technical, emotional, and ethical aspects to improve patient outcomes and promote cooperation and trust during surgery.

Together, these themes highlight the complex function of pre-operative nursing care, where a comprehensive strategy for surgical preparation is produced by combining ethical behavior, patient-centered communication, and clinical accuracy. Through comprehensive informed consent, patient-centered communication promotes comprehension, trust, and autonomy while guaranteeing that patients are actively involved in their treatment. This gives patients the ability to make educated choices about their care, resolving their worries and lowering anxiety—two important factors during the delicate pre-operative period.

Respecting patients' values, beliefs, and specific needs is crucial, and ethical practice ensures that treatment is provided with compassion, equity, and cultural awareness. Nurses preserve ethical norms by supporting patient rights, encouraging openness, and striking a balance between patients' psychological and emotional needs and the clinical needs of surgical operations.

Clinical precision, which includes strict adherence to safety regulations and sterility norms, signifies the technical understanding and attention to detail needed in pre-operative nursing care. By adhering to established protocols, nurses mitigate problems such as infections and enhance surgical results. Together, these components provide a smooth and thorough preparation procedure that guarantees patient safety and cultivates a courteous and encouraging care environment, underscoring nurses' vital role in the surgical process' success.

In Intra-Operative Nursing Care, "Ensuring Patient Safety" emerged as the first theme, highlighting the essential role of the nurse in proactively protecting patients from falls and positioning-related injuries during the intra-operative period. "The Lived Experience of Nurses in Delivering Peri-Operative Care" emphasizes the meticulous efforts of nurses in stabilizing patients on the operating table, ensuring proper alignment, and utilizing safety restraints to safeguard them during procedures. These results are consistent with those of Peñataro-Pintado et al. (2021), who stress the value of systematic inspections and cooperative collaboration in reducing the hazards related to intra-operative mobility and patient transfers. By assessing patient-specific risks like age, comorbidities, or restricted mobility, nurses may also foresee issues and tailor actions to ensure patient safety. In an atmosphere of constant activity and high stakes, these proactive actions show how nurses behave as watchful patient well-being advocates.

In the same way, the second theme, "Practicing Protective Measures," emphasizes the pivotal contribution of intra-operative nurses in reducing the spread of infectious diseases during hospitalization through meticulous compliance with infection prevention guidelines. The research highlights their attention to detail in guaranteeing the sterility of tools, upholding aseptic procedures, and keeping an eye on compliance with appropriate surgical clothing. Accardo et al. (2021) support these practices by emphasizing ways to reduce exposure to airborne pathogens in operating rooms. Nurses mitigate contamination risks by double-checking compliance with hand sanitation protocols and promptly addressing violations in sterility. Ebrahiem Elsayed Aboelfetoh and Talaat Shakweer (2021) emphasize educating and following protocols, reinforcing intra-operative nurses' vital role in establishing a safe surgical environment. By regularly implementing these preventative measures, nurses help to reduce infection rates and encourage successful surgical results.

The themes of intra-operative nursing care—"Ensuring Patient Safety" and "Practicing Protective Measures" are closely aligned with the theories employed in the study "The Lived Experience of Nurses in Providing Peri-Operative Care." are closely aligned with the theories employed in the study "The Lived Experience of Nurses in Providing Peri-Operative Care." Holistic care is emphasized by Jean Watson's Transpersonal Caring Theory, which also highlights the nurse's responsibility to provide patients with a nurturing and secure atmosphere. Nurses exemplify Watson's idea of creating a secure, courteous, and healing environment by aggressively reducing intraoperative falls and addressing the risks of infectious diseases. This approach meets the patient's physical, emotional, and ethical requirements.

Florence Nightingale's Environmental Theory is closely related to these themes since it emphasizes the need for a safe and regulated environment to support health and avert damage. By reducing the danger of falls and upholding aseptic conditions to avoid infections, nurses contribute to a safe intraoperative environment, exemplifying Nightingale's theory that a clean atmosphere is essential to patient safety and healing. Likewise, Virginia Henderson's Need Theory emphasizes the nurse's responsibility to attend to the fundamental needs of patients, such as safety and protection from harm. These measures demonstrate the satisfaction of patients' dependence demands in the intraoperative context, guaranteeing their safety and dignity during a period of vulnerability.

The themes underscore the complex role of intra-operative nursing care in attaining surgical excellence. In addition to providing technical assistance, it recognizes that intra-operative nurses play a critical role in the overall effectiveness of surgical treatments. Nurses address each patient's requirements and vulnerabilities by emphasizing patient-centered safety measures. These include monitoring for discomfort signals during surgery, ensuring patients are properly aligned to minimize pressure ulcers, and situating patients to prevent falls or accidents. By protecting both the short-term and long-term results, these acts show their responsibility as patient advocates.

Including infection control procedures emphasizes the importance of nurses reducing the dangers of communicable diseases. Nurses strictly adhere to aseptic techniques, sterilization protocols, and personal protective equipment to guarantee that surgical environments are pathogens-free. This vigilance protects the patient and the healthcare team, reducing post-operative complications and facilitating recovery.

The themes also emphasize the significance of collaborative vigilance—which entails smooth coordination with surgeons, anesthesiologists, and other operating room personnel. Through proactive risk assessment, timely problem-solving, and continuous communication, nurses support a culture of safety.

Lastly, the integration of technical proficiency and dedication to patient-centered care highlights the distinct skill set of intra-operative nurses. Their commitment to the patient's care equals their expertise in surgical techniques, instruments, and protocols. Together, these factors guarantee the technical success of operations and the patient's mental and physical health throughout the procedure.

In essence, intraoperative nurses are essential in providing high-quality surgical care and advancing the field of peri-operative nursing, as they exemplify the intersection of precision, compassion, and professionalism.

Lastly, the post-operative nursing care theme "Maintaining Sterility in Post-Operative Wound Care" underscores its significance in avoiding infections and aiding patient recovery. The study "The Lived Experience of Nurses in Delivering Peri-Operative Care" underscores nurses' meticulous attention to the stringent adherence to aseptic techniques when managing surgical incisions. This supports the results of Markström et al. (2020), who emphasize nurses' vital role in minimizing contamination risks by using evidence-based techniques for skin preparation and dressing changes. To prevent complications, nurses ensure that wound sites are evaluated and treated in sterile settings. Additionally, Ebrahim Elsayed Aboelfetoh and Talaat Shakweer (2021) emphasize the need for ongoing training on standard precautions that allow nurses to maintain strict sterility standards in wound care.

Beyond their technical abilities, nurses are responsible for educating patients on the proper use of wound care at home. This commitment to infection prevention embodies the comprehensive care philosophy that characterizes the nursing profession in addition to clinical accuracy.

The theme "Maintaining Sterility in Post-Operative Wound Care" strongly aligns with the nursing theories in the present study, "The Lived Experience of Nurses in Delivering Peri-Operative Care." Jean Watson's Transpersonal Caring Theory highlights the comprehensive relationship between nurses and patients, where infection prevention turns into a compassionate act that fosters emotional and physical healing. Maintaining cleanliness allows nurses to show their dedication and compassion, which builds trust and

supports the healing atmosphere Watson promotes. Florence Nightingale's Environmental Theory also emphasizes the significance of a sterile and clean atmosphere in fostering health. Nurses' careful post-operative wound care embodies Nightingale's ideals by ensuring the patient's environment is free of harmful microbes and supportive of healing.

The Need Theory of Virginia Henderson, which addresses the fundamental nursing function of helping people with activities that promote health and recovery, lends more credence to this idea. Sterile wound care reinforces the nurse's position as a vital healthcare provider by immediately meeting the patient's basic safety and infection prevention demands. The Theory of Caring by Dr. Carol L. Montgomery, which emphasizes the relational component of nursing, also speaks to this issue. Sterility in wound care is a prime example of a nurse's ethical commitment to providing high-quality care and fostering enduring, trusting relationships with patients. Together, these ideas provide a thorough foundation for comprehending how nurses incorporate concepts of sterility.

This theme emphasizes how post-operative nursing care plays various roles in helping patients recover smoothly and effectively. Post-operative nursing care is fundamentally a dynamic integration of clinical precision, ethical practice, and patient-centered communication, all necessary to attain optimal surgical outcomes. To ensure that patients and their families feel educated and supported throughout the crucial recovery period, nurses play a crucial role in promoting trust and open communication. Focusing on the patient's needs supports adherence to wound care routines and recovery strategies while reducing stress and empowering individuals to engage in their treatment. Ethical conduct is also essential to post-operative care since nurses often must balance clinical judgments and patients' unique needs, beliefs, and preferences. Since avoiding infection is crucial to safeguarding the patient's health, nurses' constant commitment to upholding sterility in wound care reflects their ethical commitment to "not harm." As nurses carefully follow evidence-based wound care and infection prevention guidelines, they demonstrate clinical precision and ensure that every intervention helps the patient heal safely and quickly.

Furthermore, as a fundamental component of post-operative care, patient education allows the nurse to play a role beyond the immediate clinical setting. Nurses provide patients and their families with the skills they need to continue their rehabilitation at home by educating patients about good hygiene, clothing practices, and early infection symptoms. By highlighting the value of shared responsibility in the healing process, this educational initiative lowers the risk of complications and improves the relationship between patients and healthcare professionals.

Post-operative nursing care accomplishes its aim of supporting patients' transition toward complete recovery with dignity, safety, and the highest standards of care via the smooth integration of communication, ethics, and clinical knowledge. This holistic approach guarantees that patients receive the necessary care and support to aid their recovery and the technical treatments essential for their healing.

Conclusions

The study concludes that peri-operative nursing is a critical, multifaceted component of healthcare, demanding a seamless integration of technical expertise, ethical conduct, and patient-centered care. Nurses play an indispensable role across all stages of surgical care—pre-operative, intraoperative, and post-operative—demonstrating a strong commitment to patient safety, autonomy, and holistic well-being. Their capacity to adapt to complex challenges, such as addressing cultural and ethical considerations and enforcing rigorous infection control, underscores the depth and breadth of their responsibilities.

In the pre-operative phase, nurses uphold ethical standards through their advocacy for informed consent and respect for patient autonomy. They cultivate inclusive, respectful environments by integrating patients' cultural and religious values into care plans, fostering trust and satisfaction. Their meticulous preparation of sterile environments and adherence to safety protocols further reflect their dedication to optimal surgical conditions.

During the intraoperative phase, nurses display vigilance and proactive risk management to minimize patient harm, particularly in fall prevention and infection control. Their strict compliance with aseptic techniques and effective collaboration with surgical teams highlight the intricate balance of technical precision and interpersonal coordination required in high-pressure settings. Their role as health and safety advocates is especially evident in their rigorous efforts to prevent the transmission of communicable diseases.

Post-operatively, nurses continue to prioritize patient recovery by maintaining sterility in wound care and preventing surgical site infections (SSIs). They empower patients through education, promoting shared responsibility and active engagement in the healing process. This holistic approach underscores that peri-operative care extends beyond technical execution to include emotional and psychological support.

Ultimately, the study affirms that peri-operative nurses are central to delivering ethical, safe, and effective surgical care. Their work is both technically demanding and deeply relational, embodying professionalism, compassion, and scientific knowledge. To sustain these high standards, the study highlights the necessity for multidisciplinary collaboration, institutional backing, and continuous professional development.

Considering the study's findings, several key recommendations are proposed to enhance peri-operative nursing practice and improve patient outcomes. First, pre-operative communication and cultural competency should be strengthened through regular training on informed consent, effective communication, and cultural sensitivity, alongside the implementation of standardized protocols for

verifying patient identity and consent. To improve intraoperative care, hospitals should prioritize interdisciplinary training focused on teamwork, role clarity, and crisis management, while also ensuring consistent access to personal protective equipment (PPE) and conducting regular drills to reinforce aseptic techniques and infection control. Post-operative wound care practices should be advanced by emphasizing evidence-based techniques in ongoing professional development, ensuring nurses are equipped with the latest knowledge to prevent surgical site infections and support recovery. Supporting nurses' mental health and workplace well-being is also crucial, and institutions should create peer support systems, mentoring programs, and structured debriefings to address emotional challenges, while also tackling systemic issues like staffing shortages and long work hours to prevent burnout. Finally, integrating theoretical models such as Nightingale's Environmental Theory and Watson's Transpersonal Caring Theory into clinical practice and training can help align nursing care with foundational values of empathy, integrity, and excellence. Collectively, these recommendations aim to raise the standard of peri-operative nursing, foster professional growth, and adapt to the dynamic needs of patients and healthcare systems.

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