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978-1-108-81980-0 — Fundamentals of Operating Department Practice 2nd Edition

Edited by Daniel Rodger , Kevin Henshaw , Paul Rawling , Scott Miller

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Fundamentals of Operating Department Practice

Second Edition

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Foreword

For educators in operating department practice like myself, the previous edition of this book has always been recommended reading for my students. Those involved in editing and contributing to it played a significant role in the education and development of the profession. Since then, the profession has been through many changes, which have included registration with the Health and Care Professions Council (HCPC), moving from a National Vocational Qualification (NVQ) to a degree award which will become the new threshold for qualification as an operating department practitioner.

Operating department practitioners became eligible to join the HCPC register in 2004 and with these changes came greater legal responsibility and accountability regarding controlled drugs, for instance. Among other changes in practice, we also saw the introduction of terms like ‘never event’ and the World Health Organization Surgical Safety Checklist, and a greater emphasis on patient safety. It was therefore time for a new team to inform and prepare the current and future generation of operating department practitioners and nurses wishing to embark on a career in perioperative care.

This new edition takes the reader on a helpful journey through the attributes, knowledge, and skills required to excel in the perioperative environment. Perioperative care is sometimes viewed as very technical, where patients for the greater part, are unconscious and require very little ‘care’. However, from the offset, we are informed that caring perioperative practitioners are essential to the well-being and safety of the patient. The inclusion of evidence-based practice is a sign of maturity within the perioperative professions – no longer are our actions based on ‘ritualistic practices’ but on ‘a sound evidence base’. The discussion of healthcare ethics, the law, health and safety, operating department design, and infection prevention form the foundations on which the other chapters are built. They are subjects that are factual and can be very dry; however, the contributors cite examples that help to relate each subject to healthcare and the perioperative setting. Although fundamental, these chapters can be revisited as greater experience and understanding is achieved.

Those delivering perioperative education to more experienced students can also use many of the chapters in this edition as the basis for interactive workshops, debates, and discussion. From exploring ethical and legal dilemmas in perioperative care to redesigning an operating department, meeting the increased demands of surgical provision, and exploring how to cope emotionally after the death of a patient in the operating theatre. If the above chapters form a foundation, the chapters on physiology create a base layer. It is important to understand that alongside anaesthetists and surgeons, perioperative practitioners need to be knowledgeable and be experts in their own area. These chapters will also be very useful to those extending their practice to critical care areas, something that is becoming more common and will only increase in the future.

Operating department practice has evolved since the publication of the first edition in 2000. Many of the chapters in this book make up the core components of operating department practice which have existed for decades, and this edition blends this history and unchanging principles with updated practices based on up-to-date evidence. Previously, ‘human factors’ were rarely a consideration within the perioperative setting; however, they now underpin our actions, behaviour, and professional practice when caring

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for patients. There are greater challenges encountered relating to patients’ health and lifestyle, and so today’s perioperative practitioners are required to understand and plan the care of these patients. The multidisciplinary team has always been present within the operating department. However, the ongoing flattening of hierarchy has meant that the non-medical members of the team are or should be more empowered to influence best practice and have an obligation to do good in so far as possible.

It could be argued that, aside from management and education, career progression was limited, certainly for operating department practitioners 20 years ago. However, this is increasingly no longer the case and there are now many new opportunities, both outside and within the space that operating department practitioners have historically resided. For instance, there are several extended and advanced clinical roles that have been created within the operating department itself. Moreover, these roles are being undertaken by registered operating department practitioners and nurses who have completed the required programmes of study.

Operating department practice has continued to evolve and adapt along with the environment and demands. This new edition will be of interest to, and a valuable resource for, operating department practice students, post-registration nurses, student midwives, and anyone else looking to work in the operating department and I highly recommend it.

John Dade
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