

Nursing assistance in the surgical center: Humanized and scientific care

RESUMO | Objetivo: Relatar a assistência de enfermagem no centro cirúrgico na perspectiva do cuidado humanizado. Método: É um estudo de revisão sistemática da literatura, onde foram utilizados elementos da estratégia PICO, mediante perguntas norteadoras. Foram selecionados artigos nos bancos de dados online LILACS, MEDLINE e SciELO, realizada no mês de março de 2022 e destes, 10 artigos foram escolhidos para nossa pesquisa. Resultados: A literatura aponta a importância do acolhimento no centro cirúrgico de maneira humanizada, como modo de acolher os usuários de forma holística, proporcionando assim, uma relação de confiança. Observou-se também algumas ações que tornam a prática de humanização falha pelos profissionais: a sobrecarga de trabalho, exigências burocráticas, alta rotatividade dos usuários. Conclusão: Conclui-se que a prática da humanização no centro cirúrgico ofertada pela equipe multidisciplinar oferece ao paciente mais segurança, acolhimento e um olhar holístico, favorecendo a confiança e a proximidade com esses profissionais.

Descritores: Enfermagem, Cirurgia, Humanização, Saúde.

ABSTRACT | Objective: To report the nursing care in the surgical center from the perspective of humanized care. Method: This is a systematic literature review study, where elements of the PICO strategy were used, through guiding questions. Articles were selected in the online databases LILACS, MEDLINE and SciELO, held in March 2022 and of these, 10 articles were chosen for our research. Results: The literature points to the importance of welcoming in the surgical center in a humanized way, as a way of welcoming users in a holistic way, thus providing a relationship of trust. It was also observed some actions that make the practice of humanization fail by professionals: work overload, bureaucratic requirements, high user turnover. Conclusion: It is concluded that the practice of humanization in the surgical center offered by the multidisciplinary team offers the patient more security, reception and a holistic view, favoring trust and proximity to these professionals.

Keywords: Nursing, Surgery, Humanization, Health.

RESUMEN | Objetivo: Relatar el cuidado de enfermería en el centro quirúrgico bajo la perspectiva del cuidado humanizado. Método: Se trata de un estudio de revisión sistemática de la literatura, donde se utilizaron elementos de la estrategia PICO, a través de preguntas orientadoras. Se seleccionaron artículos en las bases de datos en línea LILACS, MEDLINE y SciELO, realizadas en marzo de 2022 y de estos, 10 artículos fueron elegidos para nuestra investigación. Resultados: La literatura señala la importancia de la acogida en el centro quirúrgico de forma humanizada, como forma de acoger a los usuarios de forma holística, propiciando así una relación de confianza. También se observaron algunas acciones que hacen fracasar la práctica de la humanización por parte de los profesionales: sobrecarga de trabajo, requisitos burocráticos, alta rotación de usuarios. Conclusión: Se concluye que la práctica de humanización en el centro quirúrgico ofrecida por el equipo multidisciplinario ofrece al paciente más seguridad, acogida y una visión holística, favoreciendo la confianza y cercanía con estos profesionales.

Palabras claves: Enfermería, Cirugía, Humanización, Salud.

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INTRODUCTION

The Surgical Center is a unit that encompasses a set of elements and activities aimed at performing surgical procedures, post-anesthetic recovery and the immediate postoperative period. ⁽¹⁾ It is considered a complex sector as a result of its particularities pertaining to the work process. ⁽¹⁾ Its structure allows procedures to be performed within safety and asepsis standards, benefiting risk control. ⁽²⁾

To maintain standardization, the National Health Surveillance Agency (ANVISA - Agência Nacional de Vigilância Sanitária) formulated the resolution, RDC n°. 50, which provides for the technical regulation for planning,

programming, elaboration and evaluation of physical projects of health care establishments. Containing the norms that define the physical structure of the surgical center and its characteristics, regarding the number of rooms, corresponding to the number of general and surgical beds in the hospital, colors, textures and characteristics of floors, walls, windows, doors, among others, still in force in Brazilian legislation.⁽³⁾

With the objective of controlling infection, the Surgical Center is a restricted sector, divided into a critical area, with restricted movement of people and equipment, with routines to maintain asepsis, such as the operating rooms. A semi-critical area in which people can circulate with the proper attire specific to the sector, such as pantries and a satellite pharmacy; and a non-critical area, where there can be normal circulation, without the private clothing of the sector, as an example we have the barrier changing rooms.⁽⁴⁾

The complexity of the sector requires specific care and knowledge, with specialized and multidisciplinary teams, basically comprising a nursing team, including nurses and nursing technicians, medical staff, represented by surgeons and anesthesiologists, radiology, pharmacy and laboratory technicians, surgical instrument technicians, administrative assistant and cleaning team.⁽⁴⁾ The work performed by the multidisciplinary team is important to achieve the objective of safe surgical care.⁽⁵⁾

The nursing care performed in the Surgical Center comprises a process that involves the perioperative care of the patient, the management of material and human resources, techniques for preparing operating rooms, surgical equipment and instruments, assistance and preparation of the material necessary for the anesthetic procedure, assistance in the PARR - Post-Anesthetic Recovery Room, and safe referral of the patient to the inpatient unit. The

perioperative context comprises the immediate preoperative, intraoperative, intraoperative and immediate postoperative period.⁽⁴⁾

The Nurse is fundamental in the execution of organized and planned actions for the perioperative care of the patient, and must consider humanized reception and care strategies. Nursing actions through individualized planning are able to improve patient care from admission to hospital discharge.⁽⁶⁾

Being a restricted access sector, especially for companions, makes the Surgical Center a place that demonstrates coldness, with technical and impersonal service. Therefore, obstacles such as the lack of communication with the patient and between the team must be overcome, establishing effective communication, cooperative work and compliance between the teams, so that more humanitarian conduct can come from all.⁽⁷⁾

The Sobecc⁽⁴⁾ recommends that the PNCS (Perioperative Nursing Care Systematization) be applied, which is a work methodology that integrates individualized, planned, documented and evaluated actions, allowing a more humanized care for the patient. It is also recommended actions such as clarifying doubts of the patient and family, always calling the patient by name, accompanying him on his way to the room and helping with the processes of preparation for surgery, always ensuring privacy, avoiding unnecessary exposure, among others that helped to minimize anxiety, anguish and make the process more pleasant.

As technology advances, surgical nursing advances the need for more learning, specialization in search of processes that minimize risks to patient health and safety, making research in this area of fundamental importance. The objective is: To report the nursing care in the surgical center from the perspective of humanized care.

METHOD

The present study is a systematic review of the literature. In this study, we used the PICO strategy, which is formed by fundamental elements of the research question and the construction of the question for the search for published articles. With this, the research question was defined according to the elements using the PICO strategy: P - Patient in the operating room, I - Nursing care, C - patients who receive humanized care in the surgical center, O - patients are expected to receive good nursing care in the surgical sector. In view of this, the following guiding question was elaborated: How is nursing care provided from the perspective of humanized care for patients in a surgical center?

After elaborating a guiding question, the bibliographic search began in March, in the year 2022. Data collection began with the evaluation of articles through readings in order to select those that met the research objectives. The research was carried out in articles, journals, publications, portals and reference databases, such as: Portal de Periódicos da CAPES, Latin American and Caribbean Literature in Health Sciences - LILACS, Medical Literature Analysis and Retrieval System Online - MEDLINE, Google Scholar and Scientific Electronic Library Online - SciELO.

For the elaboration of this article, the following inclusion criteria were adopted: publications in the form of article, full text, that addressed nursing care in the surgical center, available in Portuguese, published in the period from 2012 to 2022. On the other hand, publications such as: theses, dissertations, monographs, case reports, experience reports, reviews, manuals, previous notes, duplicate publications, articles written in a different language than the one chosen for refinement and any articles that did not address the theme were excluded from the sample.

The research was carried out by

crossing the Health Science Descriptors - DeCs and the Medical Subject Headings (MeSH) for the research to be effective, the descriptors were selected: "Nursing (Enfermagem)" "Surgery (Cirurgia)", "HUMANIZATION (Humanização)" "Health (Saúde)" which were combined with the Boolean operator

"AND". 350 publications were found with these descriptors, and of this total, 10 publications were selected on the subject, after the filtering and selection process, excluding publications that did not comply with the inclusion criteria of this research.

RESULTS

The publications were organized in the table below, with the help of the Microsoft Word program, in which the information that characterizes the materials found was exposed, according to: authors, titles, year of publication,

CHART 1 - Presentation of publications regarding nursing care in the surgical center:

Authors	Title	Year of publication	Journal	Humanized and scientific care in nursing care in the surgical center
BERNARDES, L.H; QUINTILIO, M. S. V.	Humanization of Nursing in the Surgical Center: The importance of nurses. (Humanização da Enfermagem em Centro Cirúrgico: A importância do enfermeiro.)	2021	Revista JRG de Estudos Acadêmicos.	The procedures performed in the Surgical Centers bring a high factor of anxiety and stress to the patients, which requires nurses who work in this environment to be committed to the humane treatment of their clients, providing from emotional comfort to physical comfort, ensuring a faster and more comfortable recovery.
LUZ, B.R.; SOUZA, J.S.M.	Humanization in the Surgical Center: Perception of the Nursing Team (Humanização no Centro Cirúrgico: Percepção da equipe de Enfermagem)	2020	Revista Expressão Católica Saúde.	The study highlighted the work overload, inadequate physical structure of the sector, bureaucratic requirements and lack of training, as difficulties encountered in the SC by professionals to provide humanized care.
TOMAZELLI, J.T.; SALVI, E. S. F.; POMPERMAIER, C.	Humanization in the Surgical Center (Humanização no Centro Cirúrgico)	2020	Anuário Pesquisa e Extensão UNOESC Xanxerê.	Humanization within the SC can be linked at different times, whether at the reception, during the presentation of the health professional who will take care of the patient, when the user is in the operating room, during anesthesia, enabling a bond with the team and building trust and closeness.
um BREZOLIN, C. A. et al.	The importance of humanization of care in the operating room. (A importância da humanização do cuidado em centro cirúrgico.)	2020	Saúde em Redes.	Mechanization of care can compromise humanized care and technology seems to contribute in a negligible way to the practice of humanized care.
RIBEIRO, E.; FERRAZ, K. M. C.; DURAN, E. C. M.	Attitudes of Surgical Center Nurses Facing the Systematization of Perioperative Nursing Care (Atitudes dos Enfermeiros de Centro Cirúrgico Diante da Sistematização da Assistência de Enfermagem Perioperatória)	2017	Revista SOBECC	Attention to elements of subjectivity was described in the study as a way to implement humanized nursing care.
GIRON, M. N.; BERARDINELLI, L. M. M.	Knowledge in Nursing about Humanization in the reception of the user in the Surgical Center: integrative review (O Conhecimento em Enfermagem sobre Humanização na recepção do usuário no Centro Cirúrgico: revisão integrativa)	2015	Revista de Enfermagem UFPE	Attention to elements of subjectivity was described in the study as a way to implement humanized nursing care.
ADAMY, E. K.; TOSATTI, M.	Systematization of Nursing Care in the perioperative period: view of the nursing team (Sistematização da Assistência de Enfermagem no período perioperatório: visão da equipe de enfermagem)	2012	Revista de Enfermagem da UFSM	Progress in relation to patient safety, the possibility of knowing the patient in a holistic way, is one of the ways to provide care in a humanized way.

SOURCE: Survey data, 2022.

periodical and the points related to humanized and scientific care in nursing care in the Surgical Center.

Regarding the year of publication, there is a greater number of publications in the year 2020 with three studies, and the others only one publication per year. There was no higher incidence of publication in any of the journals, with each article being published in a different journal.

In view of the selected material, it became evident that by adopting humanization in the nursing care provided to patients in the Surgical Center environment, nursing professionals are able to offer comprehensive care to their patients, coming to understand them in their entirety, not just focusing on the disease or surgical procedure to be performed, making a difference in care.

DISCUSSION

There is little research in the Surgical Center (SC) on humanization, probably due to the difficulty in defining descriptors to search for scientific research or because it is an area with little research on this topic. In the works that exist, there is an emphasis on biological aspects, characterizing the service, in an excessively positivist approach, with the subjectivity of subjects who undergo surgical procedures being little explored.⁽⁸⁾

Other authors corroborate the idea that reception is one of the pillars of humanization of care, including in the perioperative period. To welcome, health professionals need to be present, in order to meet the needs of users, in addition to physical and biological issues, as it involves the subjectivity of the human being, such as feelings, anxieties, fears, anguish and anxiety.^(8,9,10)

The high turnover of users, the short time they stay in the operating room and bureaucratic activities are factors that contribute to the professionals'



The nurse is the professional who organizes, plans, develops the routine of the sector, coordinates the team, assists in care and resolves the bureaucratic part of the sector. In the surgical center area, the nurse has some specific functions, such as collaborating in the pre, intra and postoperative period, ensuring that hygiene, sterilization, materials and equipment used in surgeries are within the appropriate parameters.



attitudes that are not humanized.⁽¹¹⁾ Giron and Berardinelli, also state that the nursing team does not provide the expected assistance to users who will undergo surgery, however, users need to receive individualized care, having their diagnosis and pathology identified and treated in a correct and humanized way.⁽⁸⁾

Ribeiro, Ferraz and Duran, emphasize the importance of the nursing process in customer service, thus favoring an integrated, continuous, safe and humanized care. In the operating room, this instrument is called Perioperative Nursing Care Systematization (PNCS), and has five stages: 1- Preoperative nursing visit; 2- Planning of assistance during the operative period; 3- Implementation of assistance; 4- Postoperative visit to evaluate the assistance; 5- Reformulation of assistance.⁽¹²⁾

The first stage of the PNCS is extremely important, since the presentation of the health professionals who will take care of the user in the surgical center during and after the surgery, it is a measure of humanization, important in creating a bond between the health team and the person who will receive care, thus building a relationship of trust.⁽¹¹⁾

However, research points to difficulties in implementing the SAEP and humanized care, they are: Little time available for the implementation of the NCS (Nursing Care Systematization), as there is a lot of administrative demand; Lack of staff; Lack of training of the nursing team; Lack of mastery of the physical examination; Inexistence of a hospital protocol that coordinates its implementation and a specific visit form; Lack of planning and organizational structure; No prioritization of the preoperative visit; among others.^(12,13,14)

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center area, the nurse has some specific functions, such as collaborating in the pre, intra and postoperative period, ensuring that hygiene, sterilization, materials and equipment used in surgeries are within the appropriate parameters. In this scenario, it is important that the issue of humanization and the implementation of PNCS be discussed among the multidisciplinary team, encouraging everyone to understand the importance and value this moment of the user. ^(11,12)

CONCLUSION

The professionals who make up the multidisciplinary team at the Surgical Center are the main piece for humanization and adequate reception, since it is a sector restricted to companions/family members. We saw that, many times, this humanization becomes impaired due to working conditions, insufficient professionals, work overload and bureaucratic activities. However, we can observe that the provision of humanized care has to be present in an

individualized and integral way, which is complemented with the Perioperative Nursing Care Systematization (PNCS).

It is concluded that the practice of humanization in the Surgical Center offered by the multidisciplinary team offers the patient more security, reception and a holistic view, favoring trust and proximity to these professionals. It is also important to emphasize the need for further research related to the topic and to take into account the subjective aspects of patients. 🐦

References

- 1-Possari, João Francisco. Dimensionamento de pessoal de Enfermagem em Centro Cirúrgico. Rev. SOBECC com você no Bloco Operatório. São Paulo. Ano IV, n.17. jan/mar. 2018.
- 2-Guedes, Ana Paula Fernandes. Centro Cirúrgico. 1 ed. – São Paulo: Martinari, 2018.
- 3-Brasil. Ministério da saúde. Agência Nacional de Vigilância Sanitária. Resolução - RDC Nº. 50, DE 21 de fevereiro de 2002.
- 4-Associação Brasileira de Enfermeiros de Centro Cirúrgico, Recuperação Anestésica e Centro de Material e Esterilização. Diretrizes de práticas em enfermagem cirúrgica e processamento de produtos para a saúde. 7ª ed. São Paulo: SOBECC, 2017.
- 5-Martins, Karoline Nogueira, et al. Processo gerencial em centro cirúrgico sob a ótica de enfermeiros. Acta Paul Enferm. v.34, e APE00753, jun. 2021.
- 6-Araújo, Jennyfer Kelly Moraes de. et al. Avaliação dos fatores de cancelamento de cirurgias em hospitais do nordeste brasileiro. Rev. SOBECC. São Paulo. v. 24, n. 4, out/dez.2019.
- 7-Barboza, Beatriz Coêlho; Sousa, Carlos Alberto Lopes da Silva Costa; MORAIS, Lorena Araruna de Souza. Percepção da equipe multidisciplinar acerca da assistência humanizada no centro cirúrgico. Rev. SOBECC. São Paulo. v.25, n.4. Out./dez. 2020.
- 8-Giron MN, Berardinelli LMM. O Conhecimento em Enfermagem sobre Humanização na recepção do usuário no Centro Cirúrgico: revisão integrativa. Rev enferm UFPE on line. Recife, 9 (supl. 2): 974-84, fev., 2015.
- 9-Brezolin CA. et al. A importância da humanização do cuidado em centro cirúrgico. Saúde em Redes. Rio de Janeiro. V. 6, n.2, 289-295, 2020.
- 10-Bernardes LH, Quintilio MSV. Humanização da Enfermagem em Centro Cirúrgico: A importância do enfermeiro. Rev. JRG de Estudos Acadêmicos. Goiás. vol. IV, n.8, jan.-jun., 2021.
- 11-Tomazelli JT, Salvi ESF, Pompermaier C. Humanização no Centro Cirúrgico. Anuário Pesquisa e Extensão UNOESC Xanxerê. Santa Catarina. 2020.
- 12-Ribeiro E, Ferraz KMC, Duran ECM. Atitudes dos Enfermeiros de Centro Cirúrgico Diante da Sistematização da Assistência de Enfermagem Perioperatória. Rev. SOBECC. São Paulo. V. 22, n.4, 201-207, out.-dez., 2017.
- 13-Adamy EK, Tosatti M. Sistematização da Assistência de Enfermagem no período perioperatório: visão da equipe de enfermagem. Revista de Enfermagem da UFSM. Santa Catarina. v. 2, n.2, 300-310, mai.-agos. 2012.
- 14-Luz BR, Souza JSM. Humanização no Centro Cirúrgico: Percepção da equipe de Enfermagem. Rev. Expr. Catól. Saúde. Caxias do Sul. V.5, n.2, jul.-dez., 2020.