

AfS Circulating Nurse Responsibilities

Every mission is very much dependant on the team and we hope that your travel with us will be a positive team experience.

Most of the time you will be expected to function independently, however you will NOT be abandoned and expected to struggle. Those with experience will be depended upon to help acclimate the inexperienced mission nurse. Here are a few tips to help you adjust.

1. You will go to pre-op clinic with your assigned surgeon. Along with the medical chart for each patient, you will have a post-it note which has been pre-stamped with information that is needed for scheduling purposes.
2. You will be given individual papers, one for each day of surgery, which can be taped to the wall. After your surgeon has examined the patient and determines that he/she will schedule the patient for surgery, begin placing the post-it notes on the sheets of paper – each paper represents one day of surgery. We will expect approximately 8 hours each day. Encourage your surgeon to be realistic as to the amount of time needed for each case. The Head Nurse will be coming around periodically throughout your clinic day and gathering the sheets of paper on which you have placed your post-it notes representing each full day of surgery. He/She will use your individual schedules to begin the scheduling process for the entire mission.
3. We will do **only** lips (no palates) on both the first and last days of surgery.
4. After Clinic, you will be responsible for going to the OR and setting up your room with needed supplies.
5. We will use the first hour or so of the first day of surgery to review our emergency equipment and emergency procedures/processes. We will only begin surgery after everyone feels comfortable with these procedures.
6. Find out what glove size your surgeon wears, and his/her suture preferences. We do have limited supplies so please remember there is another OR to be stocked. Better yet, take your surgeon to the storage room and let him see the suture varieties which have been sent. Each surgeon has been sent, via e-mail, a list of what suture AfS will be providing with explicit instructions that if they require any other type of suture that they should procure and bring that suture with them in their luggage.
7. Please take **only** the instrument set you need for the case you are doing in the OR. We do have a limited number of sets and this helps the person sterilizing know what will be needed most urgently.
8. You are expected to count each instrument set before and after each case. There are laminated instrument set cards which will help you and your “in country/local” scrub nurse with your instrument count. This assists us in minimizing the loss of AfS instruments.
9. **Throat packs and tongue sutures** are to be used on **ALL** palate cases.

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10. **ALL** syringes are to be labeled.
11. You are responsible for any “sharps” left on the instrument trays being sent to the decontamination room! Please in-service your scrub nurse and monitor continuously.
12. On the day for which you have been assigned call, you are expected to relieve any nurse who might still be working after your last case finishes.
13. Be gracious and share laughter, this helps to put our host staff at ease, they are frequently very nervous about working with us. You usually will find that the scrub nurses provided by our host hospital are quick learners and after the first day or two will be able to anticipate and work almost independently of you – they are an integral component of our AfS team.
14. If you wear non-latex gloves, you will need to bring them with you. We get a lot of our supplies donated, and non-latex gloves are not always available. Tegaderm frequently comes in handy for IVs and is not always available. If you work at a facility that allows your sales reps to donate such things, feel free to bring them along. They are much appreciated. Many of us carry additional Tegaderm with us in our “fanny packs” along with our own bandage scissors, etc.
15. The Head Nurse will give breaks when he/she is able. Many times their time is taken up doing things of which you are not aware. Please be patient; their job is demanding and if you are able to trouble-shoot small things it is so much appreciated. When you see items are getting low, please let the Head Nurse know, so he/she can purchase these items or something similar.
16. On our last **day of surgery**, we will be doing **only cleft lips** (no palates). Please take all equipment and supplies not needed for these cases to the storage room so that our non-medical team members can begin the task of packing no longer needed DME as well as inventorying our supplies. We are constantly trying to fine tune our packing list to ensure as cost efficient a mission program as possible.
17. You are expected help with the “packing out” on the last day of surgery. We all should be leaving the hospital together on the last day. If everyone helps, we can all have some free time in the afternoon before our farewell dinner with our hosts/colleagues.
18. Monitor and maintain the professional demeanor of your OR at all times.
19. **YOU MAKE OR BREAK THE TEAM.** Your professionalism and cheerfulness are essential!