

The Essential Steps before and after a Successful Operation

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EDITORIAL

Perioperative is the period of time extending from when the patient goes into the hospital, clinic, or doctor's office for surgery until the time the patient is discharged home. The perioperative period is the time period of a patient's surgical procedure. It commonly includes ward admission, anesthesia, surgery, and recovery. Perioperative may refer to the three phases of surgery: preoperative, intraoperative, and postoperative, though it is a term most often used for the first and third of these only - a term which is often specifically utilized to imply 'around' the time of the surgery. The primary concern of perioperative care is to provide better conditions for patients before operation (sometimes construed as during operation) and after operation.

Every surgery is broken down into these phases to differentiate tasks and establish who is responsible for overseeing and delivering each stage of care. By maintaining a strict adherence to procedures and a clear chain of command, hospital teams are able to deliver consistent, optimal care from the moment a surgery is ordered to the time when a person is fully recovered. Preoperative phase, Intraoperative phase, Postoperative phase.

The initial phase, called the preoperative phase, begins with the decision to have surgery and ends when the patient is wheeled into surgery. This phase can be extremely brief, such as in the cases of acute trauma, or require a long period of preparation during which time a person may be required to fast, lose weight, undergo preoperative tests, or await the receipt of an organ for transplant.

The intraoperative period begins when the patient is transferred to the operating room table and ends with the transfer of a

patient to the Post Anesthesia Care Unit (PACU). During this period the patient is monitored, anesthetized, prepped, and draped, and the operation is performed. Nursing activities during this period focus on safety, infection prevention, opening additional sterile supplies to the field if needed and documenting applicable segments of the intraoperative report in the patients Electronic Health Record. Intraoperative radiation therapy and Intraoperative blood salvage may also be performed during this time.

The postoperative period begins after the transfer to the Post Anesthesia Care Unit (PACU) and terminates with the resolution of the surgical sequelae. It is quite common for the very last of this period to end outside of the care of the surgical team. It is uncommon to provide extended care past the discharge of the patient from the PACU.

Journal of Perioperative Medicine covers the following wide range of topics in this field are Local Anesthesia, Sedation, Regional Anesthesia, Anesthetic Agents, Nerve Blocks, Spinal, Epidural and Caudal Anesthesia, General Anesthesia, Thoracic Anesthesiology, Pediatric Anesthesiology, Obstetric Anesthesiology, Analgesics, Anesthesia & Critical Care, Spinal Anesthesia, Anesthetics, Epidural Anesthesia, Clinical Anesthesia, Dental Anesthesia, Vascular Anesthesia, Surgical Anesthesia.

Journal of Perioperative Medicine thus caters to a wide range of readers including surgeons, anesthetists, pediatricians, gynecologists and obstetricians, scholars, academicians and students keen in pursuing the latest and recent developments in anesthesiology.

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