

## THE PERIOPERATIVE EXPERIENCE FROM THE PATIENT'S PERSPECTIVE

Marissa Davis, BSN; MSN(c); Garret Myhan, BSN; MSN(c)

University of Tennessee, Chattanooga;

Dacia Susleck, MSN;CRNA

Anesthesiology Consultants, Chattanooga, TN

Janet Secrest, PhD; RN

Barbara Norwood, EdD; RN

University of Tennessee, Chattanooga, School of Nursing, Chattanooga, TN

**KEY WORDS:** perioperative period, phenomenology, Pollio

**PURPOSE:** According to the National Center of Health Statistics (2001), over 72 million people in the United States undergo surgery annually. There have been many quantitative studies examining the perioperative period from various perspectives, for example preoperative teaching, measures to relieve stress, and coping styles. More recently, qualitative studies have focused on various experiential aspects. No studies were found that were approached from a whole-experience perspective for the patient. The purpose of this study, therefore, was to investigate the perioperative experience from the patient's perspective.

**METHOD:** An existential-phenomenological approach using Pollio's interpretive framework was used. Interpretations were conducted, in part, in a research group. The purpose of the interpretation was to recognize patterns or themes in an experience. Participants were asked to describe specific experiences that stood out for them because experiences which stand out are those which are meaningful. Six of ten participants have been interviewed using phenomenological techniques. The participants thus far included 2 males and 4 females ranging in age from 23 to 66. The length of time since the surgical experience varied from 1 to 16 years. The participants underwent a variety of surgical procedures and each participant received a general anesthetic for at least one of the procedures.

**FINDINGS:** Preliminary findings indicate the essence of the experience is control. Control is experienced through inter-related figural experiences of self, others, and time.

**DISCUSSION:** Loss of control of self, the relinquishing of control to others, and the temporal experience of control may contribute to perioperative stress and anxiety. Data collection will continue until a sample size of at least 10 is reached and/or redundancy of findings.