

## Dealing with DEATH in the OR

(0:00 - 0:38)

Today I want to talk about something that can be considered a little bit controversial at times. It's surgical death and patient death in the OR environment. So thinking about medical professionals and medical professions in general, the only person that may deal with death on a regular basis would be an at-home hospice nurse.

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Those nurses go to the patient's homes. They're really on their last leg of life and they're just there to assist them in helping them and their family cope with the fact that they will be passing very soon and to do it as comfortably as possible. Those people, as far as I'm concerned, are angels and that is a tough, tough job.

(1:06 - 2:51)

I can't imagine the pain that families must feel, you know, day in and day out, and to have such a strong personality to be able to do that is, bar none, one of the most amazing things I've ever seen. But bringing that back into the OR, as OR professionals, we don't deal with it too often. Thank God we don't deal with it too often, but you will see it happen.

A death in the OR does happen and it's going to happen eventually to you if it hasn't already. Now, the first time it happens, it can be a little shocking. You kind of get this sense of feeling, this kind of overwhelming feeling of you don't really know how to react.

You know, this patient isn't your love. It's different when you lose a loved one, you lose a family member, you lose a friend, you know, you have a connection with them personally. We don't really have that type of connection with our patients, not to say we're not feeling for them and their family, but we just don't have that strong connection.

So it's the first death that you do see in the OR, it's kind of a weird sensation. You don't really know how to react. I remember my first death in the OR, I was just standing there, you know, we had the blanket over the body and the patient had to stay in there until, you know, we called the morgue and we called the donor network and stuff like that.

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And everyone was just standing in the room, going about their business, and I just, I caught myself just staring at the patient every now and then, kind of like saying little prayers in my head. It's a weird feeling, you don't quite know how to feel. A lot of the times when it happens, you constantly think straight back to the family that can be waiting in the waiting room, waiting to hear any news, and my heart goes out to them every time it happens.

Every time it happens, my heart goes out to them. So I have, you know, had the opportunity to go out to the waiting room with the nurses and surgeons and visit with the family when, you know, it's announced that their family member or friend has passed. And the compassion that you see out of your fellow co-workers and out of the family for those family members that are in pain and hurt is, it's an amazing experience.

And that's why I always refer to my OR friends as family. I mean, they're not my fellow employees, they're my family because we all have that compassion, we all have that drive to help not only one another during the day, but to help our patients because that's what we're here for. We're here to help our patients.

Something I was thinking of, you know, as I was thinking of making this video was, what is our role in the OR? And honestly, our role in the OR is really that last line of hope for some of these patients. You know, this surgery may be, you know, their last surgery, their last time to try and fix a problem or issue that's going wrong with them. And if it doesn't work, that's it.

That is it for them. They either recover and go on to hospice or they can possibly pass in the OR during the surgery as well. I mean, we are a last line of hope for some of these patients.

Some people may see or sense that you're lacking compassion, and that's not the case. That is totally, totally not the case. As healthcare providers, we deal with crazy different things every day, and we all have a different way of dealing with it.

And, you know, when it comes to death in the OR, that's like one of the most, you know, groundbreaking, could be like complete meltdown emotionally experiences, especially for the families. But as healthcare providers and, you know, employees of a hospital that are caring for that patient, we're there as a strong, you know, brick wall. We're there to hold up family members.

So, I want to go through some things that you may have to deal with in the OR when there is a death on the table. When it does happen, the surgeon will call time of death. They will immediately just close up the patient with one big suture, usually just like a big PDS or something like that, and they'll just do one suture through all layers and just close up everything at once.

You wash the patient up as much as you can. Put warm blankets constantly all over that patient because as you are closing, the nurses are calling the donor network in your specific state or region. They call the donor network to make sure, and the donor network has to answer a couple questions regarding the patient, whether or not they're donors.

They may get in contact with the family to ask them if the family would be willing for them to be organ donors. After that, they call the morgue, and then the morgue sends a person out to the hospital to pick up the patient. But while all those phone calls are going on, you're at the table with the surgeon, closing up this patient.

It's important, as you're done closing up the patient, to clean the patient as well as you can and to wrap that body up in blankets because as soon as that patient passes, they get very, very cold. Very, very cold, and as soon as all that stuff's done, when they take the patient back to the ICU, usually that's a time when they bring the family back to say their last goodbyes to the patient. So it's important to make sure that you wrap that patient in warm, warm, warm blankets so when the family goes to kiss a cheek or touch an arm that they feel warm skin still.

They don't want to feel an ice cold, ice cold, lifeless body. It's a horrible feeling. So I always make it a habit whenever we do to clean that body as well as I can and to wrap it up as warmly as I can for that family to give their last goodbyes.

So if you are in this profession, you are a surgical tech now, but you have yet to see a death in the OR. I hope you don't, and I pray that you don't, but if you do, I hope that this video helps you a little bit in helping you react to the situation. And for those of you that have had deaths in the OR, I would love to hear any comments that you guys have on how you dealt with it or how you felt about, you know, your first death in the OR or something like that.

So thank you guys for watching and I'll see you again in another video. Bye.