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ORGANIZATION OF THE WORK OF A TECHNICAL NURSE IN THE ANESTHESIOLOGICAL DEPARTMENT

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Annotation

In medicine, the field of anesthesiology is an integral part of surgical practice. The success of any operation process directly depends not only on the qualified and responsible work of the doctors. Today, the rapid development of medical technologies, the widespread introduction of a new generation of anesthesia aparats require high technical knowledge, accuracy and responsibility from technical nurses. Improper Organization of the work of technical nurses or poor control pose a risk to the life of the patient, may be the reason for the interruption of the operational process.

Keywords: Department of Anesthesiology, technical nurse, monitors (EKG, SpO_2, NIBP), drug preparation, syringe and Infusion Systems, sterilization, disinfection, asepsis and antiseptics, equipment inspection, team collaboration.

The role of technical nurses (anaesthesia technician / anaesthesia technologist) in the practice of anesthesiology was formed as a separate professional orientation in many developed states. Their activities are aimed at improving the safety of surgical practice, the performance of the anesthesiologist and the quality of patient monitoring, and in international standards this profession is recognized as an integral link of the health system. First of all, in the United States, Canada,

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Australia and Europe, anesthesia technicians are trained on the basis of specially accredited educational programs. Anesthetics have been used for centuries, from opium poppy and salt [1].

In the United Kingdom, general anesthesia administration has generally been performed by medically qualified personnel, but there have been cases where this is not the case. The article describes the role of "Sister anaesthetists" who contributed significa [3].

Many factors determine whether nurses, doctors, or both perform anesthesia in a given country. In a group of seven (G7) countries (Canada, France, Germany, Italy, Japan, the United Kingdom and the United States of America), the case of nurse-administered anesthesia was studied, and historical factors, global and local contexts (e.g. professional relationships, medical and nursing education, nurse social status, demography and world wars in the 20th century), help explain the observed differences. Almost equal numbers of doctors and nurses are now engaged in the supply of anesthesia assistance in the United States, but although an attempt was made to introduce or reintroduce nurse anesthesia in all other G7 countries (except Japan) in the 20th century, it was only successful in France and cooperated with the United States during World War II [9, 10].

According to the requirements set by the American Association of anesthesia technicians and technologists (ASATT), technicians must ensure compliance with all equipment necessary for anesthesia in the operating block, their inspection, maintenance, and safety standards. This approach shapes technical nurses as highly skilled practitioners. In the practice of foreign countries, technical nurses often perform a number of tasks as an assistant specialist to the anesthesiologist: preparation of anesthesia apparatus, ventilators, monitoring systems and Infusion pumps; control of backup oxygen systems and airway equipment; sterile storage and replenishment of laryngoscope, endotracheal tubes, masks and other consumables; ensuring quick preparation for emergency situations in the surgical block; performing auxiliary [19].

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In the European health system, notably in Germany, France and the United Kingdom, technical nurses work under strict protocols in preparing the surgical procedure. In the UK, they have special authority at the NHS (National Health System).

In Australia and New Zealand, anaesthesia techniques are recognized as independent positions in the health system, where they receive surgery from a patient and work in conjunction with an anesthesiologist to monitor safety indicators at the time of surgery.

Theoretical studies show that the participation of a technical nurse in the work of the anesthesiological Department: 1. reduces the load of the anesthesiologist, 2. increases patient safety, 3. theoretical studies show that the participation of a technical nurse in the work of the anesthesiological Department: 1. reduces the load of the anesthesiologist, 2. increases patient safety, 3. improves operating block efficiency, 4. plays an important role in preventing technical failures.

The author provides a very detailed description of the history of the anesthetist nurse, including a timeline of important dates in history. In the context of the practice, the current situation in Nurse Anesthesia centers, the rehe author provides a very detailed description of the history of the anesthetist nurse, including a timeline of important dates in history. In the context of the practice [12, 24].

The ability to combine theory with practice is indispensable for the student's success. A common cause of fatigue from a nurse's anesthesia program is clinical problems. Students are evaluated using a variety of tools to document clinical competence. An important psychometric property to ensure the validity of the instrument for the use of a clinical assessment tool as possible evidence for the dismissal of a student. Clinical evaluation tools for Nurse Anesthesia programs are not standardized among programs, as evidenced by the lack of validity of the instruments. The lack of established validilinical evaluation tools for Nurse Anesthesia programs are not standardized among programs, as evidenced by the

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lack of validity of the instruments. The lack of established validity of the instruments used to assess the clinical progress of students questions their ability to identify a student who is actually at risk of wear. Given this possibility, the validity of clinical tools guarantees that research will be fair to students and that wear rates will be improved based on actual data. This ex post facto study evaluated a 17-element clinical tool to demonstrate the need for the validity of clinical assessment tools. He also compared clinical scores to scores in the national certification exam [6, 21].

In foreign countries (such as the United States, the United Kingdom, Canada), in anesthesiological departments, a technical nurse or an anaesthetic technologist (anaesthesia technician / technologist) is organized through specific professional standards and scientifically based approaches.

In foreign practice, the profession of an anaesthetic technician is usually determined by special vocational training programs and certification requirements. For example, in the United States and a number of Western countries there are accredited programs for the roles of Anaesthesia Technologist and anaesthesia Technician, which prepare a specialist for competencies such as: understanding and working properly with anaesthesia equipment; adjusting monitoring systems; obtaining surgery, having knowledge of ensuring technical support during and after surgery. This approach is achieved through centralized educational programs and is supported by professional standards. For example, organizations such as CAAHEP (Commission on Accreditation of Allied Health Education Programs) accredit program [15,23].

The main theoretical approach of a technical nurse in the anesthesia department is that she acts as part of a multifunctional team with an anesthesiologist doctor, a nurse anesthesia specialist and other medical personnel. This collective approach guarantees continuous patient care, safety, continuous monitoring and technical support.

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Such an integrated approach is theoretically based on the concept of an" anesthesia care team", in which each Specialist, including a technical nurse, performs its specific role and duties - which increases the effectiveness and patient safety of the general anesthesia process [14, 25].

In foreign practice, the activity of an anaesthesia technician is directly related to the concept of patient safety. For example, the role of anaesthesia Technician, according to reviewer sources, includes their tasks: technical monitoring of the patient's vital signs during surgery; ensuring the proper functioning of equipment before and after narcosis; compliance with safety standards [13, 16].

Another important factor that comes out of the theoretical framework is a constant update of the standards and certificate requirements to be attached, which means that technical nurses constantly improve their skills in accordance with the requirements of scientific in - quotes manuals, clinical protocols and national accreditation.

Thus, the experience of foreign countries proves that in the anesthesiological Department, the activities of a technical nurse are professionally organized, which plays an important role in ensuring the technically perfect course of the operational process, compliance with safety standards and stable conduct of technological processes.

In modern medical practice, the effective functioning of the Department of anesthesiology largely depends on the correct Organization of technical issues. The experience of development modern medical practice, the effective functioning of the Department of anesthesiology largely depends on the correct Organizatis.

Admission selection criteria require attention to promote academic development and improve retention in anesthesia nurse programs. With the current economic crisis combined with the increase in the cost of postgraduate education, the efforts of education leaders to minimize obsolescence remain decisive. Selecting potential candidates with high probability of success, consistent with data-driven

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evidence, provides the greatest potential for academic success for student registered nurse anaesthetists. The purpose of this quantitative correlation study is the acceptance criteria (average score [GPA]., the science level average score is [SGPA]., to determine if there is a link between the graduates ' Record exam scores and critical assistance experience) and academic progress (current academic status edi.va GPA). Key findings have shown that there is a statistically significant relationship between acceptance selection criteria and academic progress. The findings also showed that the combination of independent variables, specifically GPA and SGPA, predicts academic development.

In the United States, Canada, Australia, and many European countries, anesthesia technicians are recognized as an independent professional focus of the healthcare system.

The scientific and practical experience of foreign countries indicates that technical nurses control the availability of all equipment available in the operating block in a ready-to-work state.

In the UK, technical nurses are recognised as "perioperative practitioners" in the health system, working with an anesthesiologist on a strict regulation in the preparation and monitoring of surgery.

Monitoring anesthesiology residents and certified registered nurse anaesthetists (CRNAs) in many U.S. health care facilities is the primary daily responsibility of Anesthesiologists. Our department carried out a daily process, with the help of which control by each anesthesiologist working in the operating rooms was evaluated by the anesthesiology resident and CRNA, who worked on the previous day.

Requests for evaluation were emailed daily to each resident and CRNA after working in the operating room. Control scores were analyzed 6 months later [20]. Although residents and the attributes that make up the CRNA "control" share generality significantly, control scores must be analyzed separately for residents and CRNAs. While average control scores vary significantly among

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anesthesiologists, control scores are casually affected by staff assignments (e.g., an anesthesiologist's occupancy of other operating rooms) [18].

In Australia and New Zealand, the profession of anesthesia technician is defined by specific competencies, which are professionals in charge of monitoring the physiological indicators of the patient, monitoring technical training and acting in conjunction with an anesthesiologist in an emergency.

Conclusion

Scientific and practical model of effective organization of the work of a technical nurse in anesthesiologic departments, criteria for assessing the professional activity of technical nurses, methodological recommendations for the effective organization of the participation of technical nurses in anesthesiologic processes, organizational proposals aimed at improving work productivity and Ensuring Patient Safety were developed and introduced into the practice in the anesthesiological department.

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