

Language in Perioperative Nursing Care

Communication is the key ingredient of the nurse–patient relationship. Breaks in communication can lead to misunderstanding, confusion, and error, all of which can lead to a negative outcome. In the perioperative setting, **it** is imperative that patients have a full understanding of what they will be experiencing. There can be numerous barriers to achieving effective communication. **These** include, but are not limited to, language barriers, hearing deficit, developmental issues, literacy level, and cultural barriers. The perioperative nurse must assess each individual patient to determine which strategy would work best in each particular situation.

It is important that the nurse begin any new encounter by introducing her/himself to the patient and family. The nurse should exhibit confidence in his or her role and avoid arrogance. If it is appropriate, the nurse should shake hands with the patient and family members. Explain the reason of the visit and explain the sequence of events that will take place. **If** the first encounter is in the preoperative holding area, explain the assessment, interview by anesthesia provider, admission to the operating room, operative procedure, application of dressings, admission to the perianesthesia care unit, and discharge routine. **This** will assist the patient and family in understanding the process. **It** also will help family members understand the time element. **For example**, many outpatient surgical procedures can be performed and the patient recovered and ready for discharge in as little as 2 to 3 hours, **whereas** complex inpatient surgical procedures may take as long as 6 hours. Preparing the family in advance will assist in keeping anxiety levels to a minimum. **It** is also important to review the expectations of the patient and family members.

The nurse should not assume the ethnic and cultural background of the patient. **If** the patient wants the nurse to know his or her background, he or she will tell the nurse. **It** is especially important to show respect to all males. In some cultures, the male is considered the head of family, and all decisions go through him, even if it is the wife or child who is undergoing the procedure. **It** is customary in some cultures for children to accompany their parents everywhere. **It** is important that the children be included in the perioperative experience.

With the diverse population present in the United States today, **it** is not unusual to encounter patients who either do not speak English or who have English as a second language. **It** is important for the nurse to find ways to communicate effectively **so that** pre- and postoperative instructions are understood.

There are some strategies to assist the nurse when faced with a culturally sensitive situation. Invite the family members to choose where they would like to sit or stand. **This** allows them to select a distance that is comfortable. Observe how the patient and family interact with others. **This** will give clues as to what gestures are acceptable and appropriate, such as hand shaking and eye contact. **It** is important for the nurse to avoid appearing rushed. **If** nonverbal cues are used in response to questions, **it** is important to ask for clarification.

For each culture, **it** is important to learn the proper terms of address. Speak in a positive tone of voice, speaking slowly and clearly. **It** is extremely important to speak in a normal tone of voice. All too often the nurse will increase the tone and volume when speaking to compensate for the patient's language barrier and poor comprehension.

It is important to encourage the patient and family to ask questions. **It** is helpful if the nurse can learn a few basic words in the patient's native language. **This** can help break the tension of the situation and put the family at ease. **When** speaking with the patient and family, avoid professional terms that may have no meaning to them. **It** is important to explain why certain questions are being asked and what the information will be used for. **When** giving instructions and information, **it** is important to repeat the information more than once. **It** is **also** beneficial to ask that the information

be reiterated back to ensure proper understanding. **When** prescriptions are given, **it** is important to review why the medication is needed and what **it** will do.

Cultural behaviors relevant to health assessment

Cultural group	Cultural variations (common belief/practice)	Nursing implications
African American	Dialect and slang terms require careful communication to prevent error (<i>i.e.</i> , bad may mean good).	Question the client's meaning or intent.
Mexican American	Eye behavior is important. An individual who looks at and admires a child without touching the child has given the child the evil eye.	Always touch the child you are examining or admiring.
Native American	Eye contact is considered a sign of disrespect and thus is avoided.	Recognize that the client may be attentive and interested even though eye contact is avoided.
Jewish American	Orthodox Jews consider excess touching, particularly from members of the opposite sex, offensive.	Establish whether client is an Orthodox Jew and avoid excessive touch.
Chinese American	Individual may nod head to indicate yes or shake head to indicate no. Excessive eye contact indicates rudeness. Excessive touch is offensive.	Ask questions carefully and clarify responses. Avoid excessive eye contact and touch.
Chinese American	Individual may nod head to indicate yes or shake head to indicate no. Excessive eye contact indicates rudeness. Excessive touch is offensive.	Ask questions carefully and clarify responses. Avoid excessive eye contact and touch.
Haitian American	Touch is used in conversation. Direct eye contact is used to gain attention and respect during communication.	Use direct eye contact when communicating.

- 5 When feasible, written instructions should be provided in the patient's native language. **This** is a great project for nurses to undertake. **It** provides a chance to work with members of the community. **This** is also a good opportunity to learn some of the cultural background of each specific culture. When necessary, the use of an interpreter should be provided to ensure the patient and family have complete understanding of what is happening and. **It** is critical that family members not be placed
- 10 in the position of having to interpret for the patient. **This** can lead to an uncomfortable situation for both the patient and the family members doing the interpreting. The facility should employ the services of a paid interpreter. Whenever possible, the gender of the interpreter should be the same as that of the patient. The opportunity to be alone with the patient may be difficult because of family practices, **but nevertheless**, the opportunity should be provided so that sensitive questions may be
- 15 reviewed in private. **It** is here that the gender of the interpreter becomes so important. Females may not answer questions or discuss problems in the presence of a male in certain cultures and. **It** is also forbidden in some cultures for a male to touch or look at a female who is not in full dress and vice-versa.

Hearing loss can contribute to ineffective communication between the patient and the health care worker. In the perioperative setting, **this** can lead to the patient not fully understanding the importance of adhering to the preoperative instructions that are reviewed with the patient. Noncompliance with NPO instructions or information concerning which routine medications to take or withhold on the day of surgery can lead to disaster in the operating room. Imagine the potential impact on the surgical patient who continues to take his anticoagulation therapy despite instructions to stop 5 days before surgery; or the severe hypertensive patient who omits his antihypertensive medication because he misunderstood the preoperative instructions. **It** is not uncommon to find an elderly patient nodding as if in agreement with instructions and information that is being communicated, **yet**, when asked to reiterate the exchange that has just occurred, the patient is unable to. Patients with hearing deficits often are able to conceal their loss by becoming proficient at lip reading. The nurse must be astute and use keen observation skills to determine if the patient is indeed hiding a hearing loss. **It** is imperative that written instructions be given to the patient not only preoperatively, but postoperatively also. Again, providing these instructions in the patient's native language is essential to ensure compliance.

When communicating with a patient who is hard of hearing, provide a quiet area, free from distraction and outside noise. Be sure the lighting is adequate. If necessary, provide an interpreter. Determine the patient's preferred method of communication. **This** could be the use of hearing aids, sign language, lip reading, written communication or a combination of methods. Sit or stand directly in front of the patient and be sure your mouth is visible. Do not chew gum or eat food while communicating and be sure to speak at a comfortable volume. Speak slowly and distinctly; do not exaggerate pronunciation of words. Be sure to maintain eye contact with the patient. **It** is best to convey the information in as few words as possible. If an interpreter is used, **it** is essential to speak to the patient, not the interpreter. The interpreter should sit or stand beside the nurse, across from the patient.

When communicating with a hearing impaired patient, **it** is essential to allocate sufficient time to review the information. The nurse should be astute to recognize nonverbal behaviors that indicate the patient is experiencing anxiety. The patient may be feeling anxious because of his or her hearing disability, and he or she may have concerns on how he or she will be able to get through the upcoming procedure. Offer reassurance and provide a means to maintain communication throughout the patient's stay. **It** may be that the interpreter accompanies the patient into the operating room and stays through induction and then returns at the end of the procedure to assist in translating to the patient during emergence from anesthesia. Another suggestion is that the nurse and patient develop certain gestures or signals in advance to indicate that the procedure is complete, and everything went according to plan. **This** can be as simple as tapping the patient's left hand three times or placing an object in the patient's hand. For patients using assistive devices to hear, **these** should be left in place if at all possible. If they must be removed, be sure they are returned to the patient as soon as feasible, preferably in the operating room, making sure the device is in proper position.

Communicating with the hearing impaired patient is challenging, but through preplanning, the nurse will be able to provide the patient with all the information necessary for a positive surgical experience.

Illiteracy remains a concern for health care workers. Few patients will admit they cannot read or write, but instead try to cover up their deficiency. The patient who is functionally illiterate can read and write at an elementary level. They often will try to cover their inadequacies through other measures. Examples include the patient who refuses to read the consent and just signs, or the patient who quickly places the printed materials aside or states they have forgotten their glasses. The nurse should assess the patient's ability to comprehend the material that is being presented. **It** is important to maintain that the patient is not stupid, simply uneducated. **If** the patient is having difficulty understanding, **it** may be necessary to repeat the information slowly and clearly.

Adopt special approaches when the patient speaks a different language

- Use a caring tone of voice and facial expression to help alleviate the patient's fears.
- Speak slowly and distinctly, but not loudly.
- Use gestures, pictures, and play-acting to help the patient understand.
- Repeat the message in different ways if necessary.
- Be alert to words the patient seems to understand and use them frequently.
- Keep messages simple and repeat them frequently.
- Avoid using medical terms and abbreviations that the patient may not understand.
- Use interpreters to improve communication.
- Ask the interpreter to translate the message, not just the individual words.
- Obtain feedback to confirm understanding.
- Use an interpreter who is culturally sensitive.

Illiterate patients tend to memorize the information given, because they know they will not be able to read it. In **these situations**, **it** may be helpful for the perioperative nurse to phone the patient the day before surgery to review the preoperative instructions concerning NPO status, medications, and transportation. **If it** appears (that) the patient still does not understand, **it** may be necessary to incorporate the services of a family member.

It is important for the nurse to realize that there may be cultural barriers to communication. What is acceptable to one culture may be offensive to another. **It** is important for the nurse to have some understanding of what is or is not acceptable in a given situation.

In every culture, a person's name plays an important role. The nurse should never assume that **it** is acceptable to call a patient by their first name, or for the nurse to be addressed on a first name basis. The specific culture, age, and gender of the patient all play an important role in how the patient wishes to be addressed. **It** is also important to remember that in some cultures, the head of the family will be the person who communicates to the nurse. The nurse must use caution and avoid being judgmental when the man speaks for his wife.

When assessing the patient's illness, **it** is important to gather as much pertinent information as possible. Ask the patient to describe his or her problem and what he or she believes caused the illness. **This** may give the nurse clues as to the patient's underlying beliefs. **It** is important to listen to the patient's understanding of the illness, as **this** may reveal previous treatment modalities that the patient has used. Obtaining information on herbal treatments, home remedies, or other rituals that have been tried may prove valuable information to avoid potential complications from anesthetic agents.

When language barriers are present, meeting religious needs can prove to be a more challenging situation for the nurse. In some cultures, certain rules and behaviors are instituted before receiving health care services. An understanding of **these practices** will assist in developing a plan of care individualized to meet the patient's specific needs. In certain situations, the nurse may need to develop strategies to assist the patient and family in the decision to proceed with surgery. Some cultures base all interventions on the zodiac. For example, **when** trying to convince the patient and family that **it** would be detrimental to wait until a full moon to perform emergency surgery, the use of tact and understanding is critical.

The nurse plays a key role in helping the patient and family understand the perioperative routine. Working with the family to develop adequate means to communicate concerns is instrumental in achieving a positive experience. Identifying with verbal and nonverbal cues when communicating with the patient and family allows the nurse to modify the plan of care to meet individual patient needs. Cultural diversity will continue to be present in society. Establishing an understanding and acceptance of each patient as an individual will help to create an environment where the patient can receive care and treatment in a manner that is culturally acceptable.