

I work as an Operating Department Practitioner (ODP) in a hospital. I heard about the role at a briefing at a local university and thought it sounded like the type of work that I might enjoy. I was considering a career in nursing, but I really liked the idea of working in an operating theatre and so the ODP role seemed ideal. One aspect of the job that I particularly enjoy is working with other health professionals and medical staff as part of a multi-disciplinary team.

My work is informed by a number of different pieces of legislation, including the **National Health Service Act 2006**, the **Darzi Report**, the **Health and Social Care Act 2008** and the **Human Rights Act 1998**. They ensure that patient care is of the utmost importance in what I do.

A typical day may involve me working in an **anaesthetic role**, with an anaesthetist in the operating theatre. Before the patient arrives I prepare and check the necessary specialist equipment and drugs that will be required for the safety of the patient during anaesthesia. When the patient arrives in the anaesthetic room I greet them and check their personal details, including name and date of birth and I make sure they have signed their consent form. We also check that they understand the process they are going to undergo, from having the anaesthetic through to their return to the ward.

It is often assumed that ODP's have no communication with the patients, but that isn't the case at all. My role is to act as their advocate throughout the surgical process, to ensure their dignity and make them feel comfortable and safe at a stressful time.

Once a patient is anaesthetised I help to move them into the correct position on the operating table. Then I assist the anaesthetist in monitoring the patient and maintaining the anaesthetic. It is a legal requirement for all anaesthetists to have an ODP working with them at all times. When a patient comes round I will escort them back to the recovery ward and do a formal hand over to the staff there.

Alternatively, I may be working in a **surgical role**, rather than the anaesthetic role. In the surgical role there are two areas of work for an ODP, the **scrubbed role** and the **circulating role**. In the **scrubbed role** I wear a sterile gown and gloves. I assess the patient's needs and prepare all the necessary instruments, drugs and equipment required for the procedure to take place. Working with the team I'll help to position the patient on the operating table ready for surgery. I'm responsible for the equipment throughout the operation and will do checks on the instruments during the procedure. This includes checking that the number of instruments on the table is the same at the end as at the beginning. I can insist that a surgeon halts the procedure if any instruments are missing. In this role I am again the patient's advocate and am responsible for their dignity and safety during the procedure.

In the **circulating role** I use my communication and management skills to prepare the theatre environment and equipment and act as the link between the surgical team and other parts of the theatre and hospital.

I also work in a **recovery role**, where I receive the patient back in the recovery ward, and am responsible for assessing and delivering patient care within the unit. I monitor the patient's needs and apply the necessary skills for assessment and treatment, as required. When a patient has recovered from the effects of the anaesthetic and/or surgery they can be moved back to a surgical ward area.