Ophthalmic nursing: how and why to choose this specialty

BY SUSAN CLOUSER, M.S.N., RN, CRNO

Ophthalmology is a little known and often overlooked specialty within the field of nursing. Considering the number of registered nurses in the U.S., relatively few work with ophthalmic patients, but the care they provide is highly specialized.

Ophthalmic registered nurses typically work in ambulatory surgery settings, since most procedures can be performed on an outpatient basis. But they also work in refractive surgery or laser centers, home health, research, eye banks, industry and in such charitable organizations as the ORBIS Flying Eye Hospital (see related story on page 8).

In ambulatory settings, they provide education and perform preoperative assessments, which include acquiring information about patients' overall health, prescribed medications, allergies to other medications, systemic conditions, and whether they suffer from any anxiety-provoking factors, such as claustrophobia. Such knowledge is imperative for individualized care.

In the operating room, ophthalmic registered nurses function either as a circulator or a scrub nurse. Circulators position patients safely and comfortably for best access. They also verify the surgical site, complete necessary paperwork and trouble-shoot the technical instrumentation.

Scrub nurses who have an in-depth knowledge of ocular anatomy, physiology and pathology as well as ophthalmic procedures can anticipate the needs of the surgeon. Ophthalmic nurses in the operating room make surgery less stressful for the patient, easier on the surgeon, and more cost-efficient for the facility.

While ophthalmic nurses are less likely to work in clinic and office settings, the need for them will increase as aging baby boomers begin experiencing cataracts and presbyopia.



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Ophthalmic nurses are essential for helping patients understand the entire disease process. For example, they teach patients with diabetes the importance of regular ophthalmic checkups and how strict monitoring and control of blood sugar can slow the progress of diabetic retinopathy that often leads to blindness.

Whether we choose ophthalmic nursing or it chooses us, we love helping to preserve, maintain and restore vision. Patients readily say they would rather deal with cancer or lose a limb than to go blind and lose much of their independence. We are there to assist the patient in preventing that from happening.

The most common way to learn about ophthalmic nursing is through self-study, continuing education and on-the-job training. The American Society of Ophthalmic Registered Nurses, (ASORN), includes an affiliate membership for anyone on the ophthalmic team including ophthalmic medical personnel, ocularists, opticians, administrators and even ophthalmologists. The organization's mission is to foster excellence in ophthalmic patient care and to support the ophthalmic team through individual development, education and evidence-based practice.

ASORN also offers educational materials, publications and continuing education opportunities in Texas. To learn more, visit the Web site at www.asorn.org. ■

EDITOR'S NOTE: Susan Clouser, M.S.N., RN, CRNO, is president of the Dallas chapter of the American Society of Ophthalmic Registered Nurses and is a PRN staff nurse in the operating room at HealthSouth Surgery Center of Dallas.