

Utilizing Formal Check-Ins to Reduce Transition Shock in New Perioperative Nurses

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Background:

- New hire registered nurses often experience transition shock when transitioning to the operating room
- Transition shock is characterized by emotional, cognitive, and physical stress resulting from a gap between expectations and reality
- Structured new hire support strategies, including frequent formal check-ins, may alleviate transition challenges

Goal:

To evaluate the impact of implementing frequent formal check-ins during orientation for new operating room nurses and their effect on reducing transition shock and increasing nurse retention.



Periop 101 nurses: Emma Hagner, Amber Bensinger, Kyle Dolph, Diana LaRiviere, Valerie Carpenter, Teresa Davis and Candy Johnson

Methods:

Formal Check-In Process:

- All new hire registered nurses with or without previous operating room experience
- 30 minutes every 2-3 weeks during 6 month orientation
- Conducted by nurse educator, manager and/or transition to practice manager
- Structured formal check-in tool is filled out by nurse prior to check-in
- Time available to discuss struggles and successes throughout orientation
- Open communication and reflection
- Survey form sent at completion of orientation

Figure 1: Formal Check-In Tool

Preceptee Check-In	
Name:	
Department:	
Resident, Fellow, Experienced: (Highlight Correct Option)	
Cohort:	
Please spend time reflecting on each item prior to your Check-In. Bring your completed form and onboarding pyramid binder to each Check-In. Copies of Check-In documents will be emailed to you, your preceptor(s), and your leadership team.	
1. List your current tier and describe how your preceptor promotes your learning and progression through the onboarding pyramid. Rate what percentage your preceptor stays hip to hip with you.	
Check-In 1:	Date:
2. Share a circumstance in which you or your preceptor had competing priorities. How did you prioritize?	
Check-In 1:	Date:
3. Describe a scenario when you collaborated with a member of the interdisciplinary team to implement or change the plan or care for the shift.	
Check-In 1:	Date:
4. Discuss feedback you gave or received from a member of the interdisciplinary team. What was the result of the feedback, and would you do anything differently?	
Check-In 1:	Date:
5. Discuss an ethical dilemma you encountered or a morally distressing event (if applicable) and what steps were taken to address the situation.	
Check-In 1:	Date:
6. Pick a quality outcome and describe an intervention you implemented to promote patient safety, improve quality outcomes, and/or prevent patient harm.	
Check-In 1:	Date:
7. Share an example of how you demonstrated professionalism within your daily work.	
Check-In 1:	Date:
Leadership Comments/Questions	
Check-In 1:	Questions for manager:
Date:	Goals to complete before next Check-In
	Leadership comments:

Results:

Psychological Safety and Emotional Support

All respondents described the Check-Ins as:

- A safe space to express concerns, feelings, and achievements.
- A supportive environment that reduced pressure and anxiety.
- A place where they felt seen, heard, and encouraged.

Representative comments:

- “Safe space to share any news or concerns.”
- “Informal setting makes the pressure nonexistent.”
- “Evidence of wanting the orientee to succeed.”

Format effectiveness and frequency:

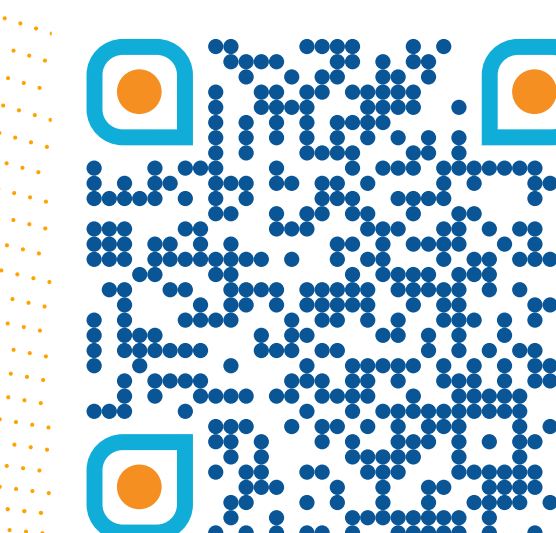
- 100% reported that the format was effective
- 100% reported the 2-3 week frequency was good
- Comments suggest that the quality of onboarding and support directly influenced role satisfaction

Increased retention of new registered nurses in the operating room in 2024 from 43% to 100%.

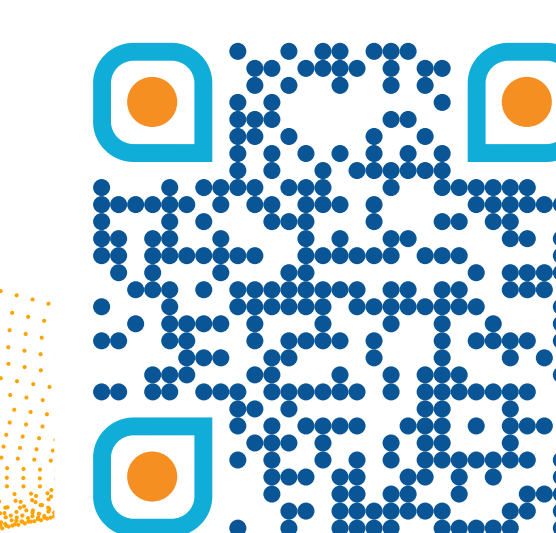
Conclusions:

- Frequent, structured check-ins provide:
 - A safe space for emotional processing
 - Opportunities for real time coaching
 - Improved perception of support and belonging
- Can have a high impact on decreasing transition shock, improve orientation outcomes and support new nurses in the perioperative setting

Contact Information



Survey Form Sample



References

