

My EAUN fellowship at UV Leuven

An eye-opening learning experience



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My name is Nethravathy Seenappa and I am a registered nurse from India.

After obtaining my diploma in nursing in 2004, I started working at a dedicated nephro-urology hospital, the NU Hospitals in Bangalore, India. In 2016, I completed my bachelor's degree in nursing followed by a master's degree (MSN - urology).

The level of work was vastly different from my training as a nursing student. Our Chairman, Dr. Venkatesh Krishnamoorthy, an eminent urologist, opened my eyes to the need to grow further in the field of urology nursing. I have been in the urology operating room for the last 18 years. The motivation for an enhanced work profile comes from the institution I work at and the constant encouragement from urology consultants. As an operating room nurse, I participate in teaching urology residents about instrumentation and operative procedures

NU Hospitals has five branches. Four of them are located in different parts of India, and one in the Maldives. Today, I oversee functioning of operating rooms in all these branches.

I chose UZ Leuven as it is one of the largest university hospitals in Belgium. Its surgical department has 46 operating rooms (ORs) with dedicated urology and robotic units. Around 1,600 surgeries per year are performed at the hospital.

On 7 July 2022, which was my first day, I was welcomed and introduced to the OR complex by Ms. Julie Veryser. I was amazed by the welcoming environment and friendly staff. They took pains to make me feel like a part of their very competent team. Every day the procedures commenced at 7:30 AM. This meant that the nurses started their day on the dot at 7:00 AM. The punctuality and time management were commendable.

On the second day, I was posted in the urology OR. In the first half of the day, I observed the open and endoscopic procedures.

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Nurses were posted in two shifts. In each shift, there were two nurses and they were completely responsible for the respective OR. Ownership on their responsibilities from transferring the patient from pre-op till shifting the patient to the recovery room. After each case, the OR was quickly cleaned/disinfected and kept ready for the next patient.

When a patient was wheeled inside the OR, their barcode was scanned to confirm the patient's identity and to ensure that it was the right patient for the right



Joining Ms. Hoogeveen and Ms. Veryser

surgery. Similarly, consumables were scanned once given to the scrub nurse. This scanning system also helped automatically send bills to patients and identify the expiry date of the consumables. Using technology to minimise human errors was amazing.

Ms. Kele Hoogeveen and Ms. Veryser, who are dedicated robotic urology nurses, helped me to understand critical processes in the OR. While I am familiar with our CMR robotic system, the introduction to the Da Vinci was very interesting.

On day five, I was at a nurse-led prostate clinic. The experience opened my eyes to the possibility of nurses taking up similar responsibilities in India. I was with Ms. Veryser at the prostate clinic. Patients diagnosed with prostate cancer report to the clinic and she counsels the patients pre-operatively. She visits them during their admission and follows them up after discharge at defined intervals.

Ms. Veryser was very patient and professional during her counselling. I was very inspired by the nurse-led clinic. Such nurse-led clinics are still in their infancy in India. This fellowship helped me realise the potential role that nurses could play in augmenting health care delivery in our resource-constrained environment.

On day six, I was in the urology outpatient department. All urology outpatient procedures were performed. It was great learning to see a single nurse competently handling sterile procedures.

I also had the opportunity to witness video-urodynamics done by a nurse. While I was familiar with urodynamics, I had not witnessed video-urodynamics earlier. The unit nurses were very professional and helpful, and went out of their way to explain and share their knowledge on every step of the procedure.

During the 7th day, the focus was on robotic urology procedures. I observed the robotic ureteric reimplantation performed by Prof. Frank Van Der Aa, head of the urology department.

The unit has the Da Vinci Xi Robot system which translates the surgeon's hand movements to the console in real-time. The highly-magnified, 3D high-definition cameras provided extremely clear images of the surgical area. Compared to the CMR surgical robot (the one which I have trained in India), the Da Vinci has a single bedside unit with four arms and extra-long instruments.



With Prof. Van Der Aa

I felt privileged when Prof. Van Der Aa explained the surgery steps patiently.

The next two days, I observed complex robotic surgeries such as partial nephrectomy, cystectomy with ileal conduit, and total abdominal hysterectomy with colporrhaphy and mesh.

On 18 July, I visited to the Central Sterile Supply Department (CSSD) to observe the process and practice. I was accompanied by Mr. Wouter Meert, who is in charge of CSSD. The entire CSSD was automated for cleaning, disinfection and drying. ISO 13485 standard was followed in CSSD. Mr. Meert was very professional and through with the processes of the CSSD as per ISO 13485.

Next day, I met with the infection control team where I acquainted myself with Ms. Nele Stroobants and the team to know about the infection control practices followed in the OR complex. We had a very interactive meeting to understand the processes followed during and after the infectious cases (especially air-borne transmission).



With the Urology Outpatient nursing team

On 20 July, the focus was on OR process and maintaining OR standards. I met Ms. Anneleen Jeanquart, the assistant head nurse who explained the process in the operating room in detail. This included planning for the nurses' duties, shift allotment, preparation of the theatre, inventory management, nurses training and privileges, and documentation followed in the OR.

"Overall, the nursing communication skills were commendable and definitely contributed to the effective and speedy manner in which they perform their tasks."

I understand that in Belgium, the basic nursing training focuses more on clinical posting, and because of dedicated operating room nursing training, they are aware of the basic OR process which makes the on-the-job training easier. This is lacking in India, and it takes tremendous time and effort for us to train the general nurses for specialty care.

Overall, the nursing communication skills were commendable and definitely contributed to the effective and speedy manner in which they perform their tasks. It has been a great pleasure to meet nurses who work with great pride in their profession and are also dedicated to their patients. I hope I can replicate the effective communication and enthusiasm that I observed among the surgical team members in my own setup.

The whole experience has given me a tremendous impetus to enhance my knowledge. It also helped me to improve my performance as a specialty nurse and a team player.

In weekends, I explored Brussels, Liege and Antwerp, and it was wonderful to see the historical places in Belgium.

I thank each and every colleague I met at UV Leuven for their patience in mentoring and sharing their knowledge. My thanks to the EAUN for providing me with a great opportunity. A special thanks goes to Ms. Hanneke Lurvink and Ms. Marie Rose Aangeveld for coordinating my fellowship. I would like to express my appreciation to our management Dr. Venkatesh Krishnamoorthy, Dr. Prasanna Venkatesh and Dr. Maneesh Sinha for their constant support and guidance.

New EAUN Board Member: Marcin Popiński



Marcin Popiński,
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Coordinator, currently as a Clinical Research Nurse. In the Centre, research in the field of urology, paediatrics, diabetology and others is performed.

I am a mentor for practical and internships of students from Collegium Medicum in Bydgoszcz of the Nicolaus Copernicus University in Toruń, Poland since 2019.

Since 2018 I have graduated many specialist courses in the field: cardiopulmonary resuscitation of adults, prescribing drugs and nurses and midwives' prescribing, performing and interpreting electrocardiographic records in adults for nurses and midwives, training course for internship mentors, vaccinations, endoscopy, cardiopulmonary resuscitation of children, and diabetes educator.

I hope that my participation in EAUN Board will help to represent nurses from Eastern Europe. In my opinion, the biggest challenges for representation of nurses from that region are communication and training. Nowadays, But fortunately, English is getting more common in these countries now. I hope it will help to promote EAUN. Another challenge is that there are different educational pathways in Poland and Eastern European countries: urology nursing specialisation does not exist. In my opinion, cooperation with nurses from other countries can help them gain new experiences, as well as the motivation to focus on new ways to improve urology nursing in Eastern and Western Europe.

My name is Marcin Popiński. I am a new board member of the European Association of Urology Nurses (EAUN). I am 30 years old. I graduated with a bachelor's degree in English Studies in 2014. I work at the Dr. Jan Biziel's University Hospital No. 2 in Bydgoszcz, Poland. I have almost eight years of experience as a nurse, and I am currently a nurse specialist in the field of surgical nursing. I earned my master's degree for my thesis "Quality of life and mental health of patients with urinary incontinence" at Collegium Medicum in Bydgoszcz of the Nicolaus Copernicus University in Toruń, Poland in 2017.

The main procedures performed at the urology clinic are: laparoscopic prostatectomy, endoscopy surgeries, and surgical treatment of urinary incontinence.

Since 2018, I have worked in Clinical Research Centre In-Vivo, first as a Clinical Research