For a long time, I felt that rural OR nurses are dying breed. Most of the rural OR have struggled to maintain their operation under constant threat of closure. I have heard one reason to be that centralization of surgical services was believed to be much more cost effective.

Some of the nurses moved on to larger communities for more work whereas the rest stayed and tried to keep our surgical services available to our friends, neighbours and acquaintances. Revelstoke is not an exception. We have fought very hard to keep our surgical services open while some communities lost theirs. I have always felt that we were standing on a tightrope.

Recently, however, I have noticed some positive changes in Revelstoke OR. One is introduction of clinical coaching for excellence program which is run by UBC rural continuing profession development team. Joined by a GP surgeon recently, we have a group of 4 GP surgeons who are really keen to take their skills to the next level to offer more surgical services in our communities with help of a surgeon from Vernon. We also have a group of 4 GP anesthetists who are keen to learn new skills. They are also mentored by an anesthetist from Vernon And I must give credits to my nursing coordinator for recruiting nurses to our OR pools. We have a nurse who just finished training and another in training and that gives us 7 nurses who are trained to work in OR. I really feel our OR team is in forward motion. We are also hoping to expand so that our visiting surgeons can do more complex surgeries such as laparoscopic cholecystectomies and hernia repairs.

The other positive change is introduction of the Colon Screening Program. This is a s provincial network for colon cancer screening. Patients do fit tests and if the tests are positive, they are enrolled to a waitlist for colonoscopy. Lately, larger centres are backed up and waiting time is up to 8 months, so the program started using rural sites as an option for patients in large communities. Revelstoke started receiving patients from Kamloops, Kelowna, Vernon and even from Trail and Oliver since their waiting time is 6 to 8 months while ours is only 1 month. We have 2 GP surgeons to do scope and we have OR time to do so. The CSP has already given us budget to open extra 4 OR days for scopes for the last few months. And the best of all, many patients are willing to travel to us to get the procedures done in a month instead of 8 months. It is innovative in a way that booking of diagnostic procedure is centralized regionally and distributed to peripheral sites in order to shorten waitlists.

These recent occurrence in our OR have made me think that rural surgical services are not dying and that, in fact, with some support, we can expand to offer our services not only to the people in our communities but also to those from

larger communities.

Now here are questions for you.

How do you feel about your OR? Do you feel it's utilized to its full capacity? Do you see any positive movements around you?

Do you think there are ways to revitalize rural OR. If so, how? (Your ideas don't have be totally realistic but anything that come to your mind.)