



Lived Experiences of Intensive Care Unit Nurses Caring for Patients During Postoperative Period

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ABSTRACT

This qualitative phenomenological study aimed to explore and understand the experiences of ICU nurses caring for patients during the postoperative period. A purposive sample of 14 ICU nurses from a tertiary hospital in Cotabato City were interviewed. Using Van Manen's phenomenological method, rigor was established through the application of verification, validation, and validity. The experiences of ICU nurses caring for postoperative patients included commitment to care, feeling of fulfillment, facing challenges and getting exhausted. Their means of coping with the challenges they experienced focused on dealing with the challenges and ICU demands, giving of quality patient care, keeping calm, thinking quickly and critically, being flexible, and practicing self-care and maintaining professionalism. Given the clear knowledge and expertise needed in caring for post operative patients in the ICU, nurses' good attitude, work appreciation, and additional education are needed. Nurses need to be nurtured, respected and assisted in their working environment to promote their caring consciousness.

Keywords: *Postoperative Period, Nursing, Hermeneutic-Phenomenology, Cotabato City*

Introduction

All surgical specialties and patients from pediatric to advanced age are typically cared for in the Post Anesthesia Care Unit (Dahlberg et al., 2021). However, patients may sometimes be taken directly to the ICU if they require immediate, critical care. During the immediate postoperative period, surgical patients are at high risk for several critical incidents, such as hypoxemia, airway obstruction, and hypotension, while agitation, nausea and vomiting, excessive pain, and hypothermia are also common (Keikkas et al., 2021). Admission to the ICU after surgery can be associated with significant morbidity and mortality (Bruceta et al., 2020).

The ICU is one of the most challenging areas in a hospital. Nurses are experiencing exposure to workplace stress, verbal and physical hostility, burnout, moral distress, circadian rhythm disruption, and depression. The stressful work environment leads to low-quality nursing care (Pogoy & Cutamora, 2021). Nurse challenges are difficult situations, experiences, or expectations that are common in the nursing profession. These challenges include physical, emotional, and mental experiences that result from the particular requirements of working as a nurse (Moore, 2023). ICU nurses experienced ambivalence while caring for adult patients (i.e., assisted airway). The nurses perceived caring as demanding owing to communication and collaboration. At the same time, they experienced contentment while striving to provide proper care and motivation (Akroute et al., 2022).

In the Philippines, with the increasing gap between the expanding needs of the population and the shortage of experienced nurses, critical care nursing practice is significantly challenged by the adequacy, availability, and accessibility of training, existing positions for practice, and unfavorable work environments (Paguio & Banayat, 2018). With this, there is a need to increase the competencies of critical care nurses, provision of palliative and end-of-life care, communication, and interprofessional collaboration (Martinez et al., 2021). In a study by Dusaran et al. (2023), nursing students assigned to ICU have a different perception of their experiences. They perceived their experiences as challenging, as well as their awareness of differences, doubts about self, length of exposure, and difficulties. Challenges in the nurse practice environment significantly affect work outcomes (Falguera et al., 2020).

The study's goal is to explore and understand the experiences of ICU nurses, which may impact the quality of patient care, delivery of services, burnout of staff, and patient outcomes. There have been quite a few studies on critical care. However, they mainly focused on patient's lived experiences (Digin et al., 2022), lived experiences of nursing students assigned to ICU (Dusaran et al., 2023), and other aspects of ICU nursing (Hasandoost et al., 2022; Parissopoulos et al., 2023). However, there needs to be more such research on the experiences of nurses caring specifically for postoperative patients in the context of Cotabato City and the Philippines. Therefore, this study sought to explore further and understand the lived experiences of ICU nurses when caring for postoperative patients in a tertiary hospital in Cotabato City.

Furthermore, it will benefit the intensive care unit nurses by exploring their lived experiences while caring for patients during the postoperative period. A deep understanding of these experiences may significantly impact their work and themselves, as this might ignite compassion, a good attitude, higher

appreciation, and a more positive perspective of their role as ICU nurses. It will prompt them to take personal measures to reduce stress through coping strategies, raise their level of expertise, and become proactively involved in improving the working environment of their organization.

Moreover, this study's findings may also benefit the Nursing Service Administrators. Exploring and understanding these lived experiences may help them develop an implementation of strategies to improve the ICU work environment when caring for postoperative patients and increase the levels of job satisfaction. It will also help the hospital administration as a whole as it may establish enhanced communication between areas or units at all levels and improve their clients' overall quality of care.

Methods

This study utilized a hermeneutic phenomenological approach that understand the lived experiences of the Intensive Care Unit (ICU) nurses caring for patients during the postoperative period. The study was conducted at a tertiary hospital in Cotabato City. This healthcare institution provides a wide array of medical services to Central Mindanao. Moreover, the hospital's Intensive Care Unit Complex comprises 28 beds. It is equipped with devices and machines necessary to achieve the optimum level of care catering to Medical, Surgical, and OB-Gyne cases.

Also, this study utilized purposive sampling. The level of data saturation was reached among the 14 ICU nurses selected as participants through a set of criteria for the data-gathering procedure. The study's inclusion criteria include nurses assigned to the Intensive Care Unit with a regular employment status and at least one (1) year of experience as an ICU nurse. The exclusion criteria were selecting them regardless of sex, age, religious affiliation, and cultural beliefs.

Moreover, the data source for this research was gathered primarily from the participants' input through an in-depth, one-on-one interview. The nurses who participated in this study were considered primary data sources. In contrast, the related literature and studies are secondary data sources that support the information gathered from the primary data sources.

.Furthermore, the researcher formulated the following logical course of action to achieve a systematic and organized data collection. The first step was developing the interview guide questions to be evaluated by validators and checked by the adviser and panelist. Then, the researcher got the approval to conduct the study from the Master of Arts in Nursing Program Chair of Davao Doctors College, Inc. After obtaining approval from the Master of Arts in Nursing Program chair of Davao Doctors College, a letter of permission to conduct a study was submitted to the Medical Center Chief and the Chief Nurse of the hospital setting. After approval, the participating ICU nurses' informed consent was secured before data gathering. Also, before gathering data, participants had an orientation regarding the nature of the study, its purpose, and the data collection procedure and duration. Included in the orientation were the rights of the participants in the study that included, but not limited to, the right to self-determination, which speaks about their voluntary decision, free from coercion of any form, right to ask questions, right to refuse to give information, the right to withdraw from the study. The participant's right to privacy and confidentiality was also observed. Moreover, participants were informed that the interview would be audio-recorded.

The investigator conducted a Focus Group Discussion (FGD) involving seven ICU nurses. The researcher encouraged the participants to answer the questions in their language (e.g., Tagalog or Visayan Language). The FGD took approximately 30 minutes to 1 hour. To clarify and gather more information, the researcher conducted an in-depth one-on-one interview with the other seven ICU nurses on their available time in the same setting as the FGD.

The study results were transcribed by the researcher and were re-evaluated by the participants themselves. In addition, the researcher compiled and analyzed the results. 6-step Van Manen's hermeneutic phenomenological approach was used to analyze the qualitative data. It includes: 1. Studying and approaching the nature of experience, 2. In-depth study of experience, 3. Reflecting on the inherent themes of the phenomenon, 4. Interpretative rewriting, 5. Maintaining a strong and directional relationship with the phenomenon, and 6. Conformity of the study context with the components and the whole (Khademi & Imani, 2022).

Also, all data were anonymized. No personal identifiers were linked to interview transcripts or any other data collected. Data were securely stored following institutional guidelines. Participation in the study was entirely voluntary. Also, the researcher will only accept people connected with the study who will ask for any information about the data gathered. All the collected data will be kept confidential and accessible only to the researchers. After the study, the participants may receive a copy of the results if they ask for it. Lastly, all the raw data will be disposed of after the study.

Results and Discussion

Table 1. Participants' Profile.

Code	Gender	Age	Study Group
P 1	F	36	IDI
P 2	F	35	IDI
P 3	F	30	IDI
P 4	M	34	IDI

P 5	M	36	IDI
P 6	F	36	IDI
P 7	F	34	IDI
P 8	M&F	28-40	FGD

Purposive sampling was utilized to choose the participants for this research. To reach a level of data saturation, 14 ICU nurses were selected as participants for this study through a set of criteria for the data gathering procedure. They are regular hospital employees with at least one year of work experience as ICU nurses. Seven (7) ICU nurses underwent an in-depth one-on-one interview (IDI), while the other seven (7) were considered for the focus group discussion (FGD).

Van Manen's methodological structure, rooted in phenomenology, offered a comprehensive framework for exploring the lived experiences of ICU nurses when caring for postoperative patients. Nurses' expertise was investigated through in-depth interviews, focusing on their subjective perceptions, emotions, and reflections. The data collected were analyzed and interpreted using thematic analysis, and common themes and patterns in nurses' experience caring for postoperative patients were identified.

Table 2: Sample of Table of Formulated Meanings and Significant Statements

Significant Statements	Formulated Meanings
As an ICU nurse, I have experienced many challenges in caring for or admitting postoperative patients for years. One of the examples is the trauma patient, wherein those patients are very toxic and these patients are bleeding.	This emphasizes the demanding nature of caring for postoperative patients, particularly those with complex trauma or critical conditions. It highlights the importance of managing pain effectively in holistic postoperative care.

Through phenomenological reduction, the essence of these experiences was distilled to uncover the underlying meanings and significance. Van Manen's method encourages researchers to engage in imaginative variation, considering alternative perspectives and interpretations to deepen understanding.

Table 3: Sample of Table of Development of Essential Themes

Significant Statements	Formulated Meanings	Cluster Themes
My typical routine in handling postoperative patients upon endorsement, I usually check the laboratories, the unusualities, and abnormalities, and upon checking the patient, upon inspection and assessment... review all the contraptions and the drainage of the patient, bleeding if there is any bleeding and then referrals that need to be referred to the doctor for proper management of the patient.	This focuses on the holistic approach to care, attending to patients' emotional and physical needs to facilitate their healing.	2.1 Giving quality patient care

Emergent Theme 1: Emergent Theme 1: Commitment to care

The Emergent Theme of commitment to care reflects ICU nurses' intrinsic dedication and compassion that they bring to their profession by encountering a myriad of experiences. Encountering myriad experiences means experiencing a wide variety of different events, feelings, or situations. It implies diversity, abundance, and richness in the experiences one has or currently has. These experiences range from joyful moments to challenging times, from learning opportunities to unexpected outcomes. A myriad of experiences can shape a person's perspective, knowledge, and understanding of the world around them. It can help individuals grow, learn, and adapt to different circumstances. Many experiences contribute to personal development and can lead to a more enriched and fulfilling life.

Further, the commitment to the care of ICU nurses is crucial for ensuring the wellbeing of both the nurses themselves and the patients under their care. By recognizing the aspects of commitment to the care of ICU nurses, healthcare organizations can contribute to the wellbeing, job satisfaction, and retention of ICU nurses, ultimately leading to better patient outcomes and a healthier work environment for all involved. This is further described in the following cluster themes: 1) Feeling of fulfillment, 2) Facing the challenges, and 3) Getting exhausted.

Cluster Theme: 1.1 Feeling of fulfillment

The cluster theme captures the intrinsic reward nurses experience from caring for patients and their sense of duty toward their wellbeing. Finding fulfillment at your job can be difficult for many people. However, satisfaction is a familiar concept for those in the healthcare community. If you like lending a hand to people, have aspirations of growing in your profession, and believe it is essential, nursing is a feasible career choice that can provide you with a distinct sense of success and fulfillment, and it's a growing field. Working with what is perceived as the "core" of one's profession is thus pivotal in achieving professional fulfillment (Gadolin et al., 2020).

The participants shared that even the most minor victories—just carrying out a simple task—bring incredible joy to the ICU nurses. As a researcher, daily work responsibilities can sometimes be challenging and overwhelming. However, considering these challenges as an opportunity to learn and improve oneself can lead to an unparalleled sense of fulfillment. One factor that encourages healthcare professionals to pursue a career in nursing is the desire to help others (van der Wath & van Wyk, 2020). With the variety of roles a nurse can have, you can choose any you are most interested in and where you can be effective and find fulfillment.

Cluster Theme: 1.2 Facing the Challenges

Nurses play an essential part in the care of surgical patients, from assessment to rigid monitoring to pain medications and prompt referrals that will significantly improve patient outcomes. ICU nurses work tirelessly to ensure that each patient receives the highest standards of care, but they are often met with numerous challenges. From managing complex pain management protocols to monitoring vital signs, administering medications, and preventing complications, the ICU nurses are tasked with many responsibilities that require exceptional skill and attention to detail. Moreover, they must navigate the patients' and their families' emotional and psychological needs during this critical period.

Pain is a common occurrence after almost all types of surgical procedures and is the most significant postoperative problem in the patient's eyes. This is why prompt and adequate pain relief is a critical nursing intervention. Inadequate postoperative pain control may result in adverse physiologic effects in the acute postoperative setting and impact the probability of experiencing chronic pain syndrome (Park et al., 2023). Bleeding is also one of the complications after surgery that nurses should watch out for. Bleeding complications are associated with worse clinical outcomes, including a higher risk of infection, ischaemic events attributable to hypo-perfusion (e.g., myocardial infarction, acute kidney injury), in-hospital mortality, and transfusion-related adverse events (Al-Attar et al., 2019).

Essentially, the common challenge the participants experience postoperatively is pain management. As we all know, pain is the fifth vital sign (Pozza et al., 2021). Nurses can use two tools to assess pain: the numeric rating scale or the visual analog scale. As a researcher, it is essential to educate patients about their pain and administer their medications appropriately, with the correct timing and dosage, as it is a core competency that all nurses should practice carefully.

Participants also mentioned the possibilities of surgical site bleeding and how it challenges them as it will be tedious to secure a blood unit and the meticulous monitoring for any blood transfusion reactions. Nurses should keep in mind that early recognition and treatment of bleeding problems reduce surgical morbidity and mortality.

Cluster Theme 1.3: Getting exhausted

ICU nurses are medical professionals who work in high-pressure environments, caring for critically ill patients who require constant monitoring and specialized care. The nature of their work can be physically, mentally, and emotionally demanding, often leading to exhaustion. Exhaustion is a state of extreme physical or mental fatigue resulting from prolonged periods of stress, overwork, or lack of rest. It can manifest in various ways and impact a person's wellbeing.

ICU nurses are responsible for caring for multiple critically ill patients simultaneously, each with complex medical needs. The high workload and the need to provide personalized care to each patient can be overwhelming and lead to burnout (Almenyan et al., 2021). In addition, traumatic events such as patient deaths or medical emergencies often confront critical care nurses, which can affect the delivery of care they provide to patients and negatively impact the nursing profession (Olaleye et al., 2022). Moreover, aside from the mental and emotional stress experienced by nurses, ICU nursing often involves physically demanding tasks, such as moving and positioning patients, administering medications, and responding to emergencies (Moghadam et al., 2019; Moghadam et al., 2021).

Participants' fatigue can worsen the possibility of practice errors, reduce patient safety and quality of care, and enhance staff burnout and turnover. As an ICU nurse, I can attest to compassion fatigue. It can seriously compromise one's wellbeing when combined with resource scarcity and staffing issues. Overall, the combination of high patient acuity, emotional strain, physical demands, and possible lack of resources have made ICU nurses feel exhausted and burnt out. Healthcare organizations need to prioritize the wellbeing of their nurses and provide support to help them cope with the challenges of working in the ICU. "Workplace wellbeing" is a relatively new concept that includes personal improvements to employees in job satisfaction, mood, personal and professional growth, engagement, and competence. Nurses who experience workplace wellbeing generally remain in their jobs longer, are more resilient, and exhibit positive, caring behaviors (Adams et al., 2019).

Emergent Theme 2: Dealing with the challenges and demands of ICU

The Emergent Theme deals with the challenges and demands of the ICU. Working in ICU can be highly demanding and challenging due to the critical condition of the patients and the complexity of care required. It presents a vast variety of challenges that can test the mettle of even the most seasoned healthcare professionals. From managing multiple complex cases simultaneously, to making split-second life-or-death decisions, the demands of the ICU are relentless and unforgiving. The emotional toll of witnessing suffering and loss, coupled with the physical and mental strain of long hours and high-stress situations, can take a toll on even the strongest of individuals.

ICUs are well known for their stressful work environment. Previous studies have shown that ICU nurses are at greater risk of Post Traumatic Stress Disorder (PTSD) than nurses working in other units and that ICU healthcare workers have higher levels of anxiety and depression (Wozniak et al., 2021). In order to sustain their well-being despite the difficulties and demands of the ICU and continue to provide quality care, ICU nurses often rely on a variety of coping mechanisms to navigate the challenges they encounter in their daily work. To wit, the thematic statements that compose this theme are as

follows: 1) Giving quality patient care, 2) Keeping calm, 3) Thinking quickly and critically, 4) Being flexible, and 5) Practicing self-care and maintaining Professionalism.

Cluster Theme 2.1: Giving of quality patient care

The ICU serves as a critical bridge between surgery and recovery for postoperative patients. ICU nurses are essential in delivering high-quality patient care in this high-stakes environment so patients with surgery have the most remarkable possible outcomes. Their expertise, compassion, and diligence are critical to managing the complex needs of postoperative patients during this crucial phase of their recovery.

Postoperative patients need specific care and attention in the intensive care unit (ICU) as they heal after surgery and deal with physical pain, emotional misery, and psychological difficulties. The holistic approach to care recognizes the interconnectedness of the mind, body, and spirit and aims to promote healing and enhance patients' overall quality of life. Thus, holistic care potentially influences patient's mental health, recovery rate, and satisfaction (Kotwani et al., 2021).

The holistic approach to care shown by the participants acknowledges that these patients are more than just their medical condition and considers their individual needs, preferences, and values. One participant also mentioned that her contribution to the patient's recovery was encouraging them to stay positive. As a researcher and ICU nurse, emotional support for patients is critical for achieving patient-centered care. It is recognized as an essential element in safe, high-quality patient and family-centered care. Patient experience is positively enhanced when care encompasses both clinical and emotional aspects. Emotional support is composed of three components, including a cognitive understanding of patient needs, an affective imagination of what the patient values, and an altruistic action to alleviate the patient's pain (Bradshaw et al., 2022)

Cluster Theme 2.2: Keeping calm

Working in the ICU can be challenging and demanding, especially for nurses caring for critically ill and postoperative patients. In this high-pressure environment, the ability of ICU nurses to remain calm and composed is crucial for ensuring patients' safety, wellbeing and optimal care. The cluster theme illustrates that remaining calm under pressure is vital for ICU nurses, enabling them to think clearly, act efficiently, and provide high-quality care for critically ill patients.

The ability of the participants to remain calm in the face of stress and adversity is essential for providing safe, effective, and compassionate care to critically ill and postoperative patients. A quiet demeanor enables nurses to uphold patient safety, foster teamwork, provide emotional support, build personal resilience, and serve as role models for their colleagues. In addition, by prioritizing composure and maintaining a sense of calm in the ICU setting, nurses can significantly impact patient outcomes, enhance the quality of care, and promote a positive work environment for all members of the healthcare team. Furthermore, being aware of the changing reality is staying calm and optimistic while under pressure. This intentional practice allows a person to shift from viewing challenges as roadblocks to seeing them as problems to be solved and learned from (Brassey & Kruyt, 2020).

Cluster Theme 2.3: Thinking quickly and critically

Intensive care unit nurses are at the forefront of managing critically ill and postoperative patients in a fast-paced and high-stress environment. Their ability to think quickly and critically is essential for making timely decisions, assessing complex situations, and providing life-saving interventions.

Critical thinking is a goal-oriented, high-level thinking activity that involves knowledge, attitudes, and analysis. Essential thinking skills entail carefully assessing a client's problem, confirming and generalizing relevant evidence, evaluating the accuracy of evidence through logical inference, and determining the appropriate way to solve the problem. Like nursing, critical thinking uses a systematic approach to solving problems. It is a patient-centered assessment mechanism through which nurses integrate the collected data, apply professional knowledge to identify crucial clues, and then propose an optimal problem-solving strategy. Critical thinking skills are fundamental skills that nurses use when making independent judgments. At the same time, nurses' characteristics, e.g., age, education, position title, and seniority, have been confirmed to affect their critical thinking skills (Yang et al., 2019).

Even after spending considerable time in the critical care unit, these individuals still face daily obstacles in thinking quickly and critically. As nurses, especially in the ICU, we must process large volumes of information and develop critical thinking skills to make clinical decisions. Thus, measuring nurses' disposition toward critical thinking and their critical thinking skills is essential (Ali-Abadi et al., 2020). Consequently, a nurse who can think critically will provide better patient care

Essential Theme 2.4: Being flexible

Healthcare services are one of the most critical areas of sustainable development in most human societies due to their direct relationship with human health. In the fast-paced and ever-changing environment of the ICU, nurses play a vital role in providing comprehensive and high-quality care to critically ill and postoperative patients.

ICU nurses are remarkable due to their experience with patients' different conditions. Flexibility is a key attribute that allows ICU nurses to adapt to the dynamic nature of the ICU, respond effectively to unexpected challenges, and deliver patient-centered care. The adaptation of ICU nurses by providing care directly affects the quality of nursing services and, as a result, the patient's recovery (Ashrafi & Nobahar, 2023).

The cluster theme paints a picture of ICU nurses who are highly skilled but face limitations due to a rigid work environment and lack of resources. They must be flexible, adaptable, resourceful, and work effectively as a team to overcome these challenges and provide the best possible care for their patients.

With unpredictable situations, the participants have been adaptable and flexible in dealing with different kinds of stress, whether with staffing, difficulties with procedures, or impromptu patient management. In addition, according to Akgun et al. (2019), learned resourcefulness is an acquired personality trait that helps individuals regulate their inner reactions in a way that ensures appropriate behavioral modes, and it usually consists of a set of cognitive self-control skills and behavior. It also involves certain behavioral traits such as skills to select and apply problem-solving skills, self-talk skills to control cognitive processes, postpone satisfaction, and an inclination to find yourself active and influential in response to events.

Cluster Theme 2.5: Practicing Self-care and Maintaining Professionalism

Self-care for nurses is preventive care. Nurses are more equipped to provide quality patient care and enjoy a rewarding career by caring for themselves with compassion and healthy coping activities. Nursing professionalism plays a vital role in clinical nursing. Some studies have shown that Professionalism can improve nurses' professional knowledge and skills and reduce institutional productivity and quality. Higher levels of Professionalism can improve nurses' autonomy and empowerment, increase their recognition, facilitate organizational citizenship behaviors, establish nursing care standards, and even improve quality services (Cao et al., 2023). The essential theme acknowledges the emotional toll of ICU care and the importance of self-care practices for nurses to maintain composure and provide optimal care.

The participants showed how important it is to maintain Professionalism despite the stress they are going through and how important it is to develop and embed coping strategies to sustain positive wellbeing. Moreover, being well-cared for both physically and emotionally will make you a more effective nurse. You'll have more energy and manage stress better if you take care of yourself instead of letting it control you.

In conclusion, the lived experiences of ICU nurses are filled with moments of profound responsibility and immense compassion. These healthcare professionals possess a unique insight into individuals' intricate recovery journey post-surgery. They are at the frontline of patient care, providing round-the-clock support, monitoring vital signs, administering medications, and ensuring each individual receives the specialized attention they require during the critical postoperative period.

This study delved into the experiences of ICU nurses and revealed the immense diligence with which they confront and overcome the obstacles inherent in their roles, especially with postoperative patients. Through their tireless efforts, ICU nurses not only attend to the physical needs of patients but also offer a source of comfort and emotional support during what can be vulnerable and anxiety-inducing times. It is truly inspiring to learn about the unwavering commitment and strength these healthcare professionals exhibit as they continue to navigate the complexities and uncertainties of their environment.

The findings of this study underscore the crucial role that ICU nurses play in the healthcare ecosystem and serve as a testament to their selflessness and dedication to the wellbeing of their patients. Their ability to handle high-pressure situations with grace and compassion is a testament to their Professionalism and commitment to providing the highest quality of care.

Implications and Recommendations

This study aims to explore ICU nurses' lived experiences when caring for patients during the postoperative period. It primarily focused on their experiences and coping mechanisms when faced with challenges. The data gathered from this phenomenological inquiry about the lived experiences of ICU nurses have produced countless pieces of information that have implications for the practice of the nursing profession as a whole. This research touched on seldom-discussed topics and some instigated talks about the challenges ICU nurses face, personal or professional.

The findings of this research study greatly influenced the enhancement and improvement of the ICU nurses' existing knowledge about acknowledging and recognizing their everyday experiences when caring for postoperative patients, whether personal or professional tussles, that could affect their performance in the workplace.

For the nursing practice, through the poignant experiences of these participants as well as much consideration of the emergent themes and essential themes identified by the ICU nurses, it is thereby implied by the researcher to strengthen the participant's professional relationship towards fellow nurses, doctors, patients, and their families. These circumstances have produced significant changes in nurse's interpersonal relations. The professional working relationship is closely related to employee participation in decision-making. Lack of this impacts team collaboration, mobilization, and recognition. Furthermore, fulfillment at work and identifying recognition puts equilibrium in ICU nurses.

The hospital's top management needs to become aware of the challenges ICU nurses face, such as changes in nursing practice, possible burnout and compassion fatigue, difficulties in the ICU setting, and lack of resources. May they hear their sentiments and involve them in the organizational decision to retain such trained nurses. This study also suggests that nurse managers improve communication and problem-solving skills to show their employees support. Also, the researcher would like to recommend that the management offer more stress management seminars and consider the nurses' needs, wishes, and suggestions.

Nursing colleges should focus on more than just the procedures commonly done in the ICU for nursing education. However, it is an essential foundation; it must also expand its magnitude in trying to consider the inclusion of the personal experiences of critical care nurses in the unit and how these experiences may affect the personal and professional aspects of their lives. Also, much consideration is to be included in lectures about using various coping

mechanisms or techniques in handling difficult situations. This would enable students or aspiring nurses who want to work as ICU nurses to be physically and mentally prepared for daily challenges.

The researcher of this study recommends that more research be done on nursing research, considering that this research is one of the first to touch this topic nationally and locally. This would further widen the information, awareness, and understanding of ICU nurses' experiences and challenges. May this study begin a new journey towards new access to a body of knowledge.

The researcher of this study has made the following recommendations for future research of the same type – studies that are focused on discovering or exploring the lived experiences of ICU nurses, may it be caring for postoperative patients or any critically ill patients – to heighten the achievement of data to confirm credibility, transferability, dependability and conformability of and in collecting qualitative data; use wider locale for data gathering and lastly using triangulation of qualitative data.

Since the data gathering was conducted in one hospital setting, it is recommended that further research include a wider locale and involve perhaps more than eighteen participants in three or more settings of the study, allowing this time the neophytes in critical care nursing to provide the trustworthiness of the study, precisely its credibility and transferability.

A mixed method is recommended to enhance the study's credibility further. The mixed method involves conducting a survey that comprises gathering, evaluating, and combining quantitative and qualitative data. Research. This will provide a better understanding of the research problem than either alone. By mixing quantitative and qualitative research and data, the researcher gains breadth and depth of knowledge while offsetting the inherent in using each approach. It will provide a strategy for developing better, more context-specific instruments.

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