

Preoperative nursing visits and the safety of adult surgical patients: a scoping review

Visita pré-operatória de enfermagem e a segurança do paciente cirúrgico adulto: revisão de escopo

Visita preoperatoria de enfermería y la seguridad del paciente quirúrgico adulto: revisión de alcance

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ABSTRACT: Objective: To map, in scientific literature, the aspects related to patient safety associated with the preoperative nursing visits. **Method:** A scoping review was conducted following the Joanna Briggs Institute model and the PRISMA Extension for Scoping Reviews guidelines. Searches were conducted in August 2025 across eight databases, and the gray literature was searched by screening the references of the articles included in this review and searching the Google Scholar. The analysis was descriptive in nature and presented using figures and tables. **Results:** A total of 1,123 articles were identified, of which 12 (100%) were included. Most of the publications consisted of literature reviews (6; 50%), descriptive exploratory studies (3; 25%), and experimental studies (3; 25%). The main outcomes identified were the quality of communication and the patient-nurse relationship, the identification of potential safety issues, and pre- and postoperative anxiety. **Conclusion:** The findings showed that the preoperative nursing visit is a relevant tool for ensuring the safety of surgical patients. The main outcomes include early recognition of problems, patient-nurse communication and interaction, reductions in levels of anxiety and stress, increased patient well-being, and emotional support.

Keywords: Nursing care. Perioperative nursing. Preoperative care. Patient safety. Scoping review.

RESUMO: Objetivo: Mapear, na literatura científica, os aspectos relacionados à segurança do paciente associados à visita pré-operatória de enfermagem. **Método:** Uma revisão de escopo foi conduzida segundo o modelo do Joanna Briggs Institute e as diretrizes PRISMA Extension for Scoping Reviews. As buscas ocorreram no mês de agosto de 2025, em oito bases de dados, e a literatura cinzenta foi consultada por meio do rastreamento das referências dos artigos incluídos na presente revisão e da pesquisa na plataforma Google Acadêmico. A análise foi realizada de forma descritiva e apresentada por meio de figuras e quadros. **Resultados:** Foram identificados 1.123 artigos, dos quais 12 (100%) foram incluídos. A maioria das publicações consistiu em revisões de literatura (6; 50%), estudos exploratórios descritivos (3; 25%) e experimentais (3; 25%). Os principais desfechos identificados foram a qualidade da comunicação e o relacionamento paciente-enfermeiro, e a identificação de problemas potenciais relacionados à segurança, e a ansiedade pré- e pós-operatória. **Conclusão:** Verificou-se que a visita pré-operatória de enfermagem constitui uma ferramenta relevante para garantir a segurança do paciente cirúrgico. Os principais desfechos englobam o reconhecimento precoce de problemas, a comunicação e a interação paciente-enfermeiro, a redução dos níveis de ansiedade e estresse, o aumento do bem-estar do paciente e o apoio emocional.

Palavras-chave: Cuidados de enfermagem. Enfermagem perioperatória. Cuidados pré-operatórios. Segurança do paciente. Revisão de escopo.

RESUMEN: Objetivo: Analizar, en la literatura científica, las relaciones entre la seguridad del paciente y la visita preoperatoria de enfermería. **Método:** Revisión de alcance, según el modelo del Joanna Briggs Institute (JBI) y las directrices PRISMA Extension for Scoping Reviews (PRISMA-ScR). Las búsquedas se realizaron en agosto de 2025 en ocho bases de datos y se llevó a cabo una búsqueda en la literatura gris, mediante la consulta de las referencias de los artículos incluidos en la presente revisión y la búsqueda en la plataforma Google Académico. El análisis se llevó a cabo de forma descriptiva y se presentó mediante

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Received: 11/11/2025. Approved: 08/11/2026.

<https://doi.org/10.5327/Z1414-44251091>



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figuras y tablas. **Resultados:** Se identificaron 1123 artículos, de los cuales se incluyeron 12 (100 %). La mayoría de las publicaciones consistían en revisiones de la literatura (6; 50 %), estudios exploratorios descriptivos (3; 25 %) y estudios experimentales (3; 25 %). Los principales resultados identificados fueron la calidad de la comunicación y la relación paciente-enfermero, la identificación de posibles problemas de seguridad y la ansiedad pre y posoperatoria.

Conclusión: Se ha comprobado que la visita preoperatoria de enfermería (VPOE) constituye una herramienta relevante para garantizar la seguridad del paciente quirúrgico. Los principales resultados abarcan la detección precoz de problemas, la comunicación y la interacción entre el paciente y el personal de enfermería, la reducción de los niveles de ansiedad y estrés, el aumento del bienestar del paciente y el apoyo emocional.

Palabras clave: Atención de enfermería. Enfermería perioperatoria. Cuidados preoperatorios. Seguridad del paciente. Revisión de alcance.

INTRODUCTION

Perioperative nursing, which began with the development of surgery, started informally with nurses providing support to surgeons, cleaning equipment, and assisting with patient care during surgical procedures. The growth of the specialty and its increasing importance led to the creation of the Association of Perioperative Registered Nurses (AORN), founded in 1949, whose mission is to unite perioperative nurses, provide education, recommend standards of care for the physical and mental well-being of surgical patients, and promote excellence in perioperative nursing practice¹. In line with the AORN, the Brazilian Association of Operating Room, Anesthesia Recovery, and Central Sterile Supply Nurses was founded in Brazil in 1991 and has been known as an Association (SOBECC) since 2011. This nationally recognized association has been a leading authority in the perioperative field, including the development of best practice guidelines to guide professionals working in the field².

SOBECC's guidelines recommend that nurses, within the context of the Operating Room (OR), utilize the unique characteristics of the sector and their perioperative knowledge to enhance the quality of care for surgical patients. Equipped with tools and experience in evidence-based practice, nursing professionals are capable of providing humane, dignified, and safe care, following the standards and stages of the Nursing Process².

In Brazil, the Nursing Process is guided by Resolution No. 736/2024 of the Federal Nursing Council³. This regulation states that the Nursing Process is organized into five interrelated, interdependent, recurring, and cyclical stages: Nursing Assessment, Nursing Diagnosis, Nursing Planning, Nursing Implementation, and Nursing Evolution².

Traditionally, the Nursing Process applied to the perioperative setting was termed by Jouclas and Castellanos in 1990 as the "Systematic Perioperative Nursing Care – SAEP"⁴. The method was subsequently referred to in Brazil as

Systematization of Perioperative Nursing Care (SAEP). In accordance with Resolution No. 736/2024, the currently most appropriate nomenclature is the Perioperative Nursing Process (PEP, Processo de Enfermagem Perioperatória). The PEP aims for excellence in care, based on knowledge and the operationalization of perioperative care, and promotes the continuous improvement of the various responsibilities of nursing professionals⁵. Care for surgical patients encompasses both the individual's physical preparation for anesthesia and surgery and psychosocial support, with the aim of preparing them to face the procedure.

As proposed by the SAEP model, the nursing "preoperative assessment" stage includes the "preoperative visit" as an essential tool of the PE, which must be conducted in the immediate preoperative period and represents the first contact between the patient and the perioperative nurse⁴. At this point, the nurse, drawing on their knowledge, reasoning, and clinical assessment, observes the patient's general and specific conditions that may impact their surgical experience. Individualized care and attention to psycho-emotional aspects must be integral to patient care⁴.

Patient safety is characterized by its multidimensional nature, in which aspects of physical, emotional, procedural, and informational safety are considered to ensure dignified care. Furthermore, in the surgical context, patient safety is supported by individualized follow-up by the nurse through the Preoperative Nursing Visit (PNV) to ensure that the patient arrives at the OR in the best possible clinical condition and that high-quality care is provided⁶.

In 2008, the World Health Organization, through the Second Global Patient Safety Challenge, launched the manual "Safe Surgery Saves Lives." In this manual, with the goal of improving the safety of care and reducing the number of surgical deaths and complications, four pillars for improving patient safety were outlined: recognizing surgery as a public health concern; ensuring access to surgical care in low-income

settings; implementing existing safe practices that are not yet reliably followed; and preventing anesthetic complications⁷.

At the national level, the importance of this issue is evidenced by the adoption of public policies addressing it. In 2013, the National Patient Safety Program (PNSP, Programa Nacional de Segurança do Paciente) was established through Ministry of Health Ordinance GM/MS No. 529/2013, with the aim of improving the quality of health care, including that related to surgical and anesthetic procedures⁸, and Resolution No. 36/2013 of the Collegiate Board of the National Health Surveillance Agency (RDC/Anvisa), which regulated measures for patient safety in health care services, such as the establishment of patient safety centers, making the reporting of adverse events and the development of a Patient Safety Plan for Health Care Services mandatory⁹.

According to the recommendation of the Federal Nursing Council (COFEN) for the application of the Nursing Process (Resolution No. 736/2024)¹⁰ in patient care, the PEP⁵ should include the preoperative visit as the gold standard for the “preoperative assessment” stage. However, there is a scientific gap regarding the relevance of the PNV to ensuring the safety of surgical patients, which justifies the need for this scoping review.

Therefore, the anesthetic-surgical procedure, regardless of its degree of complexity, warrants the attention of the nursing team and the individualization of care through the PEP, which includes the preoperative assessment and the PNV.

A preliminary search on the topic in the Open Science Framework (OSF) and the International Prospective Register of Systematic Reviews (PROSPERO) databases revealed only one record of a Chinese meta-analysis from 2024, which sought to explore the effects and factors affecting patient safety but did not present data on the importance of PNV.

The choice of a scoping review design stems from the need to comprehensively identify the association between the PNV and patient safety outcomes, seeking evidence in the literature to fill gaps such as its impact on patients' emotional and/or physical safety, the perspective of nursing professionals, and the main challenges in its implementation.

OBJECTIVES

The objective was to map, in the scientific literature, the relationship between the preoperative nursing visit and patient safety.

METHODS

Study design

This was a scoping review conducted according to the Joanna Briggs Institute Manual for Evidence Synthesis¹¹ and the recommendations of the Preferred Reporting Items for Systematic Reviews and Meta-Analyses: Extension for Scoping Reviews (PRISMA-ScR)¹¹. The guiding research question was developed based on the Population, Concept, and Context (PCC) mnemonic, where P stands for adult surgical patient, C for patient safety outcomes, and C for preoperative nursing visit, resulting in: “What are the relationships between patient safety and the preoperative nursing visit for adult surgical patients?” The steps carried out during the review were: identification of the research question; identification of relevant studies; selection of studies; data extraction and mapping using a table; verification, summarization, and presentation of the results¹².

This review was registered on the OSF under registration: <https://osf.io/3zymc/overview>

Search for evidence

The databases used to search for the studies included in the review were Latin American and Caribbean Health Sciences Literature (LILACS), the Nursing Database (BDENF), the Virtual Health Library (BVS), MEDLINE/PubMed, the Cumulative Index to Nursing and Allied Health Literature (CINAHL), the Excerpta Medica Database (EMBASE), Scopus, and Cochrane Library. The search for gray literature was conducted through manual review of the references in the articles included in this review and a search on the Google Scholar platform, considering an analysis of the first 100 results.

The search was conducted during the month of August 2025, with no restrictions on date or language, with the assistance of an experienced librarian to evaluate the search strategy and conduct the searches in the databases.

For selection, studies were identified in the databases using the subject headings “nursing process,” “preoperative care,” “preoperative period,” and the free-text terms “preoperative nursing,” “nursing visit,” “preoperative visit,” and their appropriate variants for each database, combining them with the Boolean operators “AND” and “OR” to link the search terms.

Eligibility criteria

Participants

Publications involving a sample of adult patients aged 18 years or older were considered.

Concept

Publications addressing patient safety as a central concept were included to ensure that the assessment of patient safety-related outcomes was reflected in the results. Patient safety was defined as a set of efforts aimed at reducing risks and identifying and reducing incidents and accidents that could negatively impact healthcare service users, encompassing its multiple dimensions: physical, emotional, procedural, and informational⁵.

Context

Publications addressing the topic of preoperative nursing visits conducted by nurses working in the OR and the Post-Anesthesia Care Unit (PACU) were included, given that these nursing professionals work directly with surgical patients and possess expertise in the perioperative period.

The following were considered exclusion criteria: editorials, letters, manuals, protocols, abstracts, conference proceedings without published full-text articles, seminar reports, and opinion pieces not based on scientific evidence. In addition, articles that did not address topics related to “safety” during the PNV were excluded.

Ethical considerations

Since this is a scoping review, approval by the Research Ethics Committee was not required, given the nature of the study, which analyzed information from published and publicly available studies. Law No. 12,853, of August 14, 2013, concerning the collective management of copyright and other related matters, was complied with.

Study screening

The free version of the Rayyan online platform¹³ was used to assist in identifying and excluding duplicates, as well as in selecting the remaining articles for analysis. The titles and abstracts were evaluated independently by two authors based on the inclusion and exclusion criteria. Potentially eligible texts were evaluated in full against the inclusion criteria by two independent reviewers. The reasons for excluding

publications that were reviewed in full but did not meet the inclusion criteria were recorded and reported in the scoping review. Disagreements between reviewers at any stage of the selection process were resolved by consensus between them or through the involvement of a third reviewer.

Data extraction and analysis

Data — including title, author, year, journal, country, research objective, methodological design, study population, and key conclusions relevant to the review question — were extracted from the studies using a “Data Collection Tool” developed by the authors. This tool underwent a pilot study prior to its use in this review, involving two studies that were not included.

The results are presented descriptively, with frequency percentages, to outline the profile of the selected materials. The articles are identified by the letter “E”, followed by sequential Arabic numerals, in chronological order of publication.

RESULTS

A total of 1,123 articles were identified during the database search. After removing duplicates, 996 articles were screened based on their titles and abstracts; of these, 772 were excluded because they did not address the topic of PNV. Of the remaining 224, 36 studies were not available for free full-text access, and attempts to contact the authors were unsuccessful. The full texts of 188 articles were reviewed, and four were excluded because they described preoperative visits conducted by Intensive Care Unit nurses or anesthesiologists. Of the 184 that met the inclusion and exclusion criteria, 179 were excluded because they did not clearly link PNV to patient safety or because they were opinion pieces. In addition, six studies identified in previous versions of the database search were considered, and one article was retrieved from the gray literature. Finally, 12 (100%) studies remained for the descriptive synthesis. Details of the study selection process are presented in Figure 1.

As shown in Chart 1¹⁴⁻²⁵, the years 2014 and 2024 had the highest number of publications, with two (16.7%) articles published in each year, totaling four (33.3%) publications. The remaining years analyzed had one (8.3%) article published per year. Regarding the study designs, half of the sample consisted of literature review studies (6; 50.0%), followed by descriptive exploratory studies (3; 25%), and experimental studies (3; 25%). It is also worth noting that the majority of

the studies were Brazilian (7; 58.3%), with the remainder originating from China (2; 16.7%), the United States (1; 8.3%), Portugal (1; 8.3%), and Turkey (1; 8.3%).

Three (25%) of the literature review studies had final samples of fewer than 20 articles related to PNV^{17,21,25}, while only one (8.3%)¹⁶ included 39 articles in the final selection, and the other two (16.6%) did not specify the final sample size^{15,23}. The main databases used for the search were BIREME¹⁵⁻¹⁷ and LILACS^{16,17,21}.

Regarding the study sample, six (50.0%) included patients admitted for elective surgeries in various medical fields^{14,18-21,24}. Only two (16.6%)^{19,20} included nurses as participants in the research, in addition to the patient sample. Three (25%) studies conducted a comparative analysis between control and intervention groups, characterized by a PNV^{14,22,24}. Two (16.6%) studies¹⁴⁻²² included samples of nurses working exclusively in the OR, and one (8.3%)²⁰ included nurses working in the operating suite, which also encompasses the PACU.

The studies were categorized according to the type of relationship established between the importance of the preoperative nursing visit and patient safety. Chart 2 shows the distribution of the studies according to the category chosen by the authors. The main outcomes identified were quality of communication and the patient-nurse relationship¹⁵⁻²⁰; identification of potential safety issues^{14,17,18,19,22}; and pre- and

postoperative anxiety^{14,24,25}. In studies in which the PNV was used for comparative analysis, the intervention groups exhibited lower levels of postoperative anxiety¹⁴, stress²², and negative emotions²⁴ compared to the control groups.

DISCUSSION

The PNV has the ability to detect preoperative problems affecting the patient and family that will interfere with the delivery and evaluation of care provided during surgery and postoperative recovery^{18,19}, enabling the implementation of the PEP and more humanized perioperative care, thereby minimizing anxiety and problems related to the need for emotional security^{18,21}. Through this approach, the planning of nursing interventions is carried out more effectively and efficiently, reducing risks that could compromise the surgical procedure^{20,23,24,26}.

Thus, PNV can serve as a tool for humanizing care^{20,21}, since it allows for the establishment of a bond with the patient, helping to identify emotional changes related to insecurity, such as anxiety^{21,25}, during the preoperative period — a condition explored in ten^{14-16,18-21,23-25} of the 12 studies included in this review. Because anxiety is an emotional state that constitutes the body's response to a stressor, it can produce significant

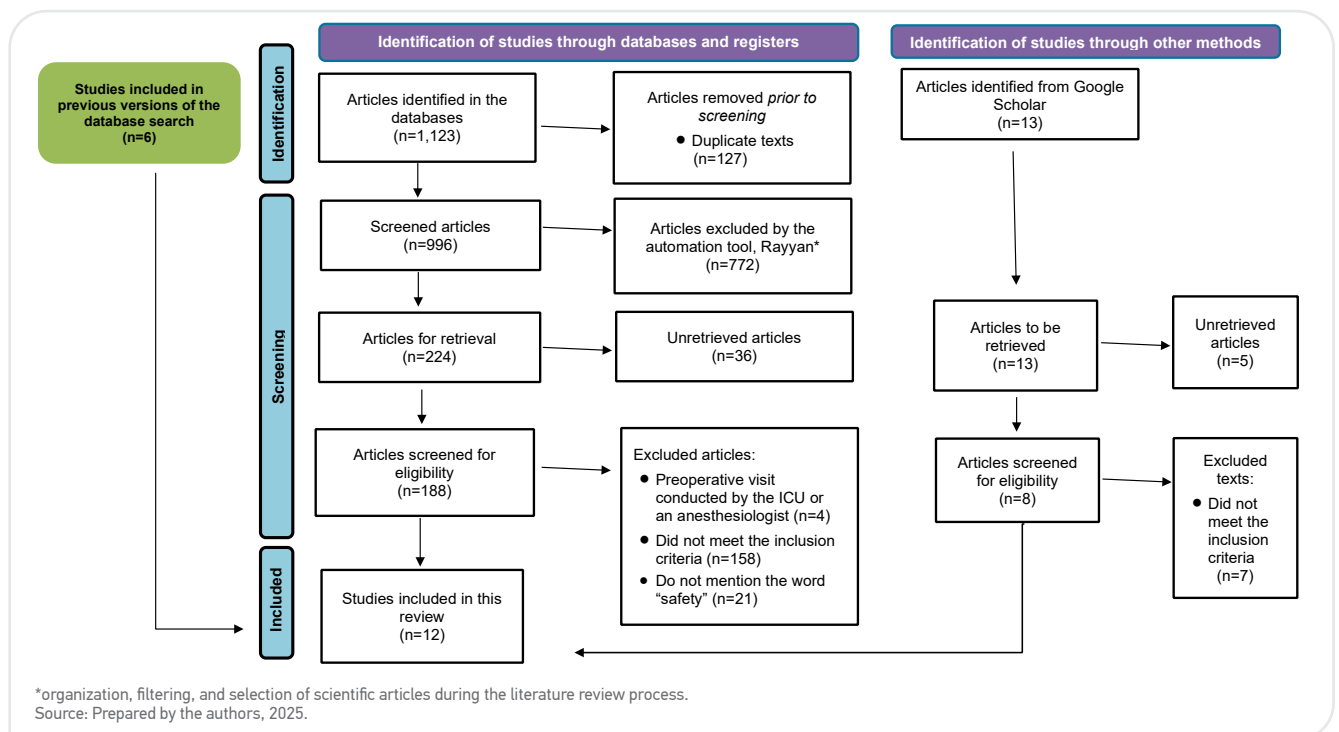


Figure 1. Flowchart of the studies included in the review. São Paulo (SP), Brazil, 2025.

Chart 1. Summary of results related to review studies. São Paulo (SP), Brazil, 2025.

Reference	Title	Year/Country/ Funding	Journal	Objective	Methodological design	Population	Relationship between patient safety and PNV
Lindeman e Stetzer ¹⁴	Effect of perioperative visits by operating room nurses	1973/United States/not mentioned in the publication	Nurs Res.	To evaluate the effect of PNV by OR nurses on the effectiveness, efficiency, and safety of nursing care, as well as on patients' levels of anxiety and overall well-being in the postoperative period	Randomized clinical trial	176 patients, aged 16 years or older, scheduled for elective surgeries, with a postoperative hospital stay of at least 48 hours. "Visit" group (n=90); "No visit" group (n=86).	The "visit" group had fewer incidents related to inefficiency, ineffectiveness, and lack of safety in nursing care. In addition, patients in the "visit" group who experienced minimal surgical trauma also had lower levels of postoperative anxiety. The PNV proved effective in enhancing the effectiveness of perioperative nursing care and reducing patients' postoperative anxiety levels.
Bianchi et al. ¹⁵	Pre-operative visit of the nurse of the surgical unit center: review of the international literature	1983/Brazil/not mentioned in the publication	Rev Paul Enferm	To prepare a literature review regarding the PNV by the OR nurse, describe the Brazilian reality regarding this topic, and address the teaching provided in the Surgical Nursing course at the USP School of Nursing regarding this nursing procedure	Literature review	Foreign literature articles, obtained through bibliographic databases, USP libraries, and BIREME	The PNV is the moment of nurse-patient interaction aimed at providing the best nursing care to which the patient is entitled; furthermore, one of its objectives is to enhance patient safety through the knowledge of more than one member of the surgical team.
Leon e Püschel ¹⁶	Pre-surgical nursing rounds: historical, conceptual and assistance aspects	2007/Brazil/not mentioned in the publication	Rev Paul Enferm	To conduct a literature review of studies that addressed the preoperative nursing visit and identify the methods used to approach and carry out this activity	Literature review	39 articles, 4 theses, 6 dissertations, and 5 books relevant to the study, using the LILACS, MEDLINE, BDNF, Dedalus, USP libraries, and BIREME databases	During the PNV, nurses can instill a sense of security in patients, in addition to deriving professional satisfaction from establishing an interpersonal relationship with the individual.

It continues...

Chart 1. Continuation.

Reference	Title	Year/Country/ Funding	Journal	Objective	Methodological design	Population	Relationship between patient safety and PNV
Ribeiro et al. ¹⁷	The importance of nurse- patient connection in the period before an operation	2012/Brazil/not mentioned in the publication	Rev Enferm UFPE on line	To clarify and reflect, based on the literature, on the importance of the nurse-patient relationship during the preoperative period and the emotional aspects involved.	Integrative review	16 articles selected from the BVS-BIREME, LILACS, and MEDLINE databases using the search terms "nurse-patient relationships", "patient care", "communication", and "perioperative nursing"	The PNV has become an indispensable procedure, as it enables nurses to identify, resolve, and refer the problems faced by patients. Nurses play an important role in the preoperative phase in instilling confidence and a sense of security in patients.
Ascari et al. ¹⁸	Perceptions of surgical patient during preoperative period concerning nursing care	2013/Brazil/not mentioned in the publication	Rev Enferm. UFPE on line	To describe surgical patients' perceptions of nursing care during the preoperative period	Descriptive qualitative study	6 patients, aged 18 to 65 years, undergoing elective surgery	During the PNV, the nurse should gather information about the patient and identify their needs to provide individualized nursing care, in order to ensure a safe and effective recovery.
Amorim et al. ¹⁹	Cuidado sistematizado em pré- operatório cardíaco: Teoria do Cuidado Transpessoal na perspectiva de enfermeiros e usuários	2014/Brazil/not mentioned in the publication	REBEn	To understand the meanings of the interpersonal relationship between nurses and patients, based on the adoption of the Transpersonal Care Theory, regarding the PNV following the surgical process	Case study	3 nurses working in the surgical ward, OR, and ICU who care for patients who have undergone cardiac surgery; 3 patients in the preoperative period of cardiac surgery, aged 21 years or older	This represents one of the authentic moments of interaction between the professional and the patient, serving as a tool that optimizes perioperative care, in which the nurse plays a significant role by providing emotional support, attention, and guidance during these moments when the patient will experience a range of emotions.

It continues...

Chart 1. Continuation.

Reference	Title	Year/Country/ Funding	Journal	Objective	Methodological design	Population	Relationship between patient safety and PNV
Dantas ²⁰	A visita pré-operatória de enfermagem: contributos para a sua implementação	2014/Portugal/ not mentioned in the publication	Scientific Repository: Nursing School of Coimbra	To understand the importance of the PNV for surgical patients; to characterize the PNV from the nurses' perspective; to identify the advantages and disadvantages of the PNV, both for nurses and for surgical patients; to identify key components for conducting the PNV from the nurses' perspective; and to contribute to the development and implementation of a structured preoperative education plan	A descriptive exploratory study of a qualitative nature	6 young adult patients admitted to the surgical ward for a general elective surgical procedure, for at least a second time; 4 nurses who had previously conducted preoperative visits	The PNV for surgical patients marks the beginning of a systematic approach to pre-operative nursing care. This procedure is essential for the patient's physical and emotional preparation. It consists of a nursing activity that facilitates effective interaction, enabling the nurse to identify, resolve, and, when necessary, refer the problems faced by the patient.
Giron e Berardinelli ²¹	O conhecimento em enfermagem sobre humanização na recepção do usuário no centro cirúrgico: revisão integrativa	2015/Brazil/not mentioned in the publication	Rev Enferm UFPE on line	To analyze scientific literature on the reception, and humanization in nursing care	Integrative review	6 articles selected from the LILACS, BDENF, and SciELO databases	The PNV promotes patient support and safety, serving as a form of reception and communication between the professional and the patient, in addition to promoting more effective and humanized nursing care.
Gürsoy et al. ²²	Preoperative stress: an operating room nurse intervention assessment	2016/Turkey/ not mentioned in the publication	ASPAN	To determine the effect of PNV performed by OR nurses on preoperative stress levels	Quasi- experimental study	179 patients, aged 18 years or older, admitted one day before the procedure. Control group (n=93): did not receive PNV; Experimental group (n=86): received PNV.	The control group had lower stress levels, and patients reported that the PNV performed by the OR nurse was effective in reducing stress; 31.2% of patients in the control group reported that they would feel better if they received a visit from the OR nurse preoperatively.

It continues...

Chart 1. Continuation.

Reference	Title	Year/Country/ Funding	Journal	Objective	Methodological design	Population	Relationship between patient safety and PNV
Oliveira e Andrade ²³	Papel do enfermeiro na garantia da segurança do paciente cirúrgico	2024/Brazil/not mentioned in the publication	REASE	To highlight the role of nurses in ensuring surgical patient safety	Literature review	Articles selected from the Google Scholar and SciELO databases, restricted to publications from 2014 to 2024	Nurses' activities within the OR, including PNV, have a significant impact on the proper functioning of safety protocols, patient care, and the protection of patients' rights. Furthermore, PNV contributes to the well-being and recovery of surgical patients.
Zhang et al. ²⁴	Effect of preoperative nursing visit on anxiety and postoperative complications in patients undergoing radical prostatectomy: a retrospective study	2024/China/ funded by the Zhejiang Province Medical Health Science and Technology Project	Arch Esp Urol.	To investigate the effect of the PNV on anxiety levels and postoperative complications in patients undergoing radical prostatectomy	Retrospective cohort study	199 patients, aged under 75 years, diagnosed with prostate cancer, without other malignant tumors. Control group (n=102): preoperative nursing routine only; observational group (n=97): preoperative nursing routine + PNV	The observational group showed lower levels of epinephrine, norepinephrine, and cortisol, fewer negative emotions, and a higher quality of life following PNV.
Guo et al. ²⁵	The effect of nurse-led preoperative visits on anxiety: an integrative review	2025/China/not mentioned in the publication	J Perianesth Nurs	To investigate the effectiveness of PNV in reducing preoperative anxiety	Integrative review	13 studies selected from the Cochrane Library, PubMed, Embase, and Web of Science databases using the search terms "preoperative", "anxiety", "nurse", and "nursing"	The PNV has been shown to be effective in minimizing patient anxiety and should be an integral part of nursing practice.

BVS: Virtual Health Library; BDENF: Nursing Database; BIREME: Latin American and Caribbean Center on Health Sciences Information; OR: Operating Room; EMBASE: Excerpta Medica Database; LILACS: Latin American and Caribbean Health Sciences Literature; PNV: Preoperative Nursing Visit; USP: São Paulo University; ICU: Intensive Care Unit.
Source: Prepared by the authors, 2025.

Chart 2. Relationship between preoperative nursing visits and patient safety, according to the studies analyzed. São Paulo (SP), Brazil, 2025.

Relationship identified with safety	Studies	n=12	%
Early identification of potential problems	E1, E2, E4, E5, E7	5	41.6
Emotional security	E3, E9, E11, E12	4	33.3
Physical and emotional safety	E1, E2, E4, E6, E7, E8, E10	7	58.3
Improvement perioperative nursing process	E1, E6, E5, E7, E10	5	41.6

Source: Prepared by the authors, 2025.

changes in an individual's vital signs, potentially leading to the cancellation or postponement of surgery, which, in turn, can generate even greater anxiety^{14,15,23,24}.

The surgical patient's own perceptions are favorable toward the implementation of PNV, as their anxiety levels tend to decrease, and feelings of tranquility and security, to increase following a conversation with the nurse^{20,22,26}.

The PNV also allows nurses to provide health education to patients and their families^{27,28}, thereby reducing emotional insecurity^{19,27}. It is also possible to establish a relationship of trust by receiving information regarding doubts, apprehensions, and physical, family, and socioeconomic problems, thereby highlighting the role of nursing in biopsychosocial care, contributing to the planning of high-quality, individualized interventions, and safeguarding patient rights²³. In this sense, the PNV can act as a light-hard technology capable of bringing the patient closer to a member of the surgical team. Furthermore, the role of the OR nurse as a transformative agent in the workplace enables professional satisfaction, not only through the establishment of an interpersonal relationship but also through a fundamental role in harm prevention and interprofessional collaboration.

However, several barriers to conducting appropriate PNV have been highlighted. Issues such as communication difficulties¹⁹ and time management²⁰ were identified in the studies selected for this review, corroborated by other articles that also cite problems such as staffing levels, lack of human resources, dedicated physical space, and a high workload^{26,28}.

It should also be noted that, although conducting the PNV is directly related to higher-quality perioperative care, contributing to greater safety for surgical patients, only six publications on this topic were found after 2013, the year the PNSP⁸ was established. Although the topic of patient safety is subsequent to the proposal of the PEP model — which includes the PNV in the first interrelated stage of the PEP — and this review identified an association between safety and

the visit, it is evident that the PNV has ceased to be a focus within the scientific community over time. The decline in research on this topic indicates that this type of intervention has not been carried out with the same frequency, which may weaken the nurse-patient relationship and significantly compromise the safety of care.

A limitation of this review is the small number of studies conducted on PNV practice performed by nurses working in the OR, PACU, or CME, highlighting that, even though it is identified as a significant step for surgical patient safety, its implementation often falls to nurses in other sectors.

CONCLUSION

The literature review identified studies that mention the relationship between PNV and patient safety, both in the physical realm, through the prevention of complications and harm, and in the emotional realm, through the humanization of care and the reduction of the individual's insecurity. The main outcomes identified include the early recognition of problems related to surgical patient safety, patient-nurse communication and interaction, as well as the possibility of providing better guidance, education, and clarification of questions regarding the procedure and its recovery — whether for the patient or their family members — in addition to reducing pre- and postoperative anxiety and stress levels, and increasing patient well-being and emotional support. The PNV enables the OR nursing team to have more comprehensive and detailed information about the patient, allowing for the early identification of potential problems and providing an individualized, continuous, and integrated PEP with the care initiated in other units.

Studies that map the occurrence of patient-related adverse events before and after the implementation of the PNV can highlight the importance of this activity performed by nurses,

emphasizing its relevance as an essential strategy or tool for the safety of surgical patients.

A limitation of this study was the use of only publicly available articles.

FUNDING

This study was partially funded by the Coordination for the Improvement of Higher Education Personnel – Brazil (CAPES), Funding Code 001.

CONFLICT OF INTERESTS

The authors declare no conflicts of interest.

AUTHORS' CONTRIBUTIONS

FRA: Conceptualization, Data curation, Investigation, Methodology, Writing – original draft, Writing – review & editing. UGM: Visualization, Writing – review & editing, Writing – review & editing. VBP: Formal analysis, Project administration, Methodology, Writing – original draft, Writing – review & editing. CGC: Data curation, Investigation, Methodology, Writing – original draft. JRG: Conceptualization, Supervision, Writing – original draft, Writing – review & editing.

DECLARATION OF ARTIFICIAL INTELLIGENCE (AI) USE

The Rayyan platform was used to organize, filter, and select scientific articles during the literature review process.

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