



**The Lived Experiences
of Surgical Intensive Care Unit (SICU) Nurses
in the Recovery Journey of Post-Coronary Artery Bypass Graft (CABG) Patients**

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Abstract

This research study examined the lived experiences of Surgical Intensive Care Unit (SICU) nurses in the recovery journey for post-Coronary Artery Bypass Graft (CABG) patients. Anchored by descriptive phenomenological design and Giorgi's method, the research aimed to unveil the clinical, emotional, and ethical aspects of care as expressed through the narratives of seven purposively selected participants. Five major themes were identified from the data and findings: Clinical Mastery and Adaptive Initiative, Professional Agency and Team Dynamic, Precision-Driven Care and Safety Focus, Emotional Fortitude and Mental Resilience, and Ethical Anchoring and Moral Accountability. These themes reflected how SICU nurses evaluate objectively, exhibit sound judgement under pressure, collaborate with multidisciplinary teams, handle emotional demands, and honor ethical standards in the high-stakes environment of post-CABG recovery. The results emphasized the complex responsibilities of SICU nurses—not only as clinical experts, but also as advocates, emotional supports, and moral stewards within the healthcare team. In response, the study recommended Project COMPASS, a six-month program developed to reinforce post-CABG nursing care through systematized preceptorship, integrated professional coordination, and reflective practice. In summary, this study supports the expanding and evolving understanding in cardiac critical care nursing and highlights the significance of sustained professional support that reflects the intricate situations SICU nurses face in practice.

Keywords: *Surgical Intensive Care Unit Nurses, SICU, Coronary Artery Bypass Graft (CABG), CABG, Recovery Journey*

Introduction

Nurses are central to healthcare, ensuring continuity of care and serving as frontline responders. In the Philippines, chronic staffing shortages, particularly in public hospitals, increase workloads and contribute to higher morbidity and mortality, especially among patients with cardiovascular diseases—the leading cause of death locally and globally (Philippine Statistics Office, 2024; WHO, 2021).

Coronary Artery Bypass Grafting (CABG) is a key intervention for severe coronary blockages, improving survival and long-term cardiac function (Junio, 2023; NHS, 2024). However, recovery requires highly specialized care. Post-CABG management benefits from early nursing interventions, patient education, and emotional support, which enhance rehabilitation adherence and reduce complications (Fan et al., 2023; Khatun et al., 2021).

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SICU nurses play a pivotal role through continuous monitoring, early detection of complications, interdisciplinary collaboration, and emotional support for patients and families. Despite this, research rarely captures their lived experiences, with literature focusing primarily on patient outcomes or perspectives. This study addresses that gap by exploring the experiences of SICU nurses caring for post-CABG patients through the central question: “What are your lived experiences as a SICU nurse caring for patients recovering from CABG surgery?”

Cardiovascular Disease and CABG

Cardiovascular disease remains the leading global and national cause of death, with coronary artery disease as a major contributor. While lifestyle changes and medication help, CABG is often essential to restore blood flow, reduce future cardiac risk, and improve quality of life (National Heart, Lung, and Blood Institute, 2022).

Post-CABG Recovery and Psychological Considerations

Recovery after CABG involves both physical and psychological dimensions. Patients often experience anxiety, depression, and uncertainty, which can hinder rehabilitation and slow healing (Bachar & Manna, 2023; Thakare et al., 2022; Fan et al., 2023). Positive coping mechanisms and social support improve outcomes, while unresolved emotional distress can delay recovery and increase healthcare utilization (Chen et al., 2022; Khatun et al., 2021).

Role of SICU Nurses

SICU nurses are integral to both the clinical and emotional recovery of post-CABG patients. They continuously monitor vital signs, detect complications early, provide education, and offer emotional support, ensuring patient safety and promoting adherence to care plans (Dikmen et al., 2021). Their work is emotionally demanding, often involving moral distress, heavy workloads, and psychological strain (Choi & Boyle, 2014; Alasad et al., 2015).

Methods

This study employed a descriptive phenomenological approach grounded in Giorgi's (2009) framework to explore the lived experiences of SICU nurses caring for post-CABG patients. Purposive criterion sampling (Patton, 2015) identified seven full-time nurses who met inclusion criteria related to SICU experience, direct post-CABG care, and communication ability. Saturation was reached by the fifth interview, with two additional participants included to confirm that no new insights emerged.

The study was conducted in a Level 3 cardiovascular-specialized hospital in Quezon City, Philippines. Semi-structured, face-to-face interviews provided structure while allowing participants to share in-depth accounts (Gil et al., 2008). Interviews began with the broad question, “What have been your experiences as a SICU nurse with post-CABG patients throughout their recovery journey?” and included prompts on patient safety, risk identification, emotional challenges, and professional development. Sessions lasted 30–45 minutes, were held during participants' free time to prevent fatigue, and were audio-recorded with informed consent in compliance with the Data Privacy Act of 2012.

Ethical approval was obtained from the University Research Ethics Office and hospital authorities, including the Ethics and Review Board. A reflexive journal minimized researcher bias, and a screening tool ensured participants met inclusion criteria.

Confidentiality and voluntary participation were emphasized, and recordings were securely stored and deleted after the required retention period.

Data Analysis

Data were analyzed using Giorgi's Descriptive Phenomenological Method. Transcripts were repeatedly read to gain an overall understanding, then segmented into meaning units reflecting shifts in thought or emphasis. Each unit was transformed into psychologically sensitive statements that remained faithful to participants' intentions. These statements were grouped into subcategories and broader categories, which were synthesized into major themes capturing the essence of SICU nursing care for post-CABG patients (Broome, 2011; Giorgi, 2009). This method ensured a rich, coherent description grounded in the nurses' lived experiences.

Figure 1. *Data Gathering Procedure*



Trustworthiness and Ethical Considerations

This study ensured trustworthiness following Lincoln and Guba's (1985) five criteria—credibility, dependability, transferability, confirmability, and authenticity—as expanded by Kyngäs et al. (2019).

Credibility was strengthened through triangulation, conducting interviews across different shifts to capture diverse contexts and reduce time-specific bias (Polit & Beck, 2018). A reflexive journal helped the researcher monitor assumptions and minimize influence from their nursing background.

Dependability was maintained through member checking, allowing participants to review interpretations, and validation by an external reviewer to ensure alignment with the original data.

Transferability was supported by detailed descriptions of the study setting and participant characteristics, enabling readers to determine applicability to similar contexts.

Confirmability was achieved through a reflexive journal and an audit trail documenting decisions throughout data collection, coding, and analysis, ensuring transparency and minimizing bias.

Authenticity was maintained by presenting participants' perspectives faithfully, representing the diversity of experiences without distortion.

Ethical approval was obtained from the Far Eastern University Ethics Research Committee. Participants' rights and welfare were prioritized, and informed consent ensured voluntary participation, confidentiality, and the option to withdraw at any time. Pseudonyms were used, and data were securely stored.

Social Value: The study provides insights into how SICU nurses support post-CABG patient recovery, contributing to nursing knowledge, informing clinical practice, and strengthening patient care outcomes while ensuring a respectful and safe environment for participants to share their experiences.

Results and Discussion

Profile of Key Informants

Seven full-time SICU nurses caring for adult post-CABG patients participated in this study. Selection was based on specific inclusion criteria to ensure relevant, grounded clinical experience, and pseudonyms were used to maintain confidentiality. All participants were actively assigned to the SICU during data collection, providing insights from daily clinical practice.

- **Kylie**, 34, Nurse III, 3 years SICU experience, trained in Critical Care, CVNP certification, NMT, and PCC.
- **Elaine**, 40, Nurse III, 18 years in nursing, 6 in SICU, 8 in CCU.
- **Katrina**, 32, Nurse III, 12 years overall, 3 in SICU.
- **Bubbles**, 37, Nurse III, 14 years overall, 8 in SICU.
- **Bianca**, 34, Nurse III, 2 years SICU, 6 years in med-surg ward.
- **Peter**, 41, Nurse III, 6 years in SICU.
- **Reuben**, 37, Nurse III, 4 years SICU, 10+ years overall.

Analysis of semi-structured interviews revealed five major themes: **Clinical Mastery and Adaptive Initiative, Professional Agency and Team Dynamics, Precision-Driven Care and Safety Focus, Emotional Fortitude and Mental Resilience, and Ethical Anchoring and Moral Accountability.**

The narratives illustrated the technical, emotional, psychological, and ethical dimensions of SICU nursing. Nurses emphasized constant vigilance, balancing urgency with accuracy, relying on teamwork, and deriving fulfillment from patients' recovery. Collectively, their experiences highlight the integration of skill, intuition, and compassion that defines SICU practice and underscores their pivotal role in supporting post-CABG recovery.

Theme I: Clinical Mastery and Adaptive Initiative

This theme reflects how SICU nurses demonstrate sharp clinical thinking, rapid decision-making, and proactive strategies in caring for post-CABG patients. Clinical mastery extends beyond routine tasks, involving in-depth analysis of patient conditions, early identification of complications, and timely interventions.

Critical Thinking in Action

Nurses emphasized the role of analytical thinking and clinical reasoning in daily

practice. Critical thinking involves holistic patient assessment, understanding underlying causes of clinical changes, and applying knowledge to make independent, well-informed decisions.

Decisive Moments Under Pressure

This subcategory highlights nurses' ability to act swiftly and independently during urgent, life-threatening situations where immediate intervention is critical to prevent deterioration.

Preempting Complications

Nurses anticipate potential post-CABG complications, such as bleeding or tamponade, using their experience and knowledge of surgical outcomes to remain vigilant.

Interpreting Subtle Warnings

SICU nurses develop sensitivity to nuanced or ambiguous clinical cues, allowing early detection of patient deterioration.

Proactive Adjustments

Nurses continuously adapt care plans in response to patient needs. Even minor interventions, such as managing temperature or adjusting routines, are guided by careful clinical reasoning.

Table 1. *Significant Statements and Its Meanings for Theme I*

Significant Quotes	Meanings	Category
Kylie: “...hindi kami yung de-susi lang [<i>place hands in chest</i>], so parang dapat parang marunong ka rin mag-manage, hindi yung taga-carry out ka lang ng orders ng doctors. Kailangan marunong kang tumingin ng nakikita mo yung condition ng patient, bakit siya nagtatachy, bakit siya nagdedesat, iniisip mo rin yung underlying cause nung mga problems ng patient...”	Critical care nurses see themselves as autonomous professionals, actively assessing patients, making real-time judgments, and responding early. They interpret signs like tachycardia or desaturation through constant analytical thinking to prevent complications in the SICU.	Sharpened Clinical Judgment
Reuben “It all boils down to assessment...Yung iba kasi nagmamadali...[<i>pause</i>] Monitor agad sila nakatingin. Hindi nila muna tinitignan yung patient.”	SICU nurses view patient assessment as the foundation of safe care, cautioning that overreliance on monitors can weaken clinical judgment. True critical thinking combines visual, physical, and intuitive assessment, with technology serving only as support. Prioritizing the patient over the machine ensures attentive, holistic care.	
Katrina “You have to learn how to have a critical thinking of addressing the incoming [<i>hand gestures</i>] or the possible problems.”	Critical thinking in intensive care develops through experience and reflection. Nurses view protocols as a starting point, emphasizing anticipation, interpretation of subtle cues, and early action. This proactive approach relies on constant alertness, analysis, and preparedness.	
Elaine “You should know the history of the patient... [<i>pause</i>] from that, ma-anticipate mo na... You know what to expect...”	Knowing a patient’s clinical history is essential for SICU anticipatory care. Nurses use past conditions, surgical details, and risk factors to guide monitoring, set expectations, and act early, enabling proactive prevention of complications.	

<p>Peter</p> <p>“Important din dun bilang isa sa mga responsibility ng nurses should know the signs and symptoms [<i>counts using fingers</i>] ng mga complications na yun in order for you nga... to timely refer...para maagapan natin siya.”</p>	<p>Recognizing early signs of complications is a core responsibility of SICU nurses. Awareness prompts decisive action, including timely referral to the medical team. Vigilance paired with immediate response is crucial to prevent deterioration, emphasizing that early intervention relies on both knowledge and timely action within the critical window.</p>	
<p>Elaine</p> <p>“Kailangan i-manage namin agad, hindi pwedeng wala lang o mag-aantay ka ng iba pa. Kailangan mabilis.”</p>	<p>Immediate action is crucial in critical care. Nurses emphasized that delays can endanger patients, while prompt responses demonstrate accountability and competence, as they are often first to detect and address early deterioration.</p>	
<p>Bubbles</p> <p>“so siyempre, kung ganun, kailangan. Depende pa rin kung intubate pa rin or intubate. So, depende pa rin.”</p>	<p>SICU decision-making is highly situational, especially during high-risk tasks like airway management. Nurses adapt to patients' changing conditions, anticipating needs and responding in real time, demonstrating judgment, readiness, and teamwork.</p>	
<p>Reuben</p> <p>“Umabot sa point na nagpa-supervisor kami [<i>increased volume and tone of voice</i>]. Kasi hindi namin ibibigay yan kasi alam namin mali. Umabot sa supervisor, umabot sa senior house officer, yung SHO natin na pinipilit niya niya yung order na yun pero ayaw nga namin din. So, wala. Umabot kami sa ano. Hindi namin ginawa.”</p>	<p>Nurses feel responsible for speaking up when decisions appear unsafe, even from higher authority. In critical care, they escalate concerns or refuse orders to protect patients and uphold professional duty.</p>	
<p>Reuben</p> <p>“Although syempre, hindi naman maiiwasan, basta as long as na-open ka, especially open heart, nandun lahat ng mga complications na pwede mangyari.”</p>	<p>Nurses view open-heart surgeries as inherently high-risk, requiring anticipation of complications. Repeated exposure builds clinical foresight and vigilance, making preparedness both a practiced skill and an experience-shaped mindset.</p>	<p>Anticipatory Care Strategies</p>

<p>Peter</p> <p>“So we have to watch out for bleeding. <i>[hand gestures]</i> So we should know what amount or what volume of blood should be considered alarming, that it should be referred to a surgery fellow kasi may mga first hour, dapat may mga acceptable volume lang ng blood loss. Pero ang importante rin sa lahat ng complications, we have to observe yung timely referral sa doctor.”</p>	<p>SICU nurses closely monitor post-surgical complications, particularly bleeding, interpreting findings rather than just observing. Early detection and prompt referral to the surgical team are vital for patient recovery.</p>	
<p>Bianca</p> <p>“Pero ang usual talaga kapag post-op yan, arrhythmia, nandyan yan palagi. Tapos, yun nga, pwedeng mag-re-op kasi dahil sa blood loss or bleeding yung site, hindi mo din kasi masasabi yun.”</p>	<p>Nurses anticipate common post-cardiac surgery complications like arrhythmias and bleeding, maintaining constant vigilance. Their experience emphasizes that harm reduction depends on readiness, swift action, and anticipating interventions such as reoperation.</p>	
<p>Bubbles</p> <p>“Decreased din yung o2 sat. Parang given.” So yun, kahit mga 90 yung o2 sat while intubated.”</p>	<p>Nurses view oxygen saturation as a key stability marker, especially in intubated patients. Even minor drops prompt immediate action, highlighting the importance of vigilance and early recognition of potential complications.</p>	
<p>Peter</p> <p>“Mas nade-delay ang extubation. So, syempre, pag-delay ng extubation, delay ang weaning namin from the ventilator, the longer na they have to stay in an ICU.”</p>	<p>Nurses see delayed extubation as a sign of potential recovery issues. They reassess carefully and collaborate with the team, using extubation progress as a key gauge of patient readiness and recovery.</p>	
<p>Elaine</p> <p>“Pag may dumarating, kung makapag-observe ka man, yung lahat kami, hindi lang yung nurse na mag-handle dun sa patient, dapat is attentive sa patient. Pati yung mga tutulong sa'yo na mag-assist.”</p>	<p>Monitoring in the SICU is a shared responsibility. The team remains alert to patient needs, with collective vigilance enhancing safety and supporting consistent, high-quality care.</p>	

<p>Katrina “Even the, yung as simple as thermoregulating the patient, you have to hit 35.5 temperature. You stop from there because studies show that if you overstimulate the hypothalamus beyond 35.5, the patient can develop have ng fever. Diba? [Looks at the researcher] Ganun ka-tedious siya. If you don't know the rationality behind it, something bad will happen.”</p>	<p>Even routine tasks like thermoregulation demand precision. Nurses noted that temperatures above 35.5°C can trigger fever, emphasizing how careful, informed actions and attentiveness prevent harm in the SICU.</p>	
<p>Elaine “So focus ka dun sa goal mo ng thermoregulation. Focus ka sa goal mo ng normal blood pressure.”</p>	<p>SICU nurses maintain constant focus on key physiological indicators, treating tasks like regulating temperature and blood pressure as goal-directed interventions. Their proactive, deliberate care aims to stabilize patients, prevent complications, and optimize recovery.</p>	
<p>Peter “Para alam mo yung rationale, bakit siya binigay. [pause] So assessment muna and then kailangan mo alam mo siya by heart.”</p>	<p>Peter emphasized that even small nursing interventions must be intentional, guided by awareness and clinical rationale.</p>	

Interpreting Theme I

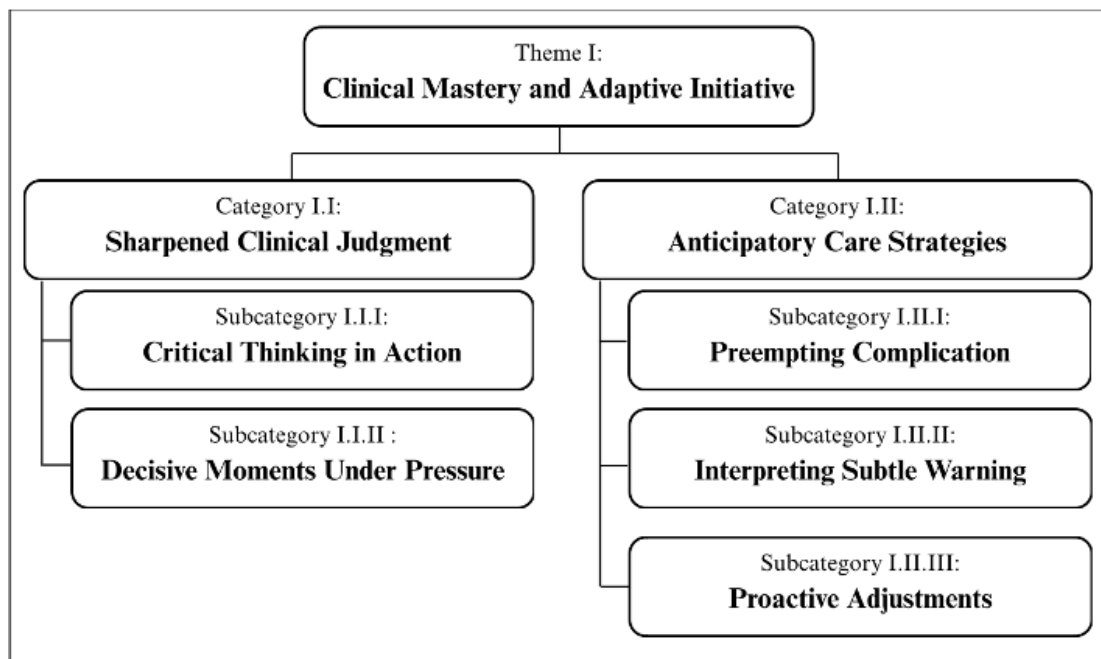
The theme *Clinical Mastery and Adaptive Initiative* illustrates how SICU nurses caring for post-CABG patients rely on more than routine skills. Their work demands sharp judgment, rapid decision-making, and proactive strategies centered on patient safety. Nurses continuously assess, anticipate risks, and act early to prevent complications, rather than simply following instructions.

Despite their expertise, participants acknowledged gaps in specialized knowledge and consistency of practice. Ahmad (2025) noted that limited CABG training can lead to uneven management of symptoms, pain, and infection control, with some subtle signs—like fever or headache—being overlooked. Research further supports the role of clinical judgment: a 2023 study in *Nursing in Critical Care* found that responses to post-operative bleeding depend on professional identity, work setting, and patient factors (Yee, 2023). Critical thinking, intuition, and teamwork also enhance nurses' ability to detect subtle changes and manage urgent situations effectively.

Overall, this theme highlights how SICU nurses integrate vigilance, anticipation, and timely action to guide post-CABG patients toward recovery. Continuous learning and structured support are essential for strengthening expertise and sustaining high-quality care.

Table 2. Summary of Categories and Subcategories for Theme I

Themes	Categories	Subcategories
Theme I Clinical Mastery and Adaptive Initiative	I.I Sharpened Clinical Judgment	I.I.I Critical Thinking in Action
		I.I.II Decisive Moments Under Pressure
	I.II Anticipatory Care Strategies	I.II.I Preempting Complication
		I.II.II Interpreting Subtle Warning
		I.II.III Proactive Adjustments

Figure 2 Hierarchy of Categories and Subcategories for Theme I

Theme II: Professional Agency and Team Dynamics

This theme highlights how SICU nurses balance independent clinical judgment with effective collaboration. In cardiac critical care, professional agency goes beyond task performance, encompassing sound decision-making, the confidence to voice concerns, and the humility to work seamlessly within a team. Nurses emphasized that autonomy and teamwork intersect to ensure safe, patient-centered care.

Independent Clinical Assessment

Autonomy begins at the bedside, where nurses make timely, evidence-based judgments, often before medical orders are available.

Confident Escalation

Nurses exercise autonomy by knowing when to escalate concerns, including refusing unsafe actions and seeking appropriate support.

Respectful Interdisciplinary Dialogue

Collaboration is grounded in respect and humility, fostering effective teamwork.

Navigating Disagreements with Integrity

Nurses maintain professionalism while standing firm during disagreements, ensuring patient safety and ethical care.

Table 3. *Significant Statements and Its Meanings for Theme II*

Significant Quotes	Meanings	Category
Katrina “So sometimes yung mga ganoong sitwasyon it's actually your call to decide. <i>[eye contact]</i> Kasi nakikita mo ng unstable papayag ka ba?”	SICU nurses frequently make rapid, independent decisions during patient deterioration, requiring moral courage and clinical responsibility. They act swiftly to protect patients, even if it means questioning or delaying planned interventions.	Autonomy within Boundaries
Bubbles “So, most of the time kasi ikaw yung kasama ng patient sa loob. So, <i>[eye conact]</i> ikaw nakakita lahat ng nangyayari sa kaniya.”	As the constant bedside presence, nurses often first detect subtle changes in patients. They quickly interpret and act on these shifts, transforming continuous observation into timely intervention and strong advocacy in the SICU.	
Reuben “So which is sila na yung nag-handle kung ano man yung naging usapan nila, in-address namin na, mam hindi namin ibigay yan, kahit anong mangyari. <i>[pause]</i> Kung gusto niya talagang ibigay yan, at inorder niya yan, siya ang magbigay, hindi namin ibigay.”	SICU nurses recognize their professional and ethical responsibilities. When faced with unsafe or inappropriate orders, they may withhold action and escalate concerns, advocating for patient safety while upholding evidence-based care, even against hierarchical pressures.	

Peter “Actually, it depends on how you communicate kasi din. Communication is also one of the keys sa pag-recover ng patient, ng aming healthcare providers.”	Nurses view communication as a crucial clinical skill that affects patient outcomes and team collaboration. Clear, respectful communication enables them to assert assessments effectively, supporting teamwork, responsiveness, and patient recovery.	
Bubbles “Mag-suggest ko, collaboration mo para ma-provide ang healthcare na need ng mga patient. <i>[hand gesture]</i> By assessment mo as a nurse, tapos ina-address naman niya ng fellow. So parang at least may coordination. Proper communication, coordination between your colleagues.”	Effective SICU care relies on collaboration, with nurses offering informed suggestions that physicians incorporate into care plans. This respectful dialogue builds trust, strengthens teamwork, and enhances patient outcomes.	Relational Competence in Collaboration
Bianca “Which is, nakikinig naman sila sa mga ganun na situation. Hindi pa nya yan kaya, dok, kasi ganito pa lang, wala pa. Intubated pa nga, dok, hindi pa nakuha yung pulmo.”	Nurses use evidence-based, respectful communication to navigate clinical authority. They offer recommendations and question unsafe decisions, advocating for patients through clear reasoning and fostering safe, collaborative decision-making.	
Katrina “We are not under them, even in the organization chart, you can review that. We are both professionals at the same level. Magkaiba lang tayo ng practice.”	Nurses view their role as parallel to physicians, grounded in distinct expertise. They resist hierarchical attitudes, seeing speaking up as an ethical duty to prioritize patient needs and uphold professional integrity.	

<p>Reuben</p> <p>“Mas kabisado namin kung anong gusto ng consultant. Kesa sa doon sa sinasuggest ng fellow, regardless ng surgery man o cardio. Kaya kunyari, may order yung cardio, <i>[think]</i> kaso kasi, minsan may order yung cardio fellow. May intensivist pa kasi kaming tinatawag. May attending na cardio, may intensivist. May iba kasi, dahil minsan sobrang daming referral, nagkakaroon ng may iba yung gusto yung cardio na may ibang gusto yung intensivist.”</p>	<p>SICU nurses navigate overlapping directives from multiple consultants by using clinical judgment, adaptability, and diplomacy. Familiarity with provider preferences helps maintain continuity and ensures patient safety.</p>	
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Interpreting Theme II

The theme *Professional Agency and Team Dynamics* underscores the importance of confident, skilled, and collaborative practice in the SICU. Nurses emphasized making independent assessments, communicating patient needs clearly, and coordinating closely with other professionals, particularly as patient conditions can change rapidly. Their sense of agency is grounded in sound judgment and effective communication, which research shows enhances response during emergencies.

Professional agency also involves recognizing limits and escalating concerns when necessary. Some nurses refused unsafe orders, demonstrating their responsibility to protect patients. Studies confirm that nurses who raise safety concerns contribute to stronger, safer care environments.

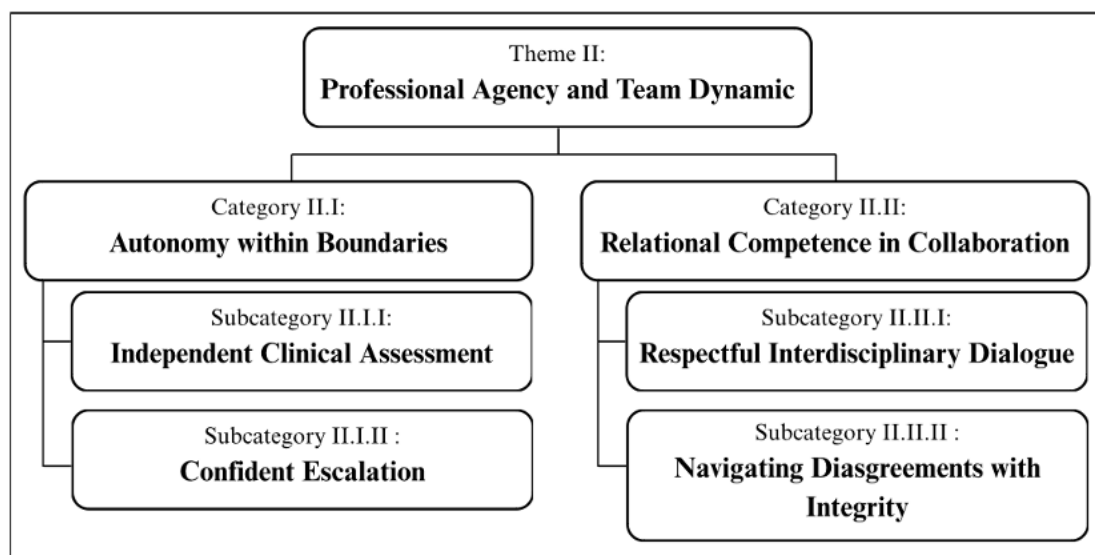
Overall, SICU nurses' experiences illustrate how autonomy and teamwork work together to ensure individualized, safe care. Supporting nurses to act confidently and collaborate meaningfully leads to better patient outcomes and higher professional satisfaction.

Table 4. *Summary of Categories and Subcategories for Theme II*

Themes	Categories	Subcategories
Theme II Professional Agency and Team Dynamics	II.I Autonomy within Boundaries	II.I.I Independent Clinical Assessment
		II.I.II Confident Escalation
		II.II.I Respectful Interdisciplinary Dialogue

	II.II Relational Competence in Collaboration	II.II.II Navigating Disagreements with Integrity
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Figure 3. *Hierarchy of Categories and Subcategories for Theme II*



Theme III: Precision-Driven Care and Safety

This theme emphasizes the vigilance and structured discipline central to SICU nursing. Nurses highlighted that patient safety depends on meticulous monitoring, clinical judgment, and prioritizing patient welfare above all else.

Detail-Oriented Surveillance

Monitoring is an active, goal-directed practice, reflecting a culture of shared responsibility and attentiveness to anticipate complications before they escalate.

Reading Beyond the Machines

While technology provides critical data, nurses integrate observations with direct patient assessment, avoiding overreliance on monitors and staying grounded in core nursing principles.

Safe Practice Grounded in Routine

Established routines anchor care, prevent chaos, enable timely interventions, and reduce variability in practice.

Zero Margin of Error

Given the high stakes in the SICU, every action demands precision and focus, as mistakes can lead to serious or irreversible harm.

Table 5. *Significant Statements and Its Meanings for Theme III*

Significant Quotes	Meanings	Category
<p>Elaine “Pag may dumarating, kung makapag-observe ka man, yung lahat kami, <i>[pause]</i> hindi lang yung nurse na mag-handle dun sa patient, dapat is attentive sa patient.”</p>	<p>Monitoring in the SICU is a shared responsibility. Teamwide vigilance ensures early detection, rapid response, and reinforces safe, high-quality care.</p>	High-stakes Monitoring
<p>Bubbles “Kasi dito, dapat wala kang ma-miss eh. Kasi siyempre, nakaano ka sa... ano ng, patient, dapat kung, kung may ma-miss ka ba, dapat hindi siya maka-affect mo sa patient. Kung paperworks okay lang, pero more on patient. Kung ganyan, kung hindi mo kaya ng ikaw, pwede ka mag-ask ng lang mo sa mga kasama mo. Kasi alam naman nila na, kasi pag nasa ICU, parang octopus eh.”</p>	<p>SICU nurses juggle multitasking and heavy documentation while prioritizing patient safety, relying on teamwork to prevent errors. Their efforts resemble “being like an octopus,” balancing multiple responsibilities simultaneously.</p>	
<p>Elaine “Ay, doc, check muna natin kasi ginagalaw pa. So if within 5 to 10 minutes hindi nagbago, yun, sige, gawa ka na ibang management. Oh, thermoregulate muna natin, masyado pang malamig yung patient. Hypothermic pa, tingnan natin kung may effect.”</p>	<p>Nurses critically evaluate machine readings, verifying them through direct assessment to ensure accurate, informed decisions that blend technology with clinical judgment.</p>	

Peter “Monitor agad sila nakatingin. Hindi nila muna tinitignan yung patient. Yun lang lagi. Yun yung pinaka-lack sila. Assessment agad.”	Some nurses increasingly check monitors before observing patients, risking missed cues. The data emphasize that safe practice begins with direct patient assessment.	
Katrina “ So if you don't go within the standards of care din, the patient suffers, you also suffer because unstable siya.” <i>[eye contact]</i>	Nurses see standards of care as vital safeguards. Adhering to protocols ensures patient safety, upholds professional integrity, and prevents harm.	Anchoring in Protocols and Error Prevention
Peter “So, yung protocol, usually we implement the protocol of the institution. So the monitoring should be very close, and the patient should be closely monitored during the first hours. So yun yung usual na every 15 minutes, for the next 2 hours every 30 minutes and hourly thereafter.”	Structured post-surgery monitoring provides a safety net, enabling timely detection of deterioration. Timed assessments promote discipline, consistency, and early intervention.	

<p>Elaine “So ang compromise natin, i-defer mo yung isa. Tingnan mo, ipasa mo sa doktor. <i>[pause]</i> Dok, sino ba yung kailangan-kailangan mo operahan? O kung gusto mo, dok, ilipat mo yung isang to-follow, yung hindi pa na-operahan, ha? Ilipat mo sa kabilang ICU. Sige, i-receive ko yung emergency mo. So kailangan, ang isipin ko lang muna, yung nandito na ito.”</p>	<p>Nurses manage overcrowding by collaborating with physicians to prioritize admissions, ensuring urgent care while maintaining patient safety and dignity.</p>	
<p>Bianca “Late na kami magcha-charting. Late na kami mag, parang minsan titignan mo na lang yung order ng to. Katulad yan. Nagagawa mo na, pero hindi mo pa nacarry-out. <i>[eye contact]</i> Yan yung parang pinaka-delay mo lang. Pero dun sa pasyente, wala ka dapat i-delay.”</p>	<p>In high-acuity settings, nurses prioritize hands-on care over documentation, ensuring patient stability is never delayed by administrative tasks.</p>	
<p>Elaine “kailangan mong mag-stand na, Doc, hindi talaga pwede. Hindi talaga pwede. Kailangan mong panindigan yun, kasi kawawa naman yun.”</p>	<p>Nurses may refuse unsafe decisions during high-demand situations, acting to protect patients rather than defy authority, reflecting strong ethical commitment.</p>	
<p>Bubbles “kung may ma-miss ka ba, dapat hindi siya maka-affect mo sa patient.”</p>	<p>Nurses continuously prioritize tasks based on patient safety, ensuring clinical needs take precedence over administrative duties..</p>	

Interpreting Theme III

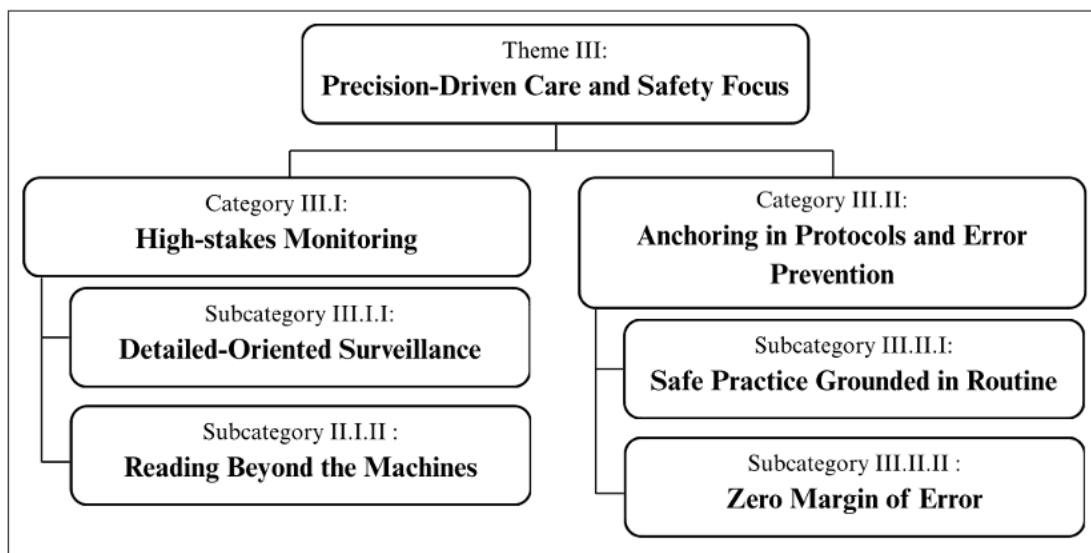
The theme Precision-Driven Care and Safety captures the demanding nature of the SICU, where nurses caring for post-CABG patients work with constant alertness and disciplined clinical practice. Their narratives show how precision is woven into every aspect of their work, from following evidence-based protocols to making rapid, well-judged decisions when patient conditions change unexpectedly. Nurses emphasized that care in this setting is never an individual effort. Instead, it is a shared process in which team members continuously observe, anticipate complications, and intervene early. This collective vigilance reflects an understanding that the SICU allows little room for error, and even minor oversights can threaten patient stability.

A major component of this theme is strict adherence to standardized procedures. Routine assessments serve as safeguards against missed cues, and research supports that such structured approaches reduce adverse events (Tajari et al., 2024). Nurses also described prioritizing immediate clinical action before documentation when patient safety is at stake, aligning with safety models that emphasize proactive risk management (Cheraghi, 2024; Oliveira, 2024). Team coordination further strengthens this precision, echoing findings that interdisciplinary collaboration improves early threat detection (Lu et al., 2024). Together, these experiences highlight a culture rooted in vigilance, teamwork, and a strong commitment to safe, reliable care.

Table 6. Summary of Categories and Subcategories for Theme III

Themes	Categories	Subcategories
Theme III Precision-Driven Care and Safety Focus	III.I High-stakes Monitoring	III.I.I Detailed-Oriented Surveillance III.I.II Reading Beyond the Machines
	III.II Anchoring in Protocols and Error Prevention	III.II.I Safe Practice Grounded in Routine

Figure 4. Hierarchy of Categories and Subcategories for Theme III



Theme IV: Emotional Fortitude and Mental Resilience

This theme highlights how SICU nurses manage the psychological and emotional demands of high-acuity care through inner resilience, professional purpose, and team support. Nurses consciously regulate emotions during crises, anchor themselves in collaborative dynamics, and maintain focus on patient-centered outcomes.

Emotional Holding during Crisis

Nurses maintain composure in high-stakes situations through mindfulness, intentional focus on caregiving tasks, and mutual support within the team.

Endurance Through Fatigue and Burnout

Resilience enables nurses to cope with physical exhaustion and emotional strain. Structured routines, adaptability, and a strong sense of professional duty help sustain performance during prolonged stress.

Professional Purpose

Nurses internalize the significance of their role, seeing themselves as essential to patient recovery by bridging clinical decision-making with compassionate care.

Gratification and Fulfillment

Emotional satisfaction and professional affirmation arise from witnessing patient recovery, contributing to education, and participating in cohesive team efforts.

Table 7. *Significant Statements and Its Meanings for Theme IV*

Significant Quotes	Meanings	Category
Bianca “Eh kapag ganoon, wala. Aanohin mo talaga. Parang siyempre gagawin pa rin yun best for the patient. Pero siyempre, it's beyond our control, ano na din naman. Kung kailangan niya talagang ma-intubate or kailangan niya mag-stay pa dito ng matagal. E aanohin mo pa rin, like parang SICU patient mo pa rin siya. Kung ano yung management na dapat dun sa current na situation niya, yun pa rin nung gagawin. Kasi nga hindi naman lahat pare-parehas ng recovery”	SICU nurses recognize the unpredictability of post-operative recovery, emphasizing presence, adaptability, and persistence to guide each patient safely, staying anchored in purpose despite uncertainty.	Coping with Psychological Demands

<p>Peter</p> <p>“So may mga pasyente na okay lang, ...yung recovery nila, swabe lang. Swabe lang, mga pasyente na day 1 pa lang or on the day of admission pa lang, sobrang restless na, sobrang agitated.”</p>	<p>Nurses observed that post-operative patients show varying emotional and behavioral responses, from calm to agitated, highlighting the emotional labor required to support recovery.</p>	
<p>Elaine</p> <p>“Pag may dumarating, kung makapag-observe ka man, yung lahat kami, hindi lang yung nurse na mag-handle dun sa patient, dapat is attentive sa patient. “</p>	<p>Nurses noted that post-operative patients display diverse emotional and behavioral responses, emphasizing the emotional labor integral to supporting recovery.</p>	
<p>Katrina</p> <p>“ Pag merong bago sa atin, parang kakaiba yun sa parang may stress. It adds to the actually stressful, already stressful environment. Pero yun, so maganda siya. So feeling ko maganda naman siya kasi nakaka-extubate kami ng mas mabilis as compared before.”</p>	<p>Adapting to new SICU technologies and protocols adds stress, but nurses draw purpose and motivation from patient improvements, linking professional growth with recovery outcomes.</p>	
<p>Kylie</p> <p>“Ah, yes. Lalong lalo na kung kulang ng staff. Pero minimake sure naman ng charge na kung isa-side dripan mo yung intubated ng isang extubated, is stable yung intubated.”</p>	<p>Staff shortages in the SICU increase workloads, prompting nurses to implement strategies—like pairing patients by stability—to manage risk. These adaptations reflect collective vigilance, resilience, and commitment to maintaining care standards under strain.</p>	

<p>Bianca “Mahirap. Kasi minsan talaga, kunwari ang cases mo, 10 to 15 cases or cases. Ang bakante mo lang na SICU is 5. So saan mo ilalagay yung iba? So minsan, mangyayari talaga na yung ibang patient, ililipat. Pero at least naman ngayon may transition care unit na...”</p>	<p>Exceeding SICU capacity places intense strain on nurses, who must balance patient placement and care equity. This challenge heightens emotional stress, highlighting the pressure to maintain safe, fair care despite system limitations.</p>	
<p>Katrina “You are moving as if you are a nurse practitioner.”</p>	<p>Nurses in the SICU perceive their role as extending beyond bedside care, embracing leadership through technical skill, diagnostic reasoning, and rapid decision-making.</p>	<p>Finding Meaning in the Role</p>
<p>Elaine “Ang SICU stay nila is post-anesthesia care with ICU stay na.”</p>	<p>Nurses view the SICU as more than a transitional unit, encompassing both immediate post-anesthesia care and ongoing critical vigilance.</p>	
<p>Bianca “So yun talaga parang dati nung bago ako, as in na-video ko. Though papayagan naman yung preceptor ko, yung video mo, para at least may guide ka.”</p>	<p>SICU nurses see their role as grounded in continuous learning and adaptability, recognizing that critical care evolves with new technologies and procedures.</p>	
<p>Kylie “Ang tagal, eh yun yung gusto mong ma-achieve ng patient mo. Yung simple breathing exercises na yun is ma-perform nila right after na ma-extubate.”</p>	<p>Nurses derive fulfillment from supporting recovery, valuing small interventions like guided breathing post-extubation as pivotal moments that restore patient autonomy and reflect their meaningful contribution to outcomes.</p>	
<p>Katrina “So doon kasi, hindi naman siya masyadong ginagawa but recently talagang proven siya na maganda. Because na-address mo right away so faster ang management.”</p>	<p>Nurses gain professional satisfaction from applying evidence-based practices that improve patient outcomes. Successfully implementing new or underused interventions reinforces their purpose, highlights the value of staying current, and demonstrates how small innovations can produce meaningful results.</p>	

Elaine “Lalo na yun, may pathway ang Z-Benefit package na on day 2, day 3, dapat nakalabas na sila. So yun yung ginagoal ng lahat ng nurses dito sa ICU post-operatively. So dapat ma-meet namin yun.”	The data revealed that nurses in the SICU are highly attuned to institutional recovery benchmarks, such as those set by the Z-Benefit package, which outline target discharge timelines. This experience reflected how daily nursing actions — from monitoring and mobilization to education and coordination — are purposefully aligned with these goals. Achieving early discharge is seen not only as a clinical win for the patient but as a testament to the team's collective effort, reinforcing pride, unity, and accomplishment among the staff.	
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Interpreting Theme IV

The SICU places nurses under significant emotional and psychological strain. This theme reflects how they manage these pressures with composure, focus, and strength, regulating emotions, coping with fatigue, sustaining professional purpose, and finding fulfillment. Studies show that emotional control in critical care is often anchored in mindfulness and a focus on caregiving goals (Alshammari et al., 2024; Li, 2024).

Fatigue remains a persistent challenge, but structured routines, adaptable strategies, and a strong sense of duty help nurses endure. Team cohesion further strengthens resilience, as supportive relationships and organizational unity protect psychological well-being (Alshammari et al., 2024; Li, 2024).

A strong professional purpose sustains nurses, who translate medical directives into direct patient care and often assume responsibilities akin to advanced practice nurses. Research confirms that a solid professional identity and sense of mission reduce burnout and enhance long-term job satisfaction (Toscano, 2022; Wood et al., 2023; Villagrancia et al., 2025).

Fulfillment comes from witnessing patient progress, providing education, and participating in a cohesive team. Shared goals and teamwork buffer emotional exhaustion and foster a healthier ICU environment (Li, 2024).

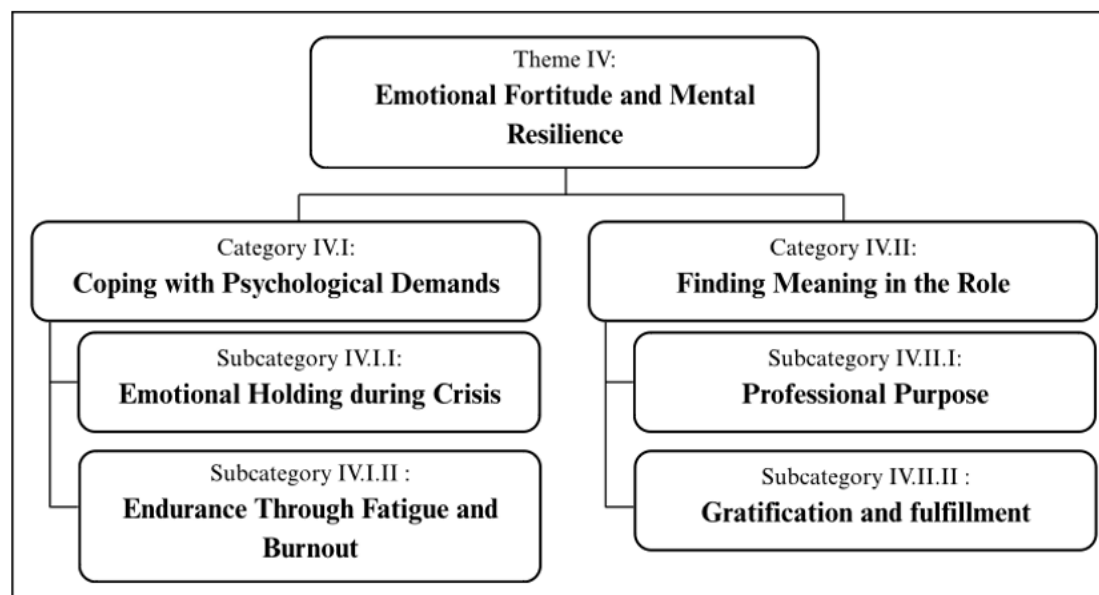
In sum, SICU nurses maintain resilience through mindfulness, effective coping, professional purpose, and the intrinsic reward of patient recovery. Both individual strategies and team-based support are essential for meeting the high demands of critical care nursing.

Table 8. *Summary of Categories and Subcategories for Theme IV*

Themes	Categories	Subcategories
Theme IV Emotional Fortitude and	IV.I Coping with Psychological Demands	IV.I.I Emotional Holding during Crisis
		IV.I.II Endurance Through Fatigue and Burnout

Mental Resilience	IV.II Finding Meaning in the Role	IV.II.I Professional Purpose
		IV.II.II Gratification and Fulfillment

Figure 5. *Hierarchy of Categories and Subcategories for Theme IV*



Theme V: Ethical Anchoring and Moral Accountability

This theme illustrates how SICU nurses serve as moral guides in a high-stakes environment, consistently grounding their actions in ethical principles and professional integrity, even amid institutional pressures or hierarchical challenges.

Moral Courage

Nurses exercise moral courage by resisting unsafe directives or questionable practices, confidently defending what is ethically and clinically right, even at the risk of conflict or disapproval.

Navigating Conflicts in Care Decisions

Ethical crossroads arise when clinical judgment conflicts with institutional demands. Nurses navigate these situations with tact, confidence, and reflection, prioritizing patient safety and professional judgment to challenge or bypass risky decisions.

Speaking Up for Patient Welfare

Nurses actively voice concerns about unsafe or substandard care, fulfilling their ethical duty to advocate for patients.

Prioritizing Individualized Care

Ethical practice involves tailoring care to each patient's unique needs, values, and recovery goals, reflecting a deep commitment to patient-centered care.

Table 9. *Significant Statements and its Meanings for Theme V*

Significant Quotes	Meanings	Category
Elaine “Kailangan mong mag-stand na, Doc, hindi talaga pwede.”	Nurses use professional judgment to challenge unsafe or inappropriate orders, prioritizing patient safety and ensuring decisions align with evidence, ethics, and institutional standards.	Standing ground Amid Ethical Tensions
Bianca “Hindi mo pwedeng sabihing, stable naman, baka pwedeng side-dripan muna.”	Nurses consistently prioritize patient safety over convenience, refusing to compromise care quality and upholding their accountability as patient advocates.	
Peter “So kailangan mo i-defend yung ikaw dito. Patient advocate pa rin.”	Bedside nurses use continuous observation to guide decisions, challenging unsafe directives and advocating for patients during critical care transitions.	
Katrina “Meron yung iba, kmi ayaw namin ilabas. Kaya naman pag in-order ng doktor. Kasi kami nakikita. Kami yung nakabantay eh. Kami nakakita dun sa patient. Hindi naman sila na. So sometimes, pagka gano'n, lalo na, ang hirap magsabi sa doktor.”	Nurses prioritize patient welfare while collaborating with physicians, balancing advocacy with professional, compassionate teamwork.	
Elaine “Siyempre tayo bilang nurse ang gusto natin yung good for the patient. So siyempre mga doktor meron din sila mga kailangang gawin.”	Nurses advocate for patient safety by refusing unsafe orders and escalating concerns, demonstrating principled, proactive protection.	

<p>Reuben “So as kami, as bedside nurse, siyempre limited lang naman yung mayroon tayong power. Kumingi kami ng tulong sa higher ups, which is the supervisor and then the senior house officer. So which is sila na yung nag-handle kung ano man yung naging usapan nila, in-address namin na, mam hindi namin ibigay yan, kahit anong mangyari.”</p>	<p>Nurses navigate safety concerns with diplomacy and emotional intelligence, escalating assertively when needed, reflecting adaptability and unwavering commitment to patient protection.</p>	<p>Upholding Patient-Centered Advocacy</p>
<p>Katrina “Do not engage. Kasi it doesn't solve it. But you can control the things that you can do about. Yung mga gano'n, you don't engage. But you try, ang usual na ginagawa ko, I don't go right away sa kanila. If there is one who knows me around, for example, a consultant who knows me better, I try to inform the consultant and siya na yung magpapasa ng message, siya dapat nang kausap ba kapatid itong ating mukhang kailangan ng reorientation. Ganito, ganito, ganito. Pag hindi nakuha doon, saka lang ako, papasok na.”</p>	<p>Nurses view recovery as continuous, providing tailored education and involving families to promote patient empowerment and shared responsibility.</p>	
<p>Elaine “So you always encourage yung patient na ito okay lang itong gawin para on your recovery. Kasi diba ang health teaching, ang recovery should start upon admission ng patient. So dapat nire-reorient mo. Kasama na yan sa update mo sa patient and sa family. Hindi pwedeng patient lang. So kailangang inform mo din yung family.”</p>	<p>Nurses emphasize pre-operative teaching, like incentive spirometry, as a proactive role that prepares patients, prevents complications, and enhances recovery readiness.</p>	

Kylie “Dapat prepared talaga sila. Kasi lalo na yung simple ng incentive spirometry. Independent nursing skill yun eh. Na dapat in-explain mo na sa patients prior na ma- operahan.”	Nurses see pre-operative teaching, such as incentive spirometry, as a proactive role that prepares patients physically and mentally, preventing complications and supporting successful recovery.	
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Interpreting Theme V

The theme *Ethical Anchoring and Moral Accountability* illustrates how SICU nurses navigate complex ethical challenges in caring for post-CABG patients. Their decisions extend beyond technical skill, relying on moral judgment, integrity, and commitment to patient welfare, particularly when patient needs, safety, and institutional demands intersect.

Continuous learning is a key element. Nurses pursue updated knowledge through formal education and self-directed study, recognizing the evolving nature of critical care. Ongoing development strengthens clinical safety and improves outcomes (Koivisto et al., 2024). Hands-on experiences in emergencies and emotionally complex situations further enhance confidence, ethical sensitivity, and resilience (Hu et al., 2024; Li et al., 2024).

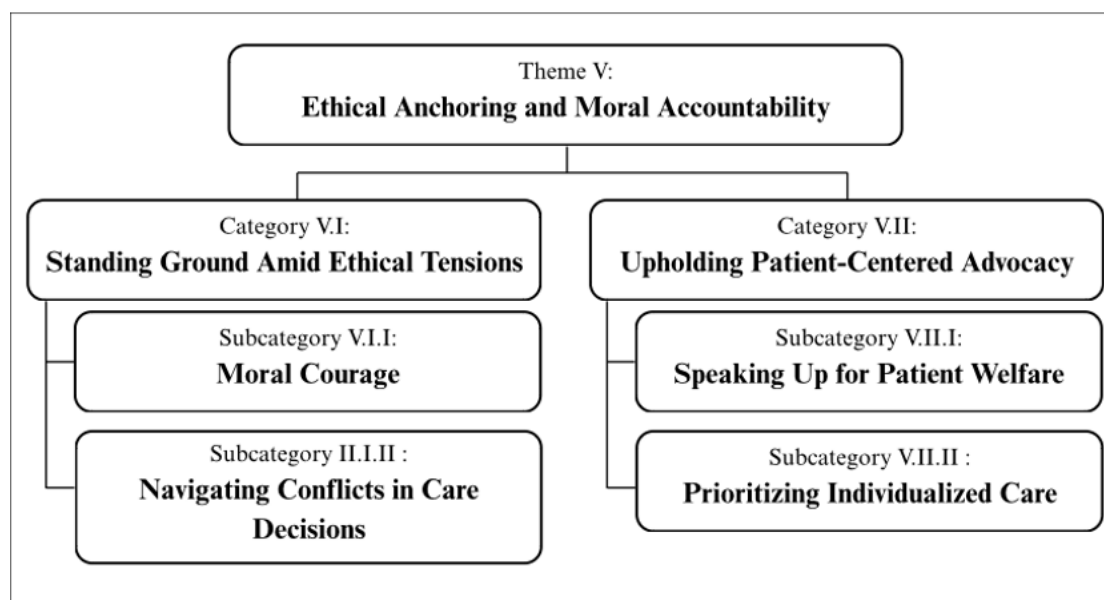
Mentorship supports growth by guiding newer nurses in judgment, ethical reasoning, and compassionate communication. Strong peer support fosters belonging, reduces overwhelm, and improves retention and care quality (Luo et al., 2023; Namado et al., 2023).

Ethical development is central, as nurses regularly face dilemmas involving autonomy, end-of-life decisions, and resource allocation. These require interdisciplinary collaboration and advocacy for patient safety and dignity (Pajakoski et al., 2021). Technological competence, including effective use of EHRs, CDSS, and monitoring tools, further supports safe, patient-centered care (Namadi et al., 2023; Wolf & Noblewolf, 2025).

Overall, ethical commitment, continuous learning, reflective practice, and mentorship collectively shape SICU nurses into confident advocates who uphold integrity, compassion, and clinical excellence.

Table 10. Summary of Categories and Subcategories for Theme V

Themes	Categories	Subcategories
Theme V Ethical Anchoring and Moral Accountability	V.I Standing Ground	V.I.I Moral Courage
	Amid Ethical Tensions	V.I.II Navigating Conflicts in Care Decisions
		V.II.I Speaking Up for Patient Welfare
	V.II Upholding Patient-Centered Advocacy	V.II. II Prioritizing Individualized Care

Figure 6. Hierarchy of Categories and Subcategories for Theme V

Theoretical Support for the Findings

The insights drawn from this study reflect the practical realities and deeply human experiences of SICU nurses, which are meaningfully illuminated through the lens of Benner and Watson. The themes of *Clinical Mastery and Adaptive Initiative* and *Precision-Driven Care and Safety Focus* show how participants relied not just on knowledge, but on years of experience that allowed them to anticipate patient needs and respond swiftly under pressure—qualities that align with Benner’s (1984) view of expert practice. On the other hand, themes such as *Emotional Fortitude and Mental Resilience* and *Ethical Anchoring and Moral Accountability* point to the emotional strength and moral clarity nurses brought to their work, even in the most challenging moments. These closely resonate with Watson’s (2008) emphasis on compassion, presence, and ethical caring. Together, these theories helped make sense of how SICU nurses balance critical decision-making with the equally important task of caring with empathy, dignity, and respect. In a post-CABG setting, this balance between technical precision and human connection became especially evident.

The Compass in the Storm

Figure 7. Symbolic Metaphor of the Phenomenon

A compass guiding a ship through a storm reflects the real-world experiences of SICU nurses caring for post-CABG patients. In the rapidly changing and high-stakes environment of the SICU, nurses orient, navigate, and guide patient care, even though they cannot calm the “storm” itself. Their clinical expertise, moral conviction, and emotional resilience function as the compass’s internal mechanisms, consistently directing them toward what is safe, ethical, and patient-centered.

The storm symbolizes the unpredictable nature of critical care—physiological instability, ethical dilemmas, and the emotional weight of life-and-death decisions. The compass remains steady by constantly recalibrating, mirroring nurses’ critical thinking, problem-solving, and swift yet thoughtful decision-making.

Like a ship’s crew working together, SICU nurses collaborate with interdisciplinary teams, using sound judgment to determine when to act, pause, or coordinate care. Their strength lies not in exerting dominance but in maintaining clarity and direction within the team.

Precision also grounds their practice. Just as a compass depends on accuracy, nurses rely on strict protocols, vigilant monitoring, and safety-driven routines—recognizing that even small deviations can lead to serious consequences.

The compass must withstand the storm’s emotional strain, and so must nurses. Though susceptible to fatigue and uncertainty, they remain anchored through mindfulness, purpose, and the fulfillment they find in patient recovery. Support from colleagues and self-awareness help them stay steady amid chaos.

Finally, a compass points true, symbolizing the nurses’ ethical orientation. They advocate for patients, challenge unsafe practices, uphold dignity, and engage in continual learning—sharpening their moral judgment through mentorship and reflection.

In essence, this metaphor captures the phenomenon as one of quiet strength, clarity, and unwavering purpose. Amid the shifting storms of critical care, the SICU nurse becomes a compass—guiding, grounding, and safeguarding patients as they journey toward recovery.

Conclusion

This study illuminated the lived experiences of Surgical Intensive Care Unit (SICU) nurses caring for post-Coronary Artery Bypass Graft (CABG) patients—a role defined by clinical precision, emotional depth, ethical judgment, and professional discernment. Their narratives reveal nurses who are not only skilled practitioners but also courageous advocates and compassionate caregivers who shoulder the intense demands of critical care with strength and humility.

The theme *Clinical Mastery and Adaptive Initiative* showcased how their competence is sharpened through experience, intuition, and rapid decision-making. Their work extends far beyond routine tasks, as they anticipate complications and respond before conditions deteriorate. *Professional Agency and Team Dynamics* reflected their ability to balance autonomy with collaboration—confidently making independent assessments while communicating assertively within interdisciplinary teams.

In *Precision-Driven Care and Safety Focus*, nurses emphasized an unwavering commitment to patient safety. With no room for error, they adhered strictly to protocols, maintained vigilant monitoring, and interpreted subtle physiological cues with technical expertise. *Emotional Fortitude and Mental Resilience* revealed their ability to withstand fatigue, emotional strain, and moral stress while continuing to provide compassionate, patient-centered care. This resilience stems from finding meaning and purpose in their role. Lastly, *Ethical Anchoring and Moral Accountability* captured their steadfast moral grounding. Nurses often stood firm amid ethical tensions, advocated for patient welfare, and upheld individualized care—even when it meant challenging norms or authority.

Ultimately, SICU nurses embody a rare integration of head, hand, and heart. In the most critical phases of post-CABG recovery, their intellect, skill, and humanity converge to deliver care that is not only essential but transformational. Their experiences affirm that SICU nursing is not just about performing tasks—it is about being precise, ethical, resilient, and profoundly human.

Recommendations

Grounded in the findings of this phenomenological study on the lived experiences of Surgical Intensive Care Unit (SICU) nurses caring for post–Coronary Artery Bypass Graft (CABG) patients, several recommendations are offered across four domains: nursing service, nursing education, nursing research, and nursing administration and policy. These recommendations aim to strengthen clinical practice, enhance emotional resilience, promote evidence-based care, and improve systems that support cardiovascular nursing.

Nursing Service

To support the clinical performance and holistic well-being of SICU nurses in post-CABG care, nursing service leaders are encouraged to develop structured support systems that enhance clinical judgment, promote proactive care, and strengthen critical decision-making skills.

Nursing Education

Nursing education must evolve to better prepare students for the complexities of cardiovascular intensive care and ethically nuanced roles. It is recommended that post-CABG care content and high-acuity nursing concepts be embedded in both classroom instruction and clinical practice.

Nursing Research

This study can lead to many new directions for research in critical care nursing. Future studies could focus on how SICU nurses manage their emotions, make ethical decisions, and stay strong under pressure, especially in different types of heart surgeries and hospital settings.

Nursing Administration and Policy

In terms of hospital management and policymaking, it is strongly recommended that safe staffing standards be developed and enforced for SICUs, particularly in the context of post-CABG care, where precision and attentiveness are paramount.

AUTHOR INFORMATION

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