When you think of the qualities you need for success in your nursing career, you probably think of clinical, leadership, and management skills. But another skill can’t be ignored: professional etiquette, a critical link for career success.

Etiquette is more than good manners; it’s a tool for cultivating good relationships. More than most careers, nursing is characterized by professional relationships among different people in numerous settings.

Based on the guiding principles of kindness, consideration, and common sense, professional etiquette can help you form new alliances and enhance established ones. Use these seven professional etiquette tips to polish your communication skills and strengthen your relationships with patients, families, and colleagues.

**Tip #1: Introduce yourself**
You won’t feel awkward during introductions if you’re always ready to introduce yourself. Don’t just stand next to someone waiting to be introduced; take the initiative. Put out your hand for a handshake and say your name in a confident voice. Example: “Hello, I’m Margie McDermott, the new perioperative nurse educator.”

Be ready to introduce colleagues to others as well. Mention the name of the person you’re making the introduction to first, then say the name of the person being introduced and say something about her. Then come back to the first person and say something about her. Example: “Sharon, I’d like to introduce Jack Brown. Jack is our new staff nurse with two years’ experience in the PACU. Jack, Sharon Jones has been our vice president of nursing since 2002.”

A good rule of thumb is to mention the higher-ranking person in the organization first. In the example above, the vice president (Sharon) is mentioned first and the new nurse (Jack) is introduced to her. Note that you’re book-ending the introductions to include both people.

**Tip #2: Have a confident handshake**
A strong handshake creates a positive first impression. Many people judge others by the quality of their handshake, so make sure it’s confident and firm (but not too firm—don’t overdo it). Stand up, lean forward, make eye contact, and smile.

However, take into consideration cultural preferences and sensitivities that can impact a handshake. Example: In the Hindu culture, men don’t shake hands with women. If someone ignores your attempt to shake hands, don’t take it personally—someone may avoid shaking hands because of arthritic pain. Gently drop your hand to your side and continue as if nothing happened.

**Tip #3: Keep conversations on track**
The ability to connect with colleagues and patients by making conversation is essential for success. To avoid inadvertently offending someone, stay away from controversial topics. Topics to avoid include religion, politics, salary, jokes of questionable taste, medical problems, and gossip. Topics that are usually safe to talk about include weather, traffic, sports, travel, books, and TV programs.

When talking with a patient, remember that you’re the caretaker. Don’t discuss personal problems with a patient.

If you have trouble getting a conversation started, try using the acronym OAR to help. Here’s an example with a patient in a clinical setting.

Observe. Make an observation. (“It looks like you’re ready for your surgery.”)

Ask questions. (“Is this the first time you’ve been a patient in this hospital?”)

Reveal something about yourself, but avoid getting too personal. (“After years of working in a large medical center, I like the friendly atmosphere of this community hospital.”)
**Tip #4: Watch your body language**

Your body language is an essential component of communication. When making conversation, don’t forget that the care you invest in your words can be undone by nonverbal communication. Example:

Suppose while talking with a patient, you’re slouching and not looking directly at him. You’re sending the message that you’re not interested in what he has to say. Tune in and be aware of what image your body language is sending. Here are some body language tips to follow:

- Stand tall with your shoulders back and your chin up; avoid slouching.
- Keep your hands out of your pockets.
- Don’t put your hands on your hips or cross them over your chest.
- Use a sincere smile to denote warmth and friendliness.
- Look at the eyes of the person you’re talking with to show your interest.
- Don’t wring your hands or make a fist.
- Move with confidence and purpose.
- Don’t drag or shuffle your feet.

As a healthcare provider, you interact with patients and providers from diverse cultural backgrounds. Be sensitive to the fact that your body language could unknowingly offend someone; in some cultures, direct eye contact is considered aggressive. Your mistake may be obvious from someone’s comments, expression, or body language. Apologize immediately. If you don’t know what you did, adopt a humble and respectful attitude and ask.

Some gestures may be misunderstood and considered offensive to people from other cultures. To play it safe, try to avoid these in conversation:

- the “okay” sign
- thumbs up
- the “V” for victory sign, especially with the palm facing inward
- pointing or snapping your fingers
- waving your hand with your arm raised.

It is no surprise that patients respond favorably to warmed fluids and blankets. Warmed fluids and blankets maintain optimal body temperature, promote comfort, and help patients heal faster. Maintaining patient normothermia is a standard of care than can positively affect surgical outcomes and prevent postoperative complications.

Fluid warmers from Enthermics precisely warm injection and irrigation fluids while blanket warmers keep blankets at clinically preferred temperatures. Individual or combination cabinets, with separate chambers for fluid and blanket warming, are available in a number of sizes.

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Tip #5: Cultivate a positive work environment

The kindness, consideration, and common sense that characterize etiquette are also essential for nurse-to-nurse collaboration. Be polite and courteous to your colleagues, no matter how stressful the situation. When you show respect for others and make others feel valued, you contribute to effective communication and team building. Example: Greet colleagues with a smile and a “hello” when you arrive at work, and say “good-bye” when you leave. Offer to help others, and thank others for helping you. Use good manners and polite language, and avoid listening to gossip or complaining with colleagues. Participate in department events to show your colleagues that you’re a part of the team.¹

The key is to keep your work environment positive. In July 2008, The Joint Commission issued a new sentinel event alert about behaviors that undermine a culture of safety.² Disruptive behaviors include anything that interferes with the ability of others to effectively carry out their duties. Some examples include disrespectful language, demeaning behaviors, outbursts of anger, criticizing other caregivers in front of others, throwing objects (such as patient medical records), and comments that undermine a caregiver’s self-confidence in caring for patients. Besides being rude, these behaviors threaten patient safety.³

Tip #6: Dress for success

Although informality is a trend in many workplaces, remember that the workplace isn’t your home. It may not be completely fair, but people do judge you by the way you dress. What you wear supports or detracts from your professional image and sends a clear message to others about how you see yourself and how you want to be perceived by others.

Most nurses would agree that they want to be viewed as professional, intelligent, and competent. You need to ask yourself if your appearance mirrors that image. If you dress too casually, patients may question your professionalism and attention to detail. Example: Does a nurse dressed in cartoon-print scrubs establish immediate trust, authority, and credibility? Cartoon prints may be appropriate for the pediatric surgical unit or the nursery, but nowhere else. Many patients complain that everyone in the clinical setting looks the same. This can be a safety issue if patients can’t quickly identify a nurse in an emergency.

Because patients and families want their nurses to be clearly identifiable, many hospitals are re-evaluating their dress codes. A recent survey of 430 randomly selected adult patients found that 55% said it wasn’t easy to identify their RN. 73% thought nurses should keep their hair back and off their shoulders, and 80% noted that they’d like to see a large “RN” on the nurse’s name badge.⁴

As a general guide, make sure your lab coat, scrubs, and shoes are clean and professional looking. Clothes shouldn’t be too tight or scrub dresses too short. Of course, don’t wear black underwear under scrubs. When your hair isn’t covered by an OR cap and your hair is long, pull it up and out of your face. Other than when you are scrubbed in the OR, make certain your nametag is visible and readable.

Tip #7: Present a positive, professional image

Recently, I went to a medical center across town for an audiology consult. When I checked in, I was given a form to fill out and was told to wait until someone called my name. A woman dressed in white called my name and put out her hand. Thinking it was for a handshake, I put my hand out. However, she indicated that she’d put her hand out for the form I’d filled out. She directed me to another room, sat down, and started asking me questions. Because she never introduced herself and her nametag was turned over, I had to ask her to identify herself and describe her role in the organization. Because she ignored my handshake, she missed an important opportunity to introduce herself and present a positive professional image.

Go ahead—sweat the small stuff

You may be familiar with the expression, don’t sweat the small stuff. That advice doesn’t apply to the clinical setting—sweat the small stuff! Small things make a big difference. In fact, a recent editorial in The New England Journal of Medicine noted that good manners are at the heart of the mission of service-related professions and the finer points of patient care should be based on good manners.⁵ Many healthcare facilities are adopting policies to ensure more positive and professional interactions with patients. Here are some guidelines for professional encounters in all types of clinical settings.

• Address all patients as Mr., Mrs., or Ms. Use a first name or nickname only if the person gives your permission. Never use terms like “honey” or “sweetie.”
• Before going to meet the patient, take a few seconds to compose yourself and put a smile on your face.
• Knock or speak softly, and wait for permission before approaching the patient’s bedside.
• Greet patients in a manner similar to the following: “Welcome to _____ (if this is your first patient encounter). My name is (first and last), and I’m the registered nurse who’ll be coordinating your care until (time).”
• Review the patient’s plan of care. Explain to the patient what to expect preoperatively, intraoperatively, and postoperatively. Use open-ended questions. Ask the patient for input.
• When leaving the patient’s bedside, ask, “Is there anything else you need?” Make sure that important items such as the call bell are within the patient’s reach.
• When a patient thanks you, replace the phrase “No problem” with “You’re welcome” or “My pleasure.”

**Plan for success**
Exercising professional etiquette doesn’t take a lot of time or effort, so make it part of your everyday practice. Professional etiquette isn’t optional for personal and professional success; it’s the critical link for coming across as a polished, confident, professional nurse.

**OR**

**REFERENCES**
