

Analisis kesiapan instalasi gawat darurat RSUP Dr. Kariadi sebagai rujukan sistim penanggulangan gawat darurat terpadu sehari-hari di Jawa Tengah tahun 2013 = Analysis of preparedness the emergency department Kariadi Hospital Semarang as a referral emergency comprehensive services system daily in Middle of Java

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Abstrak

Kesiapan Instalasi Gawat Darurat di RSUP Dr. Kariadi sebagai rujukan Sistem Gawat Darurat Terpadu Sehari-Hari sangat dipengaruhi oleh faktor input : Sumber Daya Manusia dan pengaturan jaganya, tersedianya ambulan 24 jam, melalui call center, sarana fisik bangunan, sarana medik dan non medik, ketersediaan obat alat kesehatan dan bahan habis pakai di ruang tindakan, Standar prosedur pelayanan pasien, serta faktor proses pelayanan pasien meliputi alur pasien, triase, pelayanan gawat darurat di label merah, pemeriksaan penunjang laboratorium dan radiologi dan ketersediaan obat di farmasi 24 jam.

Hasil penelitian ini dengan membandingkan Kepmenkes No 856/Menkes/SK/IX/2009 tentang standar Instalasi Gawat Darurat (IGD) rumah sakit didapatkan bahwa mampu memberikan semua jenis pelayanan 100%, tersedianya SDM sesuai dengan kualifikasi dan pendidikan serta dokter jaga spesialis anak, bedah, penyakit dalam, obstetrik dan kandungan serta anesthesi 24 jam 100%, terpenuhinya syarat fisik bangunan di ruang tindakan, operasi dan observasi 100%, tersedianya obat, prasarana medik di ruang tindakan berupa obat, bahan habis pakai dan peralatan medik 100%, tersedianya layanan ambulan 24 100%, tersedianya pemeriksaan penunjang laboratorium, radiologi dan farmasi 24 jam 100% dan belum berfungsinya call center.

*Preparedness of Emergency Department Kariadi Hospital Semarang as a referral Emergency Comprehensive Services System Daily influenced by input factors, human resources and distribution services, 24 hour ambulance services, call center ,physical building , medical and non medical equipment, drugs and single used material in service area standard operating procedure for patients services, and process factor as patient flow through an emergency department, triage, true emergency services (red label), supporting services as laboratory, radiology and pharmacies 24 hours.*

Result of this study compare with the Kepmenkes No 856/Menkes/SK/IX/2009 tentang Standar Instalasi Gawat Darurat (IGD) Rumah Sakit, is prepared for all services case, qualification and education of human resources and prepared of special doctor on site pediatrician, surgeon, internist, obstetric and gynecologist also anesthesiologist 24 hours, prepared of physical building in services area, operation room, and observation room 100%, prepared of medication, medical equipment and material single used 100%, ambulance services 24 hours, prepared of supporting services as laboratory, radiology and pharmacies 24 hour and call center is not well done.