Validasi worthing physiological scoring system dalam memprediksi mortalitas pasien non bedah selama di instalasi gawat darurat = Validation of worthing physiological scoring system in predicting mortality of non surgical patients in emergency department / Fany Oktarina

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Abstrak

ABSTRAK
Latar Belakang: Banyaknya pasien yang masuk ke Instalasi Gawat Darurat dengan spektrum penyakit serta derajat berat penyakit yang bervariasi, menimbulkan kesulitan bagi para dokter melakukan penilaian cepat berdasarkan data subjektif saja. Sistem skor Worthing Physiological Scoring System dapat digunakan untuk memprediksi mortalitas pasien non bedah karena menggunakan variabel-variabel yang mudah dan cepat diperoleh, sehingga lebih praktis dalam penggunaannya Oleh karena terdapat perbedaan karakteristik populasi pasien, maka perlu dilakukan validasi untuk mengetahui performa Worthing Physiological Scoring System tersebut

Tujuan: Menilai performa kalibrasi dan diskriminasi WPS dalam memprediksi mortalitas pasien non bedah selama di IGD Rumah Sakit Cipto Mangunkusumo (RSCM).

Metode: Penelitian ini merupakan studi kohort retrospektif pada populasi pasien non bedah yang masuk ke IGD RSCM dari bulan Oktober sampai November 2012. Variabel yang diukur adalah frekuensi pernapasan, denyut jantung, tekanan darah sistolik, suhu tubuh, saturasi oksigen perifer, dan tingkat kesadaran. Luaran yang dinilai adalah kondisi pasien (hidup atau meninggal) selama di IGD RSCM. Performa kalibrasi dinilai dengan uji Hosmer-Lemeshow. Performa diskriminasi dinilai dengan area under the curve (AUC).

Hasil: Selama penelitian didapatkan 774 subjek memenuhi kriteria penerimaan dengan 78 (9,6%) subjek di antaranya meninggal. Uji Hosmer-Lemeshow menunjukkan 2 = 0,84 (p = 0,840). Nilai AUC 0,78 (IK 95% 0,723-0,847).

Simpulan: Worthing Physiological Scoring System memiliki performa yang baik dalam memprediksi mortalitas pasien non bedah yang masuk ke IGD RSCM.
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ABSTRACT
Background: Patients referred to Emergency Room (ER) represent a broad spectrum of disease severity, led difficulties for a physicians to conduct rapid assessments based on subjective data only.

Worthing Physiological Scoring System could be use to predict mortality in non-surgical patients using variables which are obtained easily and rapidly, making it more practical in use. Because there are differences in the characteristics of the patient population, Worthing Physiological Scoring System should

be validated.

Objectives: The aim of this study was to assess the performance of Worthing Physiological Scoring System in predicting mortality of non-surgical ER in Cipto Mangunkusumo Hospital (RSCM).

Methods: This was a retrospective cohort study. We collected data of non-surgical patients who admitted ER during October to November 2012. The variables measured were respiratory rate, heart rate, systolic blood pressure, body temperature, peripheral oxygen saturation, and level of consciousness. The primary outcomes was death in ER RSCM. Hosmer-Lemeshow test were used to evaluate calibration of Worthing Physiological Scoring System. Discrimination was evaluated with area under the curve (AUC).

Result: A total of 774 non surgical patients were included in this study, from the patients, 78 (9.6%) subjects died. Calibration was resulted by Hosmer-Lemeshow test showed 2 = 0.84 (p = 0.840). The AUC was 0.78 (95% CI 0.723 to 0.847).

Conclusion: Worthing Physiological Scoring System had a good performance in predicting mortality of non-surgical patients in ED RSCM.