

## Pengekangan fisik pada lansia dengan covid-19 di instalasi gawat darurat: Studi kasus eksploratif = Physical restraint on older adult with covid-19 in emergency department: Exploratory case study.

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### Abstrak

Pengekangan fisik merupakan salah satu intervensi yang sering digunakan di instalasi gawat darurat (IGD) dimana karakteristik umum pasien yang datang mengalami penurunan kesadaran dan perubahan perilaku. Kondisi tersebut rentan terjadi pada pasien lanjut usia (lansia), terlebih pada situasi akut akibat infeksi Corona Virus Disease-2019 (COVID-19). Studi ini mengeksplorasi pengekangan fisik pada lansia perempuan berusia 75 tahun dengan COVID-19 yang datang ke IGD akibat desaturasi oksigen dan penurunan kesadaran. Pasien berhasil dipasangkan akses intravena, selang makan, dan kateter urin yang bertujuan untuk pemberian medikasi, nutrisi, dan pemantauan keseimbangan cairan. Pasien diberikan pengekangan fisik untuk membatasi pergerakan ekstremitas atas untuk mencegahnya mengganggu perawatan dan mencabut selang-selang tersebut. Intervensi pengekangan fisik berhasil membuat pasien lebih kondusif saat diberikan medikasi dan nutrisi sehingga pasien lebih cepat stabil. Namun, pengekangan menimbulkan jejas kemerahan pada lengan dan infiltrasi cairan infus, sehingga diperlukan pemantauan secara berkala terhadap respon dan kondisi bagian tubuh yang terpasang pengekang fisik. Pengambilan data dilakukan melalui observasi saat pasien dirawat di IGD. Intervensi pengekangan fisik akan lebih efektif apabila dilakukan sesuai dengan indikasi, hasil pemantauan didokumentasikan pada formulir pengekangan fisik, serta dibutuhkan adanya panduan spesifik terhadap pengurangan penggunaan atau deeskalasi pengekangan fisik.

.....Physical restraint is one of a commonly used interventions in emergency care, where the patients are mostly admitted with altered consciousness level and behavioral changes. Older adults are vulnerable to those acute symptoms especially those who are infected with Corona Virus Disease-2019 (COVID-19). This study explores the use of physical restraint on 75 years-old elderly woman in emergency department (ED) with COVID-19, low oxygen saturation, and altered consciousness status. Both of her wrists were restrained and nurse can finally inserted IV catheter, nasogastric tube, and urinary catheter for medication, feeding, and fluid balance monitoring. Restraints were used as a preventive measure so she could not self-removing any invasive tubes and interrupting the treatment. Restraints were effective to develop a conducive environment for the patient to receive medication and food in order to stabilize her. But, restraints left soreness on her skin and infiltration on the intravenous catheter area, therefore this intervention needs regular monitoring towards patient's response and restrained extremities. Data were collected from observation during the treatment in ED. Physical restraint would be more effective if it is based on the right indication, monitored and documented on the restraint monitoring form, and a specific guidelines from institution is needed to reduce the use of restraint.