

Analisis Implementasi Clinical Pathway Stroke Perdarahan di Rumah Sakit Pusat Otak Nasional Prof. Dr. dr. Mahar Mardjono = Analysis of the Implementation of Hemorrhagic Stroke Clinical Pathway at National Brain Center Hospital Prof. Dr. dr. Mahar Mardjono

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Abstrak

Clinical Pathway (CP) merupakan perangkat alat multidisiplin ilmu yang digunakan untuk perawatan kesehatan berbasis bukti (evidence based). CP memiliki fungsi menyeragamkan terapi sehingga mampu meminimalkan komplikasi dan kesalahan pengobatan. Rumah Sakit Pusat Otak Nasional (RS PON) merupakan rumah sakit rujukan otak dan persarafan nasional. Stroke perdarahan menjadi penyakit kedua tertinggi di RS.PON. Keberagaman keputusan dilakukannya operasi atau tidak, meskipun sudah masuk indikasi, menjadi poin penting untuk menganalisis implementasi pelaksanaan Clinical Pathway ini.

Tujuan penelitian: menilai implementasi CP stroke perdarahan yang telah dijalankan sehingga diharapkan mampu menjadi dasar penentu kebijakan rumah sakit jejaring maupun rumah sakit seluruh Indonesia. Menilai hubungan antara variabel-variabel dalam clinical pathway terhadap Length of Stay (LOS), morbiditas dan mortalitas

Metode: Penelitian ini menggunakan metode mixed method, dengan pendekatan retrospektif. Dalam penelitian kuantitatif dilakukan analisis univariat dan multivariat, dimana menggunakan data sekunder dari rekam medis pasien stroke perdarahan yang dirawat di RS PON pada Januari 2020 - Desember 2021. Dari total populasi 1254 pasien setelah dilakukan kriteria inklusi dan inklusi didapatkan 1001 pasien. Penelitian kuantitatif, dilakukan dengan menganalisis pengaruh implementasi CP terhadap lama hari rawat, morbiditas (nilai NIHSS) dan mortalitas. Faktor risiko dan efek atau penyakit yang terjadi di masa lampau diukur melalui catatan historis. Sementara pengumpulan data secara kualitatif menggunakan kuisisioner dan wawancara secara mendalam kepada Kepala Bidang Pelayanan Medis, Kepala Komite Medis, Kepala Komite Keperawatan, Kepala Divisi Vaskular, Dokter Spesialis Neurologi, Dokter Spesialis Bedah Saraf, Dokter IGD, Perawat, Fisioterapi, Terapi wicara, Gizi dan Farmasi untuk mengetahui tahapan proses Clinical Pathway di RS PON. Total responden 129 orang. Penelitian kualitatif menilai pengetahuan tenaga medis dan paramedis terkait CP, implementasi, supervisi, monitoring dan evaluasi.

Hasil: penelitian kuantitatif menemukan adanya hubungan antara beberapa variabel yang berada dalam CP, seperti pemeriksaan penunjang, terapi sesuai indikasi dan penyakit komorbid terhadap LOS, morbiditas dan mortalitas. Sementara pada penelitian kualitatif menilai implementasi CP di RS PON memerlukan perbaikan dari segi sosialisasi, implementasi, monitoring dan evaluasi.

.....Clinical Pathway is a multidisciplinary toolkit used for evidence-based health care. The Clinical Pathway has the function to unify the therapy so as to minimize complications and medication errors. The National Brain Center Hospital (PON Hospital) is a national brain and nervous referral hospital. Hemorrhagic stroke is the second-highest disease in PON Hospital. The diversity of decisions to have surgery or not, even though it is indicated, is an important point to analyze the implementation of this Clinical Pathway.

Objective: to evaluate the implementation of CP bleeding stroke that has been carried out so that it is

expected to be the basis for determining policy for network hospitals and hospitals throughout Indonesia. Assessing the relationship between variables in clinical pathways on Length of Stay (LOS), morbidity, and mortality

Methods: This study uses a mixed-method, with a retrospective approach. In this quantitative study, univariate and multivariate analyzes were carried out, which used secondary data from the medical records of hemorrhagic stroke patients treated at the PON Hospital in 2020-2021. From the total population of 1254 patients, after the inclusion and inclusion criteria were carried out, there were 1001 patients. Quantitative research was conducted by analyzing the effect of Clinical Pathway implementation on length of stay, morbidity (NIHSS value), and mortality. Risk factors and effects or diseases that occurred in the past are measured through historical records. Meanwhile, qualitative data collection used in-depth interviews with the Head of Medical Services, Head of the Medical Committee, Head of Nursing, Head of the Vascular Division, Neurology Specialist, Neurosurgeon Specialist, Emergency Room Doctor, Nurse, Farmation, physiotherapist, speech therapist, nutritionist to find out the stages of the Clinical Pathway process at the PON Hospital. The total number of respondents are 129 people. Qualitative research assesses the knowledge of medical and paramedical personnel related to CP, implementation, supervision, monitoring, and evaluation.

Result: Quantitative research found a relationship between several variables in CP, such as investigations, therapy, and comorbid with LOS, morbidity, and mortality. Meanwhile, qualitative research showed that the implementation of CP in the PON Hospital was still unsatisfactory in terms of socialization, implementation, monitoring and evaluation.

Conclusion: Implementation of CP is associated with clinical outcomes of hemorrhagic stroke patients.