

# CHAPTER I

## INTRODUCTION

### A. Background of the Problem

The development of wound infection is an ongoing problem for many patients. Infected wounds can cause great distress in terms of associated morbidity and mortality, increased length of hospital admission, delayed wound healing and increased discomfort have long been known to increase healthcare cost significantly (Kingsley, 2001).

The 2002 survey report by the Nosocomial Infection National Surveillance Service (NINSS), which covers the period between October 1997 and September 2001, indicates that the incidence of hospital acquired infection (HAI) related to surgical wounds is as high as 10%. These infections complicate illness, because anxiety, increase patient discomfort and can lead to death (Anonym, 2004).

Infections of the surgical wound are one of the most common HAIs and are an important cause of morbidity and mortality. The delay in recovery and subsequent increased length of hospital stay also has economic consequences. It has been estimated that each patient with a surgical site infection will require an additional 6.5 days in hospital, which results in the doubling of hospital costs associated with that patient (Anonym, 2004).

Health care professionals from all disciplines include the nurse are involved in the prevention and management of wound surgery so that cannot cause infection, but despite appropriate patient care and advance in treatment and prevention strategies, some wound will become infected (Kingsley, 2001). Especially for the nurses who have more much time to care the patient, they will be much involved.

It would be unrealistic to believe that all infection can be prevented as there are many variables involved in the development of wound infection. these include: general health status, underlying condition that affect *immunocompetency*, the disease process or treatment given, tissue viability in the area surrounding the wound, the nature species and quantities of microbes contaminating the site (Kingsley, 2001).

It is a laudable objective to take appropriate measure to prevent infection where it is known that benefit can be gained, for example through audit and feedback of surgical wound infection rates (Reilly, 2001). However, it is equally important to limit the affect of infection once it occurred. Early recognition of the sign of infection, local swelling, heat, pain and redness, followed by effective intervention is necessary to achieve prompt resolution. Swelling, heat, pain and redness are also sign of inflammation but the degree of severity usually increase with infection. Infected wound frequently have increased level of exudates, pus and odor and the patient might be pyrexia and

using the infection continuum and algorithm or procedure for wound infection will help to promote wound healing, limit negative patient experiences and minimize additional cost to the healthcare system (Kingsley, 2001).

One of the treatment and management way to promote the wound care is using the nursing procedure as one of the indicators of quality and hospital image, so because of that quality services of nursing process need to maintain and improve as optimally as we can (Nursalam, 2000). The nursing services is the health service which is based on the science and nursing skill that consist of the comprehensive bio psycho social spiritual and cultural which purposed to the individual, family, group and community even it well or not. The service content are: the promote the health education, prevent the disease and the health recovery using the nursing process approach (Efendy, 2005).

To improve care in patients with wound especially for the wound surgery, nurses need to feel confident in their ability to diagnose and treat the surgery wound to prevent it from the infection, which can be aided by the use of right framework and procedure. Nurse who has a good knowledge of the principles of infection control in tissue viability will be more assertive when negotiating the initiation of medically prescribes therapy for the patients with post surgery wound using the wound caring procedure or the nursing standard (Kingsley, 2001).

Post wound surgery is divided in two kinds, in the surgery room and in the ward room where is wound infection and complication usually grow up

between fifth days until the eight days post surgery (Torrance and Serginson, 1997), because of that nurse must be responsible to do the observation the wound recover, also do the save and comfort technique for the patient based on the nursing care standard for the wound caring.

Wound care is a process to clean, to treat and to recover using the nursing process, assessment, planning, implementation, evaluation and documentation for the post surgery patient to make the wound recovery faster, if this procedure is doing well so it can make the total recovery faster (Ellis, 1997). Wound caring procedure must carry out totally, complicatedly and sustainable. Wound caring is the important thing from the nursing process and needs the science and skill to do the nursing intervention to make the wound still in good condition (Norton and Miller, 1986).

Nurse has the important role to control the wound infection and complication, because nurse is as the caring provider for the patient who is taking care in the hospital in any time. It means that nurse has much more time with patients and should understand that there are many factors that can cause the infection. The potential for infection depends on a number of patient variables such as the state of hydration, nutrition and existing medical conditions as well as extrinsic factors, for example related to pre-, intra-, and post-operative care if the patient has undergone surgery. This often makes it difficult to predict which wounds will become infected. Consequently the

prevention of wound infection should be a primary management objective for all healthcare practitioners (US pharmacist, 2006).

One of the ways to prevent the spread of bacteria from the wound and minimize the infection are: wash the hands, antiseptic wound caring, support the patient activity and nutrition are the way to make the wound recovery faster (Potter and Perry, 2005). If your hands are not clean, you may spread bacteria (germs) into a new wound. When washing your hands, use soap and water, work up a good lather and rinse thoroughly. Nurse should be understand about aseptic technique to replace the wound bandage, observe the wound and asses the patient condition generally also to prevent the wound complication, because of that the good implementation of wound caring become one of the supporting factor for the wound recovery (Effendy, 1999).

The faster wound recovery are has much benefit for the patient to get home soon and can do the daily activity without any help from the family, limit negative patient experiences, reduce the physical and psychological distress and also can reduce the health cost (Buhori *cit* Reksoprojo, 1995).

The management and treatment of the wound surgery is a complex and important procedure that should be done right using a wound care procedures for the post surgery patient to help promote the effective care for the patient so can make the recovery faster and prevent the infection (Kingsley, 2001).

Based on the background of the problem explanation above, the writer confirm that the good wound caring is very important to do for making the

wound recovery faster and it is possible to do optimally for the post surgery patient in the ward room of PKU Muhammadiyah Hospital of Yogyakarta.

#### **B. Research Question**

From the explanation in the background of the problem above, the writer make the problem formulation, "How is the implementation of wound caring procedure for the post surgery patient in the Arafah and Marwah ward rooms of PKU Muhammadiyah Hospital of Yogyakarta?"

#### **C. Objective of the Study**

To know how is the implementation of wound caring procedure for the post surgery patient in the Arafah and Marwah ward room of PKU Muhammadiyah Hospital of Yogyakarta.

#### **D. Significance of the Study**

##### 1. For the hospital leaders

- a. They use as the reference to improve the nursing service in the ward rooms and to optimize the nurse role generally as the professional nursing.

##### 2. For the nurse

- a. To give the literary review to increase the quality service and knowledge about the good implementation of wound caring post surgery.
- b. To add the knowledge about the post surgery wound including the infection risk.

3. For the nursing science

This study can be used as a reference to promote the nursing care as the way to improve the nursing science especially for the nursing surgery.

4. For the next research

This research result can be the reference to making research that still related to this research.

**E. The research Scope**

1. Material

It is related to the implementation of wound caring for the post surgery patient.

2. Respondent

The respondents are patients who are treated the nursing care for the post surgery in the Arafah and Marwah ward rooms around June until July of 2007.

3. The research location

This research is carried out in the Arafah and Marwah ward of PKU Muhammadiyah Hospital of Yogyakarta

4. The Research Time

This research was conducted from starts 24 June to 12 July 2007

## **F. Authentic of the research**

Based on the researcher know, the research about The Implementation of Wound Caring Procedure for the Post Surgery Patients in the Arafah and Marwah Ward Rooms of PKU Muhammadiyah Hospital Yogyakarta is not conducted yet. The researches that are connected with this research those are:

1. Endro Prabowo (2002) "The Evaluation of the nurse satisfaction to the implementation of the nursing procedure in the Region Hospital of Bantul, Yogyakarta. The result is that the implementation of the nursing procedure is in good criteria. This research use the non experimental research and the research using the cross sectional approach. The total samples are 30 respondents.
2. Marjana (2002) "The nurse motivation to do the documentation aspect based on the standard operating procedure in the Prof. DR. R. Soeharso Orthopedic Hospital, Surakarta. This research is non experimental research with the cross sectional approach. This research was conducted in 2 weeks. The result of this research shows that the nurse motivation to do the documentation based on the standard operating procedure is already good enough reached 80%.