

EVALUASI PELAKSANAAN PENANDAAN OPERASI DI RUANG OPERASI RS PKU MUHAMMADIYAH UNIT II YOGYAKARTA

Arindah Dwitasari, Elsy Maria Rosa
Program Studi Manajemen Rumah Sakit, Universitas Muhammadiyah
Yogyakarta
Jalan Lingkar Selatan, Tamantirto, Kasihan, Bantul, Yogyakarta 55183

ABSTRAK

Latar Belakang: Analisa tahun 2005 pada 126 kasus salah sisi, salah prosedur, salah pasien didapatkan 76% kesalahan sisi, 11% salah prosedur dan 13% salah pasien (WHO,2009). Di RS PKU Muhammadiyah Unit II telah dilakukan sosialisasi pelaksanaan penandaan operasi. Namun pada pelaksanaan penandaan operasi masih belum sesuai dengan SPO. Penelitian ini bertujuan mengetahui evaluasi pelaksanaan penandaan operasi di ruang operasi RS PKU Muhammadiyah Unit II Yogyakarta.

Metode Penelitian: Penelitian ini menggunakan *mixed methode* dengan *sequential explanatory*. Jumlah sampel observasi 62 responden dan sampel wawancara 6 responden. Data yang diperoleh menggunakan teknik observasi, wawancara, dan dokumentasi. Hasil observasi diambil dari *checklist* observasi dan dilakukan wawancara kepada informan lalu dianalisa.

Hasil dan Pembahasan: Pelaksanaan penandaan operasi di ruang operasi 73% sudah berjalan dan berkembang sesuai dengan SPO. Pelaksanaan penandaan untuk menentukan tepat lokasi, tepat prosedur, dan tepat pasien. Kendala yang dihadapi dalam pelaksanaan penandaan operasi yaitu mengenai logistik, SDM, pasien, waktu dan biaya, SPO. Rekomendasi untuk pelaksanaan penandaan operasi yaitu sosialisasi mengenai penandaan operasi, menciptakan budaya efektif, perubahan SPO, perbaikan logistik, edukasi pasien, *one spidol for one patient*.

Kesimpulan dan Saran: Penandaan operasi di RS PKU Muhammadiyah Unit II secara keseluruhan sudah berkembang dan berjalan dengan baik sesuai SPO. Pelaksanaan penandaan operasi sudah sesuai dengan ketepatan lokasi, ketepatan prosedur, dan ketepatan pasien walaupun dalam pelaksanaannya masih ditemukan beberapa kendala. Namun beberapa rekomendasi dari Direksi diharapkan mampu membawa perubahan yang signifikan.

Kata Kunci: penandaan operasi, *Surgical Safety Checklist*

EVALUATION OF SITE MARKING IMPLEMENTATION IN THE OPERATION ROOM OF PKU MUHAMMADIYAH UNIT II YOGYAKARTA HOSPITAL

ABSTRACT

Background: The analysis in 2005 of 126 cases wrong site, wrong procedure, wrong patient obtained 76% of wrong site, 11% of wrong procedure and 13% of wrong patients (WHO, 2009). In PKU Muhammadiyah Hospital Unit II has been socialized implementation of site marking operation. However, the implementation of site marking operation there are not in accordance with SOP. This study aimed to evaluate of site marking implementation in the operating room of PKU Muhammadiyah Unit II Yogyakarta Hospital.

Method: This study uses a mixed method with sequential explanatory. Total observation sample are 62 respondents and interview sample are 6 respondents. Data obtained using observation, interviews, and documentation. The results of observations taken from the observation checklist and interviewed the informant and then analyzed

Results and Discussion: Implementation of site marking in operation room 73% is already running and well developed according to SOP. Implementation of site marking to determine the right site, right procedures, and right patient. Obstacles encountered in the implementation of site marking operation that is about logistics, human resources, patient, time and cost, SOP. Recommendations for the implementation of site marking operation that is the socialization of the site marking, creating a effective of the culture, changes SOP, improved logistics, patient education, and one marker for one patient.

Conclusion: Marking operations at PKU Muhammadiyah Hospital Unit II overall is already up and running properly in accordance the SOP. Implementation of site marking operation in this study are in accordance with the right site, right procedures and right patient although in practice they found some obstacles. However, some of the recommendations from the Directors in implementation of site marking is expected to make a significant changes for patient safety.

Keywords: site marking, Surgical Safety Checklist

