

INTISARI

Latar Belakang : Limbah medis padat rumah sakit mengandung bahan berbahaya (bersifat infeksius, toksik dan radioaktif) jika tidak dikelola dengan benar maka dapat mencemari lingkungan dan dianggap sebagai mata rantai penyebaran penyakit menular. Selama pandemi COVID-19, jumlah produksi limbah medis di fasilitas pelayanan kesehatan (fasyankes) meningkat tajam. Limbah medis padat yang di hasilkan RSUD Sele Be Solu dari Januari – desember 2021, sebanyak 688,9 Kg dan pada bulan Januari 2021 sampai Desember 2022, sebanyak 212,1 Kg. Berdasarkan survei awal di Rumah Sakit Sele Be Solu Kota Sorong pada bulan Januari - Maret tahun 2022 diketahui pengelolaan limbah medis belum sesuai dan memenuhi syarat sanitasi, sampah medis dan non medis belum dipisahkan secara keseluruhan, sehingga terjadi peningkatan sampah medis yang dapat mempengaruhi lingkungan, rumah sakit dan masyarakat sekitar

Metode : Jenis penelitian menggunakan metode kualitatif. Responden sebanyak 18 orang dan 3 wawancara.

Hasil : Proses pewadahan limbah padat medis di RSUD Sele Be Solu dipisah menurut jenis limbah, padat pewadahan diberi plastik dengan warna kuning untuk limbah medis infeksius, warna hitam untuk limbah padat manis non-infeksius, dan diberi label serta nama asal limbah berasal. Proses pewadahan di RSUD Sele Be Solu sudah baik dan mengikuti SOP. Proses pengumpulan limbah padat medis di RSUD Sele Be Solu di lakukan dengan baik, di setiap ruangan terhadap wadah, proses pengumpulan dilakukan pada dua waktu yaitu di pagi hari jam 06.00 WIT dan sore 17.00 WIT. Waktu dipilih karena pada waktu tersebut belum terlalu banyak pasien dan pengunjung yang ada di RSUD Sele Be Solu. Terdapat kelemahan pada proses pengumpulan yaitu, beberapa petugas masih tidak menggunakan APD dengan lengkap. Proses pengangkutan limbah padat medis di RSUD Sele Be Solu memiliki jalur khusus yang tidak melewati ruang pelayanan, troly yang digunakan berbahan besi dengan kapasitas 250 L. Kekurangan dari pada proses pengangkutan meskipun tertutup rapat, troly yang digunakan terlihat tidak bersih. Proses penyimpanan sementara (TPS) di RSUD Sele Be Solu belum memenuhi syarat, bangunan tembok sudah tidak kokoh, tidak ada sistem pengaturan udara dan ventilasi, limbah yang disimpan didalam TPS lebih dari waktu yang standar yaitu lebih dari 48 jam. Proses pemusnahan limbah medis, benda tajam di RSUD Sele Be Solu menggunakan incinerator yang memiliki standar yang baik, incinerator di sediakan oleh pihak ke tiga. Belum semua petugas mendapatkan imunisasi Hematitis B dan Tetanus di RSUD Sele Be Solu.

Kesimpulan : Secara keseluruhan setiap detail yang ada dalam pengelolaan limbah padat medis di RSUD Sele Be Solu sudah sesuai tiap butirnya dengan SOP yang sudah disesuaikan dengan Kepmenkes No. 1204/SK/X/2004 tentang persyaratan kesehatan lingkungan di Rumah Sakit.

Kata Kunci : Limbah Medis Padat, K3, Analisis.

ABSTRACT

Background: Hospital solid medical waste contains hazardous materials (infectious, toxic and radioactive) if not managed properly, it can pollute the environment and is considered a link in the chain of spread of infectious diseases. During the COVID-19 pandemic, the amount of medical waste production in health care facilities (fasyankes) increased sharply. The solid medical waste produced by Sele Be Solu Hospital from January – December 2021, amounted to 688.9 Kg and in January 2021 to December 2022, as much as 212.1 Kg. Based on the initial survei at Sele Be Solu Hospital, Sorong City in January - March 2022, it is known that the management of medical waste is not yet appropriate and meets sanitation requirements, medical and non-medical waste has not been separated as a whole, so that there is an increase in medical waste that can affect the environment, hospitals and the surrounding community

Method : Type of research using qualitative methods. There were 18 respondents and 3 interviews.

Result : The process of rewriting medical solid waste at Sele Be Solu Hospital is separated according to the type of waste, the solid is given plastic with yellow for infectious medical waste, black color for non-infectious sweet solid waste, and labeled and the name of the origin of the waste comes from. The registration process at Sele Be Solu Regional Hospital has been good and follows the SOP. The process of collecting medical solid waste at Sele Be Solu Regional Hospital is carried out properly, in each room of the container, the collection process is carried out at two times, namely in the morning at 06.00 WIT and in the afternoon at 17.00 WIT. The time was chosen because at that time there were not too many patients and visitors at sele be solu hospital. There is a weakness in the collection process, namely, some officers still do not use complete PPE. The process of transporting medical solid waste at Sele Be Solu Hospital has a special line that does not pass through the service room, the trolley used is made of iron with a capacity of 250 L. Disadvantages of the processing process even though it is tightly closed, the trolley used looks unclean. The temporary storage process (TPS) at Sele Be Solu Regional Hospital has not met the requirements, the wall building is no longer solid, there is no air regulation and ventilation system, waste stored in the TPS is more than the standard time, which is more than 48 hours. The process of destroying medical waste, sharp objects at Sele Be Solu Hospital uses an incinerator that has good standards, the incinerator is provided by a third party. Not all officers have received Hematitis B and Tetanus immunizations at Sele Be Solu Regional Hospital.

Conclusion Overall, every detail in the management of medical solid waste at Sele Be Solu Regional Hospital is in accordance with each item with the SOP that has been adjusted to the Ministry of Health No. 1204 / SK / X / 2004 concerning environmental health requirements in hospitals.

Keywords : Solid Medical Waste, K3, Analysis.