

INTISARI

Latar Belakang: Rumah Sakit (RS) berkembang dengan kemajuan ilmu pengetahuan dan teknologi, namun menghadapi tantangan salah satunya angka kematian tinggi. Implementasi *Early Warning Score* (EWS) sangat penting untuk efektivitasnya.

Tujuan: Penelitian ini bertujuan untuk mengetahui risiko antara ketidakpatuhan penerapan *Early Warning Score* (EWS) dewasa dengan kematian di ruang rawat inap RSUD Dr. Soedirman Kabupaten Kebumen.

Metode: Merupakan penelitian observasional analitik *case control*, menggunakan *quota random sampling* dengan total sampel 328 (82 kelompok kasus dan 246 kelompok kontrol). Analisis data menggunakan *regresi logistic* (95% CI).

Hasil: Penerapan EWS pada kelompok kasus dan kontrol, menunjukkan mayoritas penerapan EWS patuh (68,3%) dan sisanya tidak patuh (31,7%). Ketidakpatuhan EWS berisiko terhadap kematian ($p=0,001$, *Adjusted OR*=18,63, CI 95% 6,78-59,29). Faktor risiko kematian lainnya yang bermakna meliputi stroke, jantung, gagal ginjal kronis, sepsis, dan tingkat keparahan EWS. Variabel-variabel ini signifikan mempengaruhi kematian (*Cox & Snell R Square*=0,603).

Kesimpulan: Ketidakpatuhan dalam penerapan EWS dewasa di ruang rawat inap Rumah Sakit berisiko meningkatkan angka kematian pasien. Implementasi EWS sesuai SPO yang konsisten sangat penting untuk mengurangi angka kematian.

Kata Kunci: *Early Warning Score* (EWS), ketidakpatuhan, risiko kematian, ruang rawat inap dewasa, Rumah Sakit Umum Daerah.

ABSTRACT

Background: Hospital is growing with scientific and technological advances, but facing one of the challenges is high mortality. The implementation of the Early Warning Score (EWS) is critical to its effectiveness.

Objective: This study aims to identify the risks between non-compliance with the application of Early Warning Score (EWS) for adults and deaths in the hospital room of Dr. Soedirman district of Kebumen.

Methods: A case control analytical observational study, using random sampling quota with a total of 328 samples (82 case groups and 246 control groups). Data analysis using logistic regression (95% CI).

Results: Application of the EWS to case and control groups, showing the majority of EWS applications were compliant (68.3%) and the rest were non-compliant (31.7%). EWS non-compliance is at risk of death ($p=0,001$, Adjusted OR=18,63, 95% CI 6,78-59,29). Other significant risk factors include stroke, heart, chronic kidney failure, sepsis, and the severity of EWS. These variables significantly affect death (Cox & Snell R Square=0.603).

Conclusion: Non-compliance in the implementation of EWS for adults in hospital hospitals is at risk of increasing patient mortality. Implementing EWS in accordance with consistent SPO is crucial to reducing the mortality rate.

Keywords: Early Warning Score (EWS), non-compliance, mortality risk, adult inpatient wards, District General Hospital.