



## ABSTRAK

**Latar Belakang:** RSUD Arifin Achmad Provinsi Riau adalah rumah sakit kelas B dan rumah sakit rujukan Covid-19 yang menghasilkan limbah lebih kurang 259.655 kg sehingga pengelolaannya harus sesuai peraturan yang berlaku. Beberapa masalah yang dihadapi RSUD Arifin Achmad adalah seperti belum ada kebijakan tertulis tentang pengelolaan limbah medis dan masih belum lengkap beberapa fasilitas untuk pengelolaan sampah medis.

**Tujuan:** Tujuan Penelitian ini adalah melakukan analisis sistem pengelolaan limbah medis padat di RSUD Arifin Achmad Pekanbaru.

**Metode:** Penelitian ini menggunakan metode kualitatif. Desain penelitian yang digunakan untuk penelitian ini yaitu studi kasus. Penelitian dilakukan di RSUD Arifin Achmad Pekanbaru, dengan informan penelitian sebanyak 12 informan.

**Hasil:** Perencanaan: Belum ada kebijakan dan instruksi kerja pengelolaan limbah medis, Terdapat SOP tentang penanganan limbah medis, biaya pengelolaan limbah berasal dari APBD, SDM pengelolaan limbah sudah cukup, TPS dan *Incenerator* telah mempunyai izin operasional. Proses: pemilahan, pewadahan, pengangkutan hingga penyimpanan telah memenuhi aturan yang berlaku. Pengolahan dilakukan dengan insinerator dan *sterilwave* setiap hari. Hasil: Telah memenuhi persyaratan Permenkes No. 2 tahun 2023 Tentang Peraturan Pelaksanaan Peraturan Pemerintah No. 66 Tahun 2014 Tentang Kesehatan Lingkungan, hanya beberapa item saja yang perlu dibenahi dan dilengkapi. Capaian SPM Pengelolaan limbah RSUD Arifin Achmad terkelola 100%.

**Kesimpulan:** Karakteristik jenis limbah B3 terbanyak berasal dari limbah infeksius non benda tajam dengan total 280.834 kg. Pengelolaan Limbah medis padat di RSUD Arifin Achmad sudah terlaksana, mulai dari komponen perencanaan, proses, dan hasil. Disarankan kepada pihak RSUD Arifin Achmad untuk membuat kebijakan pengelolaan limbah medis sesuai peraturan dan melengkapi sarana dan prasarana seperti jalur pengangkutan limbah medis.

**Kata Kunci:** Limbah Medis Padat, B3, RSUD Arifin Achmad



## ABSTRACT

**Background:** RSUD Arifin Achmad in Riau Province is a class B hospital and a referral hospital for Covid-19 that generates approximately 259,655 kg of waste, so its management must comply with applicable regulations. Some issues faced by RSUD Arifin Achmad include the lack of written policies on medical waste management and incomplete facilities for managing medical waste.

**Research Objective:** The objective of this research is to analyze the solid medical waste management system at RSUD Arifin Achmad Pekanbaru.

**Method:** This study uses a qualitative method. The research design employed is a case study. The research is conducted at RSUD Arifin Achmad Pekanbaru, with a total of 12 informants.

**Results:** Planning: There are no written policies or work instructions for medical waste management yet. There is a Standard Operating Procedure (SOP) for handling medical waste. The costs for waste management are covered by the Regional Budget (APBD). Human resources for waste management are adequate, and the Temporary Storage Facility (TPS) and incinerator have operational permits. Process: Sorting, packaging, transportation, and storage comply with applicable regulations. Processing is carried out with an incinerator and Sterilwave on a daily basis. Results: The facility meets the requirements of Health Minister Regulation No. 2 of 2023 regarding the Implementation Regulation of Government Regulation No. 66 of 2014 on Environmental Health. However, a few items still need improvement and completion. The achievement of the Service Standards for Waste Management at RSUD Arifin Achmad is 100%.

**Conclusion:** The characteristics of the most common type of hazardous waste (B3) are non-sharp infectious waste, totaling 280,834 kg. The management of solid medical waste at RSUD Arifin Achmad is already in place, covering planning, processes, and results. It is recommended that RSUD Arifin Achmad develop written policies for medical waste management in accordance with regulations and enhance facilities and infrastructure, such as medical waste transportation routes.

**Keywords:** Solid Medical Waste, Hazardous Waste (B3), RSUD Arifin Achmad.