

INTISARI

Tingkat teridentifikasinya *drug related problems* (DRPs) pada persepsian obat pasien di ruang perawatan intensif (ICU) lebih tinggi jika dibandingkan di unit non-ICU disebabkan kompleksitas penyakit pasien dan polifarmasi. Apoteker klinis sebagai bagian dari *critical care team* di ICU memiliki peranan penting dalam mencegah dan mengatasi adanya DRPs dengan cara memberikan rekomendasi dengan melakukan *assessment* kejadian DRPs. Apoteker klinis sebagai bagian dari *critical care team* sudah melakukan analisis kejadian DRPs secara berkala, namun kajian mengenai tingkat penerimaan *critical care team* terhadap rekomendasi apoteker masih jarang ditemukan di Indonesia. Penelitian ini bertujuan untuk mengetahui pola karakteristik DRPs yang banyak ditemukan pada pasien yang mendapatkan perawatan di ruang perawatan intensif dan mengkaji tingkat penerimaan *critical care team* terhadap rekomendasi apoteker klinis pada pasien ICU khususnya di Rumah Sakit Akademik UGM, Yogyakarta. Penelitian menggunakan metode deskriptif-analitik yang dilakukan secara retrospektif. Subjek penelitian ini adalah pasien dewasa di ICU Rumah Sakit Akademik UGM Yogyakarta pada periode Januari 2023-Desember 2023. Hasil penelitian menunjukkan domain primer DRPs yang paling banyak ditemukan adalah domain pemilihan obat (52%), dengan rekomendasi penyelesaian DRPs paling banyak diberikan pada level obat (51%). Sebagian besar rekomendasi penyelesaian DRPs dari apoteker klinis mendapatkan bentuk persepsi diterima dan diterapkan seluruhnya (82%). Tidak terdapat hubungan antara rekomendasi apoteker klinis (sig $2 \text{ tailed} = 0.281$) dengan persepsi *critical care team* pada kejadian DRPs pasien dewasa di ICU Rumah Sakit Akademik UGM Yogyakarta.

Kata kunci: *drug related problems* (DRPs), apoteker klinis, rekomendasi apoteker, persepsi *critical care team*, unit perawatan intensif (ICU)

ABSTRACT

The level of identification of drug related problems (DRPs) in drug prescriptions for patients in the intensive care unit (ICU) is higher when compared to non-ICU units due to the complexity of the patient's illness and polypharmacy. Clinical pharmacists as part of the critical care team in the ICU have an important role in preventing and overcoming DRPs by providing recommendations by assessing DRPs events. Clinical pharmacists as part of the critical care team have conducted periodic DRPs event analysis, but studies on the level of acceptance of critical care teams to pharmacist recommendations are still rare in Indonesia. This study aims to determine the pattern of DRP characteristics that are often found in patients receiving treatment in the intensive care unit and to examine the level of acceptance of critical care teams to clinical pharmacist recommendations in ICU patients, especially at the UGM Academic Hospital, Yogyakarta. The study used a descriptive-analytical method that was conducted retrospectively. The subjects of this study were adult patients in the ICU of UGM Academic Hospital Yogyakarta in the period January 2023-December 2023. The results showed that the most common primary domain of DRPs found was the drug selection domain (52%), with recommendations for resolving DRPs mostly given at the drug level (51%). Most of the recommendations for resolving DRPs from clinical pharmacists were in the form of perceptions that were accepted and fully implemented (82%). There was no relationship between clinical pharmacist recommendations (sig 2 tailed = 0.281) and the perception of the critical care team on the occurrence of DRPs in adult patients in the ICU of UGM Academic Hospital Yogyakarta.

Keywords: *drug related problems (DRPs), clinical pharmacists, pharmacist recommendations, critical care team perceptions, intensive care unit (ICU)*