

INTISARI

GAMBARAN TINGKAT KECEMASAN KELUARGA PASIEN DI RUANG INTENSIF DEWASA RSUP DR. SARDJITO YOGYAKARTA

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Latar Belakang: Tingkat kecemasan keluarga pasien ICU dapat menyebabkan ketidakstabilan fisik dan psikologis jangka panjang yang akan mempengaruhi tingkat partisipasi serta kemampuan pengambilan keputusan dalam perawatan pasien, sehingga mempengaruhi kualitas pengobatan dan perawatan.

Tujuan Penelitian: Mengetahui gambaran tingkat kecemasan keluarga pasien yang dirawat di ruang intensif dewasa RSUP Dr. Sardjito serta untuk mengidentifikasi penyebab kecemasan keluarga berdasarkan persepsi keluarga pasien yang dirawat di ruang intensif dewasa RSUP Dr. Sardjito Yogyakarta.

Metode: Metode Penelitian dengan deskriptif kuantitatif dengan 124 responden yang dilakukan di ruang Surgical Intensive Care Unit RSUP Dr. Sardjito Yogyakarta. Pengambilan sampel dengan teknik *accidental* sampling. Data primer diperoleh dari pengisian kuesioner oleh Responden Tingkat kecemasan diukur dengan *Hamilton Anxiety Rating Scale* (HARS) dan kuesioner kecemasan keluarga berdasarkan persepsi keluarga pasien. Data hasil dianalisa dengan metode univariat.

Hasil: Mayoritas keluarga pasien di ruang intensif dewasa RSUP Dr. Sardjito Yogyakarta tidak mengalami kecemasan (39,5%). Sebanyak 27,4% mengalami kecemasan ringan, 20,2% mengalami kecemasan sedang, 12,1% mengalami kecemasan berat dan 0,8% mengalami kecemasan berat sekali. Penyebab kecemasan berdasarkan persepsi keluarga pasien adalah kondisi pasien yang kritis (41,9%), tidak boleh menunggu (25,8%), dan keterbatasan jam kunjung (9,7%).

Kesimpulan: Sebagian besar keluarga pasien di ruang intensif dewasa RSUP Dr. Sardjito Yogyakarta tidak mengalami kecemasan. Mayoritas penyebab kecemasan berdasarkan persepsi keluarga pasien adalah kondisi pasien yang kritis.

Kata Kunci: Keluarga pasien, kecemasan, Intensif Care Unit (ICU), Dewasa

ABSTRACT

DESCRIPTION OF THE ANXIETY LEVEL OF PATIENTS' FAMILIES IN THE ADULT INTENSIVE CARE UNIT OF DR. SARDJITO HOSPITAL, YOGYAKARTA

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Background: *Anxiety among families of ICU patients can lead to long-term physical and psychological instability, which may reduce their participation and decision-making ability, ultimately affecting the quality of treatment and nursing care.*

Objective *To describe the level of anxiety of families of patients treated in the adult intensive care unit of Dr. Sardjito General Hospital and to identify the causes of family anxiety based on the perceptions of families of patients treated in the adult intensive care unit of Dr. Sardjito General Hospital Yogyakarta.*

Methods: *This study employed a quantitative descriptive design involving 124 respondents in the Surgical Intensive Care Unit of Dr. Sardjito General Hospital, Yogyakarta. Samples were selected using an accidental sampling technique. Primary data were collected through respondent-completed questionnaires. Anxiety levels were measured using the Hamilton Anxiety Rating Scale (HARS) and a family anxiety questionnaire developed based on the perceptions of patients' family members. Data were analyzed using univariate statistical methods.*

Results: *The majority of families of patients treated in the adult intensive care unit at Dr. Sardjito General Hospital, Yogyakarta, did not experience anxiety (39.5%). Mild anxiety was reported by 27.0% of respondents, moderate anxiety by 20.2%, severe anxiety by 12.1%, and extremely severe anxiety by 0.8%. Based on the families' perceptions, the primary causes of anxiety included the patient's critical condition (41.9%), restrictions on waiting with the patient (25.8%), and limited visiting hours (9.7%).*

Conclusion: *Most of the patient's families did not experience anxiety. Based on the results of the study, the cause of family anxiety based on the family's perception that was most often experienced was the patient's critical condition.*

Keywords: *Patient's family, anxiety, Intensive Care Unit (ICU), Adult*