



**FAKTOR – FAKTOR YANG MEMPENGARUHI UTILISASI KAMAR OPERASI
DAN PENGARUHNYA TERHADAP LUARAN KLINIS PASIEN DI RSUD DR.
ADJIDARMO RANGKAS BITUNG KABUPATEN LEBAK BANTEN**

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ABSTRAK

Latar Belakang: Kamar operasi merupakan fasilitas yang penting di Rumah Sakit. Salah satu indikator mutu pelayanan instalasi bedah sentral adalah utilisasi kamar operasi, waktu tunggu operasi, dan pembatalan operasi. Indikator ini penting bagi rumah sakit karena dapat berdampak pada indikator luaran klinis, salah satunya adalah *Length of Stay* (LoS). Data menunjukkan bahwa Rumah Sakit Umum Daerah dr. Adjidarmo Rangkasbitung pada tahun 2016 melaporkan terjadinya pembatalan operasi sebanyak 4,9% dari total 950 tindakan operasi.

Tujuan: Penelitian ini bertujuan untuk mengidentifikasi fenomena pembatalan dan lamanya waktu tunggu tindakan operasi sekaligus faktor-faktor yang mempengaruhinya dan pengaruhnya terhadap luaran klinis di Instalasi Bedah Sentral RSUD dr. Ajidarmo Kabupaten Lebak Banten.

Metode: Penelitian ini adalah penelitian kuantitatif dengan rancangan *cross sectional*. Penelitian ini dilakukan di Instalasi Bedah Sentral RSUD dr. Ajidarmo Kabupaten Lebak Banten pada bulan September – Oktober 2017. Variabel yang diteliti dalam penelitian ini yaitu usia, jenis kelamin, *severity level*, sumber pembiayaan, kategori operasi, dan jenis operasi dalam hubungannya dengan pembatalan operasi dan waktu tunggu operasi serta dampaknya terhadap *length of stay* (LoS).

Hasil: Rata-rata utilisasi kamar operasi per hari adalah sekitar 25 tindakan. Operasi kebidanan merupakan jenis operasi terbanyak dilakukan yaitu mencapai angka 394 tindakan selama periode pengamatan (1 bulan). Setelah dilakukan proses *adjustment*, pasien umum (Non-JKN) dan kategori operasi elektif merupakan faktor prediktor kejadian pembatalan operasi (*Prevalence Ratio/ PR* berturut-turut = 67,68; 95%CI = 24,92 – 183,80 dan 44,83; 95%CI = 4,88 – 412,05). Waktu tunggu operasi terlama di semua kamar operasi terjadi pada kasus bedah umum. Setelah dilakukan proses *adjustment*, faktor prediktor lamanya waktu tunggu operasi adalah usia pasien kurang dari 65 tahun (PR = 2,91; 95% CI = 1,16 – 7,33), kategori operasi elektif (PR = 1,96; 95% CI = 1,17 – 3,29), dan jenis operasi bedah umum (PR = 2,67; 95% CI = 1,62 – 4,40). Penelitian ini tidak menunjukkan adanya dampak waktu tunggu operasi terhadap LoS.

Kesimpulan: Rata-rata utilisasi kamar operasi di RSUD dr. Adjidarmo melampaui standar yang disarankan. Sumber pembiayaan dan kategori operasi merupakan faktor yang mempengaruhi pembatalan operasi. Usia pasien, kategori operasi, dan jenis operasi merupakan faktor yang mempengaruhi waktu tunggu operasi. Waktu tunggu operasi tidak berdampak pada luaran klinis berupa *length of stay* (LoS).

Kata Kunci : Utilisasi kamar operasi, pembatalan operasi, waktu tunggu

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THE AFFECTED FACTORS OF OPERATING ROOM'S (OR) UTILIZATION AND ITS INFLUENCES TOWARD PATIENT CLINICAL OUTCOME IN RSUD DR. ADJIDARMO, LEBAK BANTEN REGENCY

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ABSTRACT

Background: Operating Room (OR) is important facility in hospital. One of the factors used is operating room utilization, operational waiting time, and cancellation of operation. This indicator is important for the hospital as it may impact on the clinical outcome indicators, one of which is the Length of Stay (LoS). The data show that the Regional General Hospital dr. Adjidarmo Rangkasbitung in 2016 reported the cancellation of operations as much as 4.9% out of a total of 950 operations.

Objective: The study aims to determine the number of delays and cancellations of elective surgery and cito surgery, the factors leading to cancellation and delay of elective and cito surgery, as well as the impact of cancellation and delay of elective surgery and cito surgery towards OR's utilization and its effect to patient clinical outcome in the Central Surgical Installation of RSUD Adjidarmo.

Method : Type of study was quantitative with cross sectional design. Adjidarmo Lebak Banten District in September - October 2017. The variables studied in this study were age, gender, severity level, financing source, operation category, and type of operation in relation to operational cancellation and waiting time of the operation and its impact on length of stay (LoS).

Result: Average OR utilization per day was about 25 cases. Obstetric surgery was the most common type of surgery that was reaching 394 cases during the observation period (1 month). After the adjustment process, the general patient and the elective surgery category were predictors of cancellation of operation (Prevalence Ratio/ PR respectively = 67.68; 95% CI = 24.92 - 183.80 and 44.83 95% CI = 4.88 - 412.05). The longest operating waiting time in all operating rooms occurred in the case of general surgery. After adjustment, the predictors of waiting time were patient age less than 65 years (PR = 2,91; 95% CI = 1,16 - 7,33), elective surgery category (PR = 1,96; 95% CI = 1.17 - 3.29), and the type of general surgery (PR = 2.67; 95% CI = 1.62 - 4.40). This research did not show any effect of waiting time of operation on LoS.

Conclusion: Average operating room utilization in the Regional General Hospital dr. Ajidarmo Lebak Banten exceeded the recommended standards. Financing sources and categories of operations were factors that affect cancellation of operations. Patient age, surgery category, and type of surgery were factors that affect surgical waiting times. Operation waiting time had no impact on LoS.

Keywords: Operating room utility, operation cancellation, waiting time

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