



DESKRIPSI KENYAMANAN TERMAL BAGI PERAWAT ICU RS PKU MUHAMMADIYAH GAMPING

Oleh

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INTISARI

Kondisi kenyamanan termal yang buruk dapat menurunkan efisiensi kerja dan meningkatkan kesalahan yang dilakukan penghuni. Deskripsi kenyamanan termal bagi perawat ICU di Indonesia saat ini belum tersedia sebab belum ada penelitian yang mengkaji deskripsi tersebut. Oleh karena itu *assessment* kenyamanan termal perlu dilakukan guna mengetahui deskripsi kenyamanan termal penghuni bangunan ICU di Indonesia. Penelitian dilaksanakan di ICU RS PKU Muhammadiyah Gamping. *Assessment* dilakukan dengan menggunakan metode pengukuran objektif dan subjektif. Pengukuran objektif mengumpulkan data suhu udara, kelembapan relatif dan kecepatan angin dalam bangunan. Pengukuran subjektif menggunakan kuesioner yang terbatas pada sensasi dan preferensi suhu, kelembapan, dan pergerakan angin, kenyamanan dan penerimaan termal.

Sebanyak 15 perawat berpartisipasi dalam pengisian kuesioner. Kondisi udara ICU melebihi batas kriteria sebesar 22-25°C dan 50-70% dari Kemenkes RI. Sensasi yang dirasakan perawat karena pengaruh lingkungan termal adalah sensasi termal, dan tidak dapat terpisah menjadi sensasi suhu, kelembapan, dan pergerakan angin. Adanya hubungan linier nilai indeks ET* terhadap sensasi suhu dengan gradien 0,0305, serta terhadap penerimaan dengan gradien -0,3303 menunjukkan semakin nilai indeks ET* meningkat, semakin meningkat panas yang dirasakan perawat, dan semakin perawat tidak menerima kondisi lingkungan termalnya.

Kata kunci: kenyamanan termal, perawat, ICU, metode objektif dan subjektif.

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THERMAL COMFORT DESCRIPTION FOR NURSES OF ICU RS PKU MUHAMMADIYAH GAMPING

by

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ABSTRACT

Poor thermal comfort conditions can reduce performance and increase errors made by occupants. Description of thermal comfort for ICU nurses in Indonesia is currently not available because there are no studies that have been examined before. Therefore, assessment of thermal comfort need to be conducted to find out thermal comfort description of ICU occupants in Indonesia. The study was conducted at ICU in PKU Muhammadiyah Hospital Gamping. To assess thermal comfort, both subjective and objective measurement methods were performed. Objective measurement collected data of the air temperature, relative humidity, and wind velocity. Therefore subjective measurement used questionnaire which limited at three thermal sensation and preference of temperature, humidity, and air movement, thermal comfort, and acceptance.

Fifteen nurses were involved in filling out the questionnaire. Air condition of the ICU exceeded the criteria limit of 22-25° C and 50-70% from Ministry of Health RI. The sensation that nurses perceive due to the influence of the thermal environment is a thermal sensation and can not be separated into the sensations of temperature, humidity, and wind movement. The linear correlation between ET index value to temperature sensation with gradient 0,0305, and to acceptance with gradient of -0.3303 indicated that the value of ET * index increases, the more heat the nurse perceives, the more the nurse does not accept the condition of thermal environment.

Keywords: thermal comfort, nurse, ICU, objective and subjective method.

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