# ABSTRAK

## Hubungan Penerapan *Early Warning Score* (EWS) dengan *Clinical Outcomes* Pasien di Instalasi Rawat Inap Dewasa RSUP Dr. Sardjito Yogyakarta

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**Latar Belakang:** EWS merupakan skoring sistem sederhana yang dapat membantu petugas kesehatan mendeteksi perubahan status kesehatan pasien. EWS sudah diterapkan di berbagai rumah sakit secara internasional termasuk di Indonesia namun evaluasi atau studi terkait penerapan EWS di rumah sakit di Indonesia sampai saat ini belum banyak khususnya di Instalasi Rawat Inap (Bangsal) Dewasa.

**Tujuan**: Tujuan dari penelitian adalah untuk mengidentifikasi hubungan penerapan EWS dengan *clinical outcomes* (hasil klinis) pasien di Instalasi Rawat Inap Dewasa.

**Metode**: Penelitian ini adalah penelitian analitik korelasional dengan menggunakan pendekatan *cross sectional*. Penelitian ini menggunakan data sekunder dan telah dilaksanakan pada tanggal 01 Maret- 05 April 2019 di instalasi catatan medik RSUP Dr. Sardjito Yogyakarta. Total populasi dalam penelitian ini adalah 22.662 dan total sampel 400 responden. Pemilihan sampel dengan *multistage sampling*. Data dikumpulkan dengan menggunakan lembar ceklis dan dianalisis dengan menggunakan Uji Chi Square dan Uji Fisher.

**Hasil**: Hasil penelitian ini menunjukkan mayoritas (95,0%) penerapan EWS sudah diterapkan dan 52,3% tidak mengalami *outcomes* tidak diharapkan. 80% responden dimonitor setiap 4-6 jam dan lama rawat responden di rumah sakit rata-rata ± 9 hari, 93,9% responden tidak mengalami eskalasi perawatan, henti jantung (82,1%) dan kematian (82,8%) selama dirawat di rumah sakit. Selain itu, hasil penelitian menunjukkan penerapan EWS berhubungan signifikan dalam mengantisipasi *outcomes* pasien (LOS > 9 days $P = 0.008$, eskalasi perawatan $P = 0.011$, henti jantung $P = 0,039$, and kematian $P = 0,036$) di instalasi rawat inap dewasa RSUP Dr. Sardjito Yogyakarta.

**Kesimpulan**: Terdapat hubungan antara penerapan EWS dengan *clinical outcomes* pasien di instalasi rawat inap dewasa RSUP Dr. Sardjito Yogyakarta, Indonesia.

**Kata Kunci:** *Early Warning Score* (EWS), hasil klinis, lama rawat, eskalasi perawatan, henti jantung, kematian, rawat inap (bangsal) dewasa

# ABSTRACT

## Association between The Application of Early Warning Score (EWS) with Patient's Clinical Outcomes in Adult Inpatient Wards at Dr. Sardjito Hospital Yogyakarta

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**Background**. Rapid deterioration and critical illness can occur to the patients during hospitalization. It often has preceding changes in physiological parameters. Track and trigger systems, such as the Early Warning Score (EWS) used in Indonesia, has been demonstrated to have some utility in identifying these patients particularly among general medical and surgical patients.

**Aim**. Identify the association between EWS implementation and patient's clinical outcomes in adult inpatient wards.

**Design.** We performed secondary analysis of a cross sectional study at adult inpatient wards of Dr. Sardjito hospital in Yogyakarta.

**Method**. The data for 400 patients reviewed by the outreach team between January-December 2018. Samples selected using multistage sampling, data were collected using checklist form and analyzed by using chi square and fisher test.

**Result**. The majority of EWS application had been implemented (95.0%) and 52,3% did not gain any problems or adverse outcomes while being hospitalized. The length of stay was mostly ± 9 days. There were no escalation event (93,9%), cardiac arrest (82,1%) and death incident (82,8%) during hospitalization. The EWS application was statistically siginificant in anticipating outcome measures (LOS > 9 days $P = 0.008$, escalation of care $P = 0.011$, cardiac arrest $P = 0,039$, and mortality $P = 0,036$) in adult inpatients wards at Dr. Sardjito Hospital Yogyakarta.

**Conclusion**. There was association between the application of EWS with patient's clinical outcomes in adult inpatient wards at Dr. Sardjito Hospital Yogyakarta, Indonesia.

**Keywords:** Early Warning Score (EWS), clinical outcomes, length of stay, escalation of care, cardiac arrest, death, adult inpatient wards