

**HUBUNGAN TINGKAT PENGETAHUAN TENAGA KESEHATAN  
MENGENAI MTBS BATUK TERHADAP PENERAPAN TATA LAKSANA  
BATUK MENURUT MTBS DI PUSKESMAS KOTA SAMARINDA DAN  
KABUPATEN KUTAI KARTANEGARA**

Fatma Zulaikha<sup>1</sup>, Rina Triasih<sup>2</sup>, Purwanta<sup>3</sup>

<sup>1</sup> Mahasiswa Magister Keperawatan UGM

<sup>2</sup> Dosen Departemen Ilmu Kesehatan Anak FK UGM/ RSUP Dr . Sardjito

<sup>3</sup> Dosen FK UGM

**INTISARI**

**Latar belakang:** Pneumonia merupakan penyebab tersering kesakitan dan kematian pada balita di dunia. Manajemen Tata laksana Balita Sakit (MTBS) merupakan tata laksana terpadu balita sakit di Puskesmas untuk meningkatkan kualitas pelayanan kesehatan balita, yang tujuan akhirnya adalah untuk menurunkan angka kesakitan dan kematian balita, termasuk pneumonia.

**Tujuan:** Mengidentifikasi hubungan tingkat pengetahuan tenaga kesehatan mengenai MTBS batuk terhadap penerapan tata laksana batuk menurut MTBS.

**Metode:** Kami melakukan penelitian *cross sectional* di Puskesmas di kota Samarinda dan Kabupaten Kutai Kartanegara dari bulan Juli sampai Oktober 2015. Tingkat pengetahuan tenaga kesehatan dilakukan dengan pengisian kuesioner. Kualitas penerapan tata laksana batuk di Puskesmas dilakukan dengan observasi langsung di Puskesmas.

**Hasil :** Sebanyak 46 tenaga kesehatan diikutkan dalam penelitian ini. Observasi kualitas penerapan MTBS dilakukan pada 104 balita. Sebagian besar tenaga kesehatan memiliki tingkat pengetahuan yang baik mengenai MTBS (73,9%), tetapi 87,0% mempunyai penerapan tata laksana batuk dengan kategori kurang. Pengetahuan tentang MTBS batuk lebih baik pada tenaga kesehatan yang pernah mengikuti pelatihan MTBS. Tingkat pengetahuan berhubungan dengan kualitas penerapan MTBS batuk, tetapi hubungannya lemah.

**Kesimpulan:** Tingkat pengetahuan berhubungan dengan kualitas penerapan MTBS batuk, tetapi hubungannya lemah

**Kata kunci:** MTBS, batuk, pengetahuan, tenaga kesehatan

**THE CORRELATION BETWEEN KNOWLEDGE OF HEALTH  
WORKER ABOUT IMCI COUGH AND THE IMCI IMPLEMENTATION  
OF COUGH PROCEDURE IN PRIMARY HEALTH CENTRE  
SAMARINDA CITY AND KUTAI KARTANEGARA CITY**

Fatma Zulaikha<sup>1</sup>, Rina Triasih<sup>2</sup>, Purwanta<sup>3</sup>

<sup>1</sup> Student of Master Nursing Program Faculty of Medicine UGM  
Lecturer Pediatric Department Faculty of Medicine UGM /Sardjito Hospital

<sup>3</sup> Lecturer Faculty of Medicine UGM

**ABSTRACT**

**Background :** Pneumonia is the leading causes of morbidity and mortality in young children worldwide. Integrated Management of Childhood Illnesses (IMCI) is an integrated management in primary level of health care to improve the quality of child care, which goal is to decrease the morbidity and mortality rate in children, including pneumonia.

**Objective:** to evaluate the correlation between health workers' knowledge and the quality of IMCI implementation for children with cough in primary health care.

**Methods:** We conducted a cross sectional study in Samarinda and Kutai Kartanegara districts from July to October 2015. The health workers' knowledge was assessed by a questionnaire. The quality of IMCI implementation was evaluated by direct observation to health workers who managed a child visiting primary health care with cough.

**Results:** A total of 46 health workers were involved in this study. Observational was conducted to 104 children. The majority of health workers (73.9%) had good knowledge of IMCI for managing cough, but the implementation of IMCI for cough in 87.0% health workers was not good. The knowledge of IMCI was better among those who have had IMCI training. There was a weak correlation between knowledge and the quality of IMCI implementation in primary health care.

**Conclusion:** There was a weak correlation between knowledge and the quality of IMCI implementation in primary health care.

**Keywords:** IMCI, cough, knowledge, health worker