

## Overview Service Action Emergency Patient In H. Abdul Manap Hospital

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### ABSTRACT

The Emergency Department (IGD) is a unit that plays a major role in the implementation of emergency management in a crisis or emergency situation for patients with a threatened health status. ED room. This research method uses descriptive observational qualitative design. The sample in this study were 70 respondents. sampling technique using the Lameshow formula with a confidence level of 90% and a large deviation of 20% or

0.3. The results of the Overview of Patient Service Research in the Emergency Room of RSUD H Abdul Manap Jambi City the characteristics of respondents based on service procedures were carried out the most, namely giving oxygen with a total of 52 respondents (74.28%), the most common action was providing infusion assistance by 49 respondents (70%), patients with OPA assistance were 3 respondents ( 4.28%), patients with BVM assistance were 5 respondents (7.14%), patients with Neck collar assistance were 2 respondents (2.85%), GCS examination were 68 respondents (97.14) and blood tests were 65 respondents (92.85%). The conclusion from the results of this study can be concluded that the nurses in the emergency room of RSUD H. Abdul Manap Jambi City are quite good in patient care when receiving incoming patients and are supported by the category of patients who get complete and good service, namely 65 respondents (92.85%).

**Keywords:** Patients services, Emergency Rooms, Hospital Service

### INTRODUCTION

Emergency Room is a unit that plays a major role in implementing emergency management when providing health services to patients in crisis or emergency situations and in which there are nursing activities for patients whose health status is experiencing problems. threat (Palencia J). Patients who enter the emergency room are patients who need fast and appropriate treatment to improve their condition health conditions they face, Rankin et al' Emergency management is an appropriate management of crisis case assessment that is needed when the patient's health condition requires immediate assistance as an effort to reduce the number of urgency or emphasis on numbers death (Salmah, S. and Nurhayati, N, 2023)

As health workers, medical officers must know the preparedness steps that must be taken when handling (Liu, X., Liu, Y., Lin, Q., Pan, L., Jingjin, J., Jianling, Z., et al. 2020) By focusing on important parts of crisis services, for example hospitals and between hospitals, a possible technique is to establish a *Public Safety Center* (PSC) which is an assistance unit that provides crisis administration through assistance as a crisis contact number . In emergency patients, medical staff can provide emergency ABCD triage using the *Airway route* , precisely with C-Spine protection, survey road breath, defense road breathing, and intubation if necessary. In *Breathing*, pay attention to spontaneous breathing, speed, depth, breathing patterns (Luthfia, N. 2021), (Maharina, R. 2022). In *Circulation* assessment , assess the pulse rate, pulse survey, by touching the skin area to see the skin temperature, color, humidity and check for wounds and bleeding. Next, carrying out *Disability* is a demonstration of checking the patient's level of consciousness, and carrying out *Exposure* by removing the patient's clothes to check whether there is bleeding in the body area (Raja Christovel, N. 2021)

Emergency Services is the initial assessment action carried out on patients who come to the ER on When an action is to be carried out, the composition of SOPs that have been made by each hospital can make it easier to assess the patient so that it will not take a long time to provide treatment (Kombih, S.U., Sari, D.K., dan Hidayat, T. 2024). help on patient, initial The assessment can also be carried out on non- trauma and trauma patients, the officers who can carry it out are health workers which legally already has legality (Pratiwi, A. N. and Sari, D. K. 2023), (Mohtar, M.S. and Apriandi, M.R. 2020)

In an emergency assessment, there are several important components that can be carried out by health workers for the initial assessment of patients and are the main stages, namely *Airway, Breathing, Circulation, Disability* and *Explosure*. or known with Components ABCD (Khairari, N.D. (2021). Patients who require emergency assessment are patients in the critical and emergency categories and patients who require critical treatment to reduce mortality. However, in the emergency room, initial assessments are often carried out on patients with heart failure and respiratory problems (Hidayat, T. dan Irnawan, A. 2023), (Thim, T., Krarup, N.H.V., Grove, E.L., Rohde, C.V., Lofgren, B. (2012)

Based on the phenomenon that has been as described previously, the author is interested in conducting further research regarding : implementation of services patient in the emergency room at Abdul Manap Hospital, Jambi City. Apart from that, it is also to find out whether the emergency assessment has been implemented effectively enough so that we can see success in treating patients with category serious and emergency at IGD Abdul Manap Regional Hospital, Jambi City.

## METHODS

The research used in this research is descriptive observational research. Descriptive research method Observational nature presenting data, analyzing data, and interpreting data. Descriptive Observational research aims to describe or describe the phenomena found in the place to be studied. This research is a survey or case study type. This research instrument used a standard observation sheet for assessing hospital emergencies at RSUD Indramayu and the Ministry of Health. During the observation, all contents are carried out activity will documented in a checklist sheet containing patient assessment notes.

This research conducted in IGD Abdul Manap Hospital, Jambi City, for patients admitted to the emergency room at Abdul Manap Hospital, Jambi City. Study lasts for one semester starting from making a research proposal , collecting data at the emergency room at Abdul Manap Hospital, Jambi City on February 22 2022 to March 8 2022, collecting data results and until the completion of the research. The sample categories taken by researchers were respondents who met the inclusion criteria and the samples observed were selected, namely patients who visited the emergency room and met the requirements for patient assessment, totaling 70 patients in the emergency room at Abdul Manap Hospital, Jambi City.

**RESULTS**

**Analysis Univariate**

Table 1 Distribution Action Service Frequency Emergency Patient in Hospital ER  
H. Abdul Manap City Jambi.

No	Characteristics Respondent	Frequency (n=70)	Percentage (%)
1.	Type Sex		
	Man	31	44.2
	Woman	39	55.71
	Total	70	100
2.	Age		
	Children	6	8.57
	Teenager	12	17.14
	Mature	14	20
	Elderly	38	54.28
	Total	70	100
3.	Level Education		
	Not yet school elementary school	3	4.28
	Junior High School	20	28.57
	Senior High School	15	21.42
	Bachelor	28	40
	Total	4	5.71
	Total	70	100
4.	Wedding		
	Marry	50	71.42
	Not yet Marry	20	28.57
	Total	70	100
5.	Outrageous Main		
	Pneumonia	52	74.28
	Accident	5	7.14
	Bleeding	8	11.42
	Nauseous vomit	5	7.14
	Total	70	100

Source : Data Primary February – March 2022

Based on the category of respondents, the largest number of respondents is the elderly 38 respondents (54.28%), the gender category with the largest number, namely women, 39 respondents (55.71%), in the education category the largest number that is SENIOR HIGH SCHOOL 28

respondents (40%), marital status category with Married status that is 50 respondents (71.42%), and based on the main complaint, namely patients who came with accident status, 34 respondents (48.57%).

Table 2 : Distribution Frequency Respondent in IGD HOSPITAL Abdul Manap City Jambi Based on Airway Procedure for Giving OPA (*oropharyngeal airway*)

OPA	<i>f</i>	%
Done	3	4.28
No	67	95.71
<b>Total</b>	<b>70</b>	<b>100</b>

Source : Data Primary 2022

Table 2 based on the table above shows that the characteristics of respondents are based on procedure service in 3 respondents (4.28%) carried out OPA and the number of services was not distributed 67 respondents (95.71%).

Table 3 : Distribution Frequency Respondent Based on Airways (*Head Tilt and Chin Lift/ Jaw Trust*) in the Emergency Room of H. Abdul Manap Regional Hospital, Jambi City

<i>Head Tilt And Chin Elevator/ Jaw Trust</i>	<i>f</i>	%
Done	3	4.28
No	67	95.71
<b>Amount</b>	<b>70</b>	<b>100%</b>

Source : Data Primary 2022

Table 3 shows the characteristics of respondents based on action *Head Tilt and Chin Lift/ Jaw Trust* are done as much as possible 3 respondents (4.28%) And No carried out by 67 respondents (95.71%).

Table 4: Frequency Distribution of Respondents based on the provision of Breathing (BVM) in the emergency room of H. Abdul Manap Hospital, Jambi City

BVM ( <i>Sec Valve mask</i> )	<i>f</i>	%
Done	5	7.14
No	65	92.85
<b>Amount</b>	<b>70</b>	<b>100%</b>

Source : Data Primary 2022

Table 4 shows the characteristics of respondents based on giving BVM action that is Good amount 5 respondents (7.14%) and respondents who did not do so amounted to 65 respondents (92.85%).

Table 5: Frequency Distribution of Respondents in the Emergency Room of H. Abdul Hospital Manap City Jambi Based on Breathing (Giving Oxygen)

Oxygen	<i>f</i>	%
Done	52	74.28
No	18	25.71
<b>Amount</b>	<b>70</b>	<b>100%</b>

Source : Data Primary 2022

Table 5 Shows the characteristics based on giving Oxygen as big as 52 respondents (74.28%) whereas Which No 18 respondents were given oxygen (25.71).

Table 6 : Distribution Frequency Respondents based on *Circulation* of Infusion in the Emergency Room of H. Abdul Manap Hospital, Jambi City.

Infusion	<i>f</i>	%
Done	49	70
No	21	30
<b>Total</b>	<b>70</b>	<b>100%</b>

Source : Data Primary 2022

Table 6 shows that based on infusion administration there were 49 respondents (70%) get service giving infusion and 21 respondents (30%) no infusion was given.

Table 7 : Distribution Frequency Respondent based on Disabilities Inspection GCS (*Glasgow Coma Scal*) in H. Abdul Manap Hospital.

GCS	<i>f</i>	%
Done	68	97.14
No	2	2.85
<b>Total</b>	<b>70</b>	<b>100%</b>

Source : Data Primary 2022

Table 7 shows that based on the GCS examination carried out there were 68 respondents (97.14%) And 2 (2.85%) respondents No done G C S examination .

Table 8 : Distribution Frequency Respondent based on Giving *Neck Collars* in the emergency room of H. Abdul Manap Hospital, Jambi City.

<i>Neck Collars</i>	<i>f</i>	<i>%</i>
Done	2	2.85
No	68	97.14
<b>Total</b>	<b>70</b>	<b>100%</b>

Source : Data Primary 2022

Table 8 shows how the Neck Collar is used amount 2 respondents (2.85%) And No done of 68 respondents (97.14%).

Table 9 : Distribution Frequency Respondent based on inspection temperature in IGD H. Abdul Manap Regional Hospital, Jambi City.

<i>Temperature</i>	<i>f</i>	<i>%</i>
Done	65	92.85
No	5	7.14
<b>Total</b>	<b>70</b>	<b>100%</b>

Source : Data Primary 2022

Table 9 Shows based on inspection temperature done amount 65 respondents (92.85%) and No carried out by 5 respondents (7.14%).

Table 10 : Distribution Frequency Respondent based on Inspection Pulse in IGD H. Abdul Manap Regional Hospital, Jambi City.

<i>Pulse</i>	<i>f</i>	<i>%</i>
Done	70	100
No	0	0
<b>Total</b>	<b>70</b>	<b>100%</b>

Source : Data Primary 2022

Table 10 Shows based on inspection pulse done amount 70 respondents (100%) and No carried out by 0 respondents (0%).

Table 11: Distribution Frequency Respondent based on inspection blood in IGD H. Abdul Manap Regional Hospital, Jambi City.

<i>Blood Test</i>	<i>f</i>	<i>%</i>
Done	65	92.85
No	5	7.14

<b>Total</b>	<b>70</b>	<b>100%</b>
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Source : Data Primary 2022

Table 11 shows the total number of blood tests carried out 65 respondents (92.85%) And 5 respondents (7.14%) did not do it .

## DISCUSSION

Based on the research results, the service description is known Emergency in the emergency room at H. Abdul Manap Hospital, Jambi City Table 1 shows the characteristics of the community based on the age level (years) of children that is as much 6 respondents (8.57%), teenager as much 12 respondent (17.14%), adults as many as 14 respondents (20%), and elderly as many as 38 respondents (54.28%). And the largest category based on age is the elderly category. This research is in line with research conducted by (Paradita Nurmalia, Irwan 2020) the condition of patients in the first aid category must undergo supporting examinations to optimize assessment results and prevent ongoing injuries, as a nurse you should always remember important things and points in patient assessment. Likewise, carrying out a complete blood test is a form of supporting implementation in patients <sup>(15)</sup>.

Table 2 based on the table above shows that the characteristics of respondents based on service procedures carried out by OPA were 3 respondents (4.28%) and the distribution of services not carried out amounted to 67 respondents (95.71%). This research is in line with research (Wijaya, Andarini, Setyoadi, 2015) where the results of the research explain that the response time of a nurse is very influential on the level of success in treating patients with accident trauma, a nurse must have a role in making decisions in nursing services, the research states 97% of nurses still fail to provide airway assistance to patients with a history of accidents due to unpreparedness, unpreparedness, and inability to carry out resuscitation or use medical devices in the emergency response phase (Wiratma, B., Program, M., Science, S., Country, A., Administration, D., Science, F. (2013)

Table 3 shows the characteristics of respondents based on *Head Tilt and Chin Lift/ Jaw Trust* actions were carried out by 3 respondents (4.28%) and 67 respondents did not (95.71%) this number can be obtained from observation results Where on 70 respondents There were only 3 respondents who experienced a loss of consciousness due to an accident, so they had to take action to free the airway using this technique so that it could help the patient's breathing and try to improve the patient's conscious status.

Table 4 shows the characteristics of respondents based on giving BVM action that is Good amount 5 respondents (7.14%) and respondents who did not carry out totaling 65 respondents (92.85%) This result was obtained from observations where there were 5 respondents who received BVM action where The patient was in the status of an accident and decreased consciousness, when the action was taken the patient experienced Respiratory failure and breathing were carried out by CPR so that to support CPR the patient was assisted with BVM to reactivate his breathing.

Table 5 Shows the characteristics based on giving Oxygen 52 respondents (74.28%) while 18 respondents (25.71) were not given oxygen. Patients who came to the emergency room on average complained of pneumonia and had the same diagnosis, so to support the initial emergency assessment, patients were given breathing assistance using oxygen to overcome the shortness of breath suffered. Table 6 shows that based on the provision of infusion, 49 respondents (70%) received infusion services and 21 respondents (30%) did not receive infusion. patient Which come to IGD An IV was installed because the diagnosis of pneumonia and decreased consciousness and accident victims with bleeding required *IV line* assistance maintain the patient's metabolism the For support repair metabolism.

Table 7 shows that based on the GCS examination carried out there were 68 respondents (97.14%) and 2 (2.85%) respondents did not undergo a GCS examination, when the patient came to the emergency room the patient underwent a GCS examination before any other action was carried out, the aim was to ensure that The patient's level of consciousness is still at a safe level and helps to

provide other actions. Table 8 shows that based on the use of Neck Collars, there were 2 respondents (2.85%) and 68 respondents did not do it (97.14%), patients with accident status and injuries to the head and neck were placed in pairs Neck collar is used to maintain airway stability and help The patient can move more freely because the patient who has the neck collar installed is a patient with neck and head codera status.

Table 9 shows that based on temperature checks, the number of respondents who had temperature checks was a total number of respondents 65 respondents (92.85%) while 5 (7.14%) including not having their temperature checked because the only complaint they experienced was nausea and vomiting. Table 10 shows that based on the pulse check s carried out by many respondents is as big as 70 respondents 0 (0%) respondents, all respondents carried out checking pulse To use measure the stability of consciousness.

Table 11 Shows blood and laboratory tests (blood test) was carried out by 65 respondents (92.85%) and 5 respondents did not do it (7.14%), to support the primary survey, a blood test was carried out, namely to find out the main diagnosis in order to reduce the death rate due to a decrease in oxygen in the body, where the average respondent was diagnosed with pneumonia so as to prevent a decrease in consciousness in the patient. Showing characteristics based on an attitude of self-confidence was the highest at 67 respondents (95.71%) while it was done with an attitude of lack of trust 3 respondents (4.28).

## CONCLUSIONS

Based on the results of research on the description of patient care services in the emergency room at H. Abdul Manap Hospital, Jambi City, the following conclusions were obtained:

1. The emergency room of H. Abdul Manap Hospital, Jambi City shows that the average number of patients who come to the emergency room are patients diagnosed with pneumonia, namely 52 (74.28%) respondents. so patient the get action most Lots that is respiratory assistance using oxygen.
2. H. Abdul Manap Regional Hospital Emergency Room, Jambi City based on oxygen delivery service procedures, namely 52 (74.28%) respondents and Infusion administration is carried out at the service stage emergency of which 49 patients (70%) received infusion assistance To use guard metabolism patient's body, GCS examination was 68 (97.14%) respondents, patients with the use of a neck collar were 2 (2.85%) respondents, patients had their temperature checked by 65 (92.85%) respondents, patients had their pulse checked by 70 (100%) respondents to maintain the stability of the patient's consciousness.
3. Description Implementation of Services in The emergency room at H. Abdul Manap Hospital, Jambi City was quite good, with 65 (92.85%) respondents get appropriate service with complaint And diagnosis, while 5 (7.14) respondents died due to lack of patient care.

## REFERENCES

1. Amaliah, N., Herawati, Y.T., Witcahyo, E. (2017) 'SWOT Analysis in Emergency Room (ER) of Fathma Medika Hospital Gresik in Order to Increase Visits', *Jurnal Fathma Medika*, 5(2), pp. 223–230.
2. Gobel, Y., Wahidin, W., and Muttaqin, M. (2018) 'Quality of Health Services in the Emergency Room at the Makassar City Regional General Hospital', *Jurnal Administrasi Negara*, 24(3), pp. 177–188.
3. Hartati, S. (2016) 'Response Time for Nurses in the Emergency Room', *Jurnal Kebidanan Keperawatan - Stikes Dian Husada Mojokerto*, 4(3), pp. 1–7.
4. Hardiansyah, M., Hidayat, T., dan Irnawan, A. (2023) 'Kualitas Pelayanan Instalasi Gawat Darurat di Rumah Sakit Umum Daerah H. Padjonga Dg. Ngalle, Takalar', *Jurnal Riset Kesehatan Tanah Laut*, 6(2), hlm. 172–181.
5. Khairari, N.D. (2021) 'The Initial Assessment of Nurse Knowledge to Response Time in Traffic Accident Case', *Indonesian Nursing Media*, 4(2), pp. 127.

6. Kombih, S.U., Sari, D.K., dan Hidayat, T. (2024) 'Implementasi Pelayanan Gawat Darurat Berdasarkan Keputusan Menteri Kesehatan Nomor 129/Menkes/SK/II/2008', *Journal of Aafiyah Health Research*, 5(2), hlm. 172–184.
7. Liu, X., Liu, Y., Lin, Q., Pan, L., Jingjin, J., Jianling, Z., et al. (2020) 'Research on Emergency Management of Pharmaceutical Care in Designated Hospital for Patients with COVID-19', *Journal Name*, pp. 1–13.
8. Luthfia, N. (2021) 'Penerapan Manajemen Bersihan Jalan Nafas Tidak Efektif Sebagai Terapi Kepatenaan Jalan Nafas Pada Pasien Dengan Penyakit Pneumonia Di Ruang Instalasi Gawat Darurat RS TK II Pelamonia', *Jurnal Cakrawala Ilmiah*, 3(2), pp. 541–545.
9. Maharina, R. (2022) 'Penyuluhan Manajemen Keperawatan Pelayanan di Ruang Gawat Darurat', *Jurnal Bina Cendekia Abdurrahman*, 4(1), hlm. 25–30.
10. Marlisa, M. (2019) 'Nurses' Knowledge About Primary Surveys (Initial Assessments) for Emergency Patients', *Journal Name*.
11. Mohtar, M.S. and Apriandi, M.R. (2020) 'Journal of Nursing Invention', *Journal of Nursing Invention*, 1(2), pp. 56–62.
12. Ose, M.I., Nursing, J., Science, F., K University, Tarakan B. (2019) 'Analysis of the Limitations of the Emergency Handling System in UGD Puskesmas / Primary Health Care Center Services', *Jurnal Kesehatan Indonesia*, 2(1).
13. Palencia, J. (1967) 'Rapid Assessment Management of Hospital Emergency Installations during the Covid-19 Pandemic', *Angewandte Chemie International Edition*, 6(11), pp. 951–952.
14. Pardede, S.O., Djer, M.M., Cahyani, F.S., Ambarsari, G., Soebadi, A. (2019) 'Faculty of Medicine, University of Indonesia, Department of Pediatrics', *Procedures Circumstances Bad Emergency On Child*.
15. Raja Christovel, N. (2021) *Penanganan Gawat Darurat dengan Triage ABCD dan Perlindungan C-Spine*, 1st ed.
16. Salmah, S. and Nurhayati, N. (2023) 'Analisis kesiapsiagaan manajemen kegawatdaruratan dan bencana di RSUD dr. Pirngadi Medan', *Jurnal Kebijakan dan Kesehatan Indonesia*, 12(2), pp. 78–87.
17. Salasa, S., Murni, T.W., and Emaliyawati, E. (2017) 'Empowerment of Youth Groups through a Contingency Planning Approach in Increasing Preparedness for the Threat of Death Due to Disasters', *Jurnal Pendidikan Keperawatan Indonesia*, 3(2), pp. 154.
18. Suharya, D., Afiani, N., and Arif, T. (2018) 'Relationship Between the Primary Survey Application and Improved Survival of Head Trauma Patients in the Emergency Room at Bangil Regional Hospital', *Jurnal Kesehatan dan Ilmu Pengetahuan*, 2(1), pp. 24–33.
19. Syafarudin (2005) 'No Title', *Management of Educational Institutions*.
20. Thim, T., Krarup, N.H.V., Grove, E.L., Rohde, C.V., Lofgren, B. (2012) 'Initial Assessment and Treatment with the Airway, Breathing, Circulation, Disability, Exposure (ABCDE) Approach', *International Journal of General Medicine*, 5, pp. 117–121.
21. Ulya, R. (2020) "Kegawatdaruratan Primary dan Secondary Survey pada Pasien". *Jurnal Kesehatan Masyarakat dan Keperawatan*, 2(1), pp. 21–28.
22. Wiratma, B., Program, M., Science, S., Country, A., Administration, D., Science, F. (2013) 'Study of the Responsiveness of the Public Safety Center Program in Tulungagung Regency', *Journal Name*, pp. 1–7.
23. Yulia, R. and Alkano, P. (2019) 'Innovation in the Quality of Health Services in Modern Emergency Installations', *Instagram Journal*, 1–13.
24. Yasriq, L. (2019) 'The Role of Nurses in Conducting Assessments in Hospitals', *Journal Name*.
25. Zulaika, L. (2021) 'Emergency Nursing Assessment: A Review of Practices in Hospitals', *Journal of Emergency Nursing Practice*, 3(1), pp. 35–42.