

Infeksi daerah operasi pada pembedahan abdominal di Rumah Sakit Cipto Mangunkusumo Jakarta dari tahun 2012-2013 = Surgical site infection in abdominal surgery at Cipto Mangunkusumo Hospital from 2012-2013

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Abstrak

[ABSTRAK
 Infeksi daerah operasi merupakan hal yang harus diperhatikan oleh para ahli bedah mengingat tingginya morbiditas dan mortalitas pada pasien yang menderita infeksi daerah operasi Penulis ingin melakukan analisa secara garis besar bagaimana infeksi daerah operasi terutama pada infeksi daerah operasi pada operasi dengan golongan operasi bersih dan bersih tercemar Dilakukan penelitian retrospektif terhadap semua pasien divisi bedah digestif FKUI RSCM dari september 2012 hingga Juli 2014 Pasien dinilai berdasarkan kondisi preoperatif intraoperatif dan pasca operatif Dari data yang terhimpun selama penelitian di dapatkan 57 pasien menderita infeksi daerah operasi Delapan persen dari seluruh total operasi bedah digestif Keganasan kolorektal adenocarcinoma kolorektal menempati urutan pertama 22 39 Didapatkan 2 kasus yang merupakan operasi dengan tipe operasi bersih Didapatkan 17 kasus yang merupakan operasi dengan tipe bersih terkontaminasi Kata kunci Infeksi Daerah Operasi Pembedahan abdominal ABSTRACTSurgical site infection SSI have been responsible for the increasing cost morbidity and mortality related to surgical operations and continue to be a major problem even in hospitals with most modern facilities This study aimed to determine the incidence of SSI in the abdominal surgeries Obsteric and Gynecology surgery was excluded It was conducted over a period of 12 months All Surgeries 791 cases where abdominal wall was opened were considered for the study Wound class was considered as clean clean contaminated contaminated and dirty The data collected includes details of timing of antimicrobial prophylaxis surgical wound infection types of surgeries emergency and elective nutritional status preoperative condition ASA preoperative bed stay intraoperative condition bleeding amount duration of operative and death rate The overall surgical wound infection rate was 8 Predominantly male had SSI than female Mostly case at productive age 25 65 years Colorectal was leading case of SSI 22 cases There was one case of clean surgery , Surgical site infection SSI have been responsible for the increasing cost morbidity and mortality related to surgical operations and continue to be a major problem even in hospitals with most modern facilities This study aimed to determine the incidence of SSI in the abdominal surgeries Obsteric and Gynecology surgery was excluded It was conducted over a period of 12 months All Surgeries 791 cases where abdominal wall was opened were considered for the study Wound class was considered as clean clean contaminated contaminated and dirty The data collected includes details of timing of antimicrobial prophylaxis surgical wound infection types of surgeries emergency and elective nutritional status preoperative condition ASA preoperative bed stay intraoperative condition bleeding amount duration of operative and death rate The overall surgical wound infection rate was 8 Predominantly male had SSI than female Mostly case at productive age 25 65 years Colorectal was leading case of SSI 22 cases There was one case of clean surgery]