

Analisis pemantapan mutu internal pada Instalasi Laboratorium Klinik Pratama Kementerian Kelautan dan Perikanan Republik Indonesia Tahun 2020 = Analysis of internal quality assurance in Primary Clinical Laboratory of the Ministry of Marine Affairs and Fisheries Republic of Indonesia, 2020

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Abstrak

Pelayanan pemeriksaan laboratorium Klinik Pratama KKP dirasakan masih rendah. Berdasarkan hasil studi pendahuluan pemantapan mutu internal pada tahap pra analitik, pasien mengeluhkan darah tidak berhenti sebanyak 3%, terdapat bekuan darah tabung EDTA sebanyak 7,5%, terjadi hemolisis sebanyak 10,5%. Pada tahap analitik, tidak adanya catatan evaluasi pada nilai control sedangkan pada tahap pasca analitik tidak dilakukan verifikasi validasi hasil pemeriksaan laboratorium dan ketidaklengkapan data pasien pada lembar hasil sebanyak 1,5%.

Penelitian ini dilakukan untuk menganalisis pemantapan mutu internal pada instalasi Laboratorium Klinik Pratama Kementerian Kelautan dan Perikanan. Penelitian ini adalah penelitian kualitatif menggunakan metode wawancara mendalam dan telaah dokumen. Penelitian ini dilakukan pada bulan Maret – Juli 2020. Kriteria informan penelitian adalah terdiri unsur pimpinan, pelaksana dan pengguna jasa laboratorium. Hasil penelitian ditemukan bahwa terdapat komponen input (organisasi dan manajemen) belum sepenuhnya terlaksana dengan baik, kemudian secara garis besar pada komponen proses dan output (tahap pra analitik, analitik dan pasca analitik) terdapat faktor penghambat yaitu ketidaklengkapan SOP pada tiap tahapan. Sedangkan faktor pendukungnya adalah tersedianya infrastruktur penunjang kegiatan laboratorium. Dari hasil dapat disimpulkan bahwa pemantapan mutu internal laboratorium belum terlaksana dengan baik dan masih terdapat ketidaklengkapan acuan di tiap tahap pra analitik, analitik dan pasca analitik. Perlu dilakukan monitoring seberapa jauh unsur organisasi dan sistem manajemen guna meningkatkan mutu laboratorium, kemudian dukungan sarana dan prasana dalam menunjang kegiatan laboratorium. Pada tahap pra analitik, analitik dan pasca analitik, petugas laboratorium perlu menambahkan kelengkapan SOP di setiap tahapan.Primary KKP Clinic laboratory examination services are still felt low. Based on the results of a preliminary study of internal quality assurance in the pre-analytical stage, patients complained of non-stopping blood by 3%, there was a 7.5% EDTA tube blood clot, hemolysis occurred by 10.5%. At the analytical stage, there was no evaluation record on the control value while at the post analytic stage there was no verification and validation of the results of the laboratory examination and incomplete patient data on the result sheet as much as 1.5%.

This study was conducted to analyze internal quality assurance at the Primary Laboratory Laboratory in the Ministry of Marine Affairs and Fisheries. This research is a qualitative study using in-depth interviews and document review. This research was conducted in March – July 2020. The criteria for the research informants consisted of elements of leadership, executors and users of laboratory services.

The results of the study found that there are input components (organizational and management) that have not been fully implemented well, then in broad outline in the processes and output components (pre-analytic, analytic and post-analytic stages) there are inhibiting factors namely incomplete Standard Operating

Procedure at each stage. While the supporting factor is the availability of supporting infrastructure for laboratory activities. From the results it can be concluded that the strengthening of laboratory internal quality has not been carried out properly and there are still incomplete references in each component pre-analytic, analytic and post-analytic. It is necessary to monitor the extent of the elements of the organization and management system in order to improve the quality of laboratories, then to support facilities and infrastructure to support laboratory activities. In the pre-analytical, analytic and post-analytic stages, laboratory staff need to add the completeness of the Standard Operating Procedure at each stage.