

ABSTRAK

Vio Firdatus Vanesa

PENGELOLAAN LIMBAH MEDIS PADAT INFEKSIUS DI RUMKITAL Dr. OEPOMO TAHUN 2024

xiv + 64 Halaman + 3 Gambar + 9 Tabel + 8 Lampiran

Rumah sakit memiliki peran krusial dalam merawat kondisi kesehatan dan berpotensi memberikan dampak negatif melalui limbah medis yang dihasilkan. Berdasarkan survei pendahuluan diketahui terdapat pengelolaan limbah medis padat infeksius di Rumkital Dr. Oepomo Surabaya yang belum memenuhi persyaratan pada tahap pewadahan, pengangkutan, penyimpanan sementara, sumber daya manusia, dan sarana prasarana. Berdasarkan permasalahan tersebut penelitian ini bertujuan untuk menggambarkan pengelolaan limbah medis padat infeksius di Rumkital Dr. Oepomo Tahun 2024.

Metode yang digunakan adalah deskriptif dengan pendekatan *cross sectional*. Data dikumpulkan melalui observasi langsung terhadap pengelolaan limbah medis padat infeksius. Informasi juga diperoleh melalui wawancara dengan petugas pengelola limbah medis padat infeksius. Selain itu, volume limbah medis padat infeksius diukur secara langsung di lapangan. Data yang diperoleh dibandingkan dengan Permenkes Nomor 2 Tahun 2023.

Hasil penelitian ini menunjukkan volume timbulan limbah medis padat infeksius di Rumkital Dr. Oepomo Surabaya selama 7 hari diperoleh sebesar 5,34 kg/hari. Penilaian proses pengelolaan limbah medis padat infeksius didapatkan tidak memenuhi syarat pada proses pewadahan, pengangkutan, dan penyimpanan sementara. Penilaian faktor penunjang pengelolaan limbah medis padat infeksius di meliputi sumber daya manusia serta sarana dan prasarana termasuk tidak memenuhi syarat.

Kesimpulannya proses pengelolaan limbah medis padat infeksius di Rumkital Dr. Oepomo Surabaya tidak sepenuhnya memenuhi persyaratan. Saran yang dapat diberikan adalah pada proses pewadahan sebaiknya limbah medis diisi tidak melebihi $\frac{3}{4}$ dari volume maksimalnya dan diikat membentuk kepang tunggal, proses pengangkutan menggunakan troli, dan penyimpanan sementara menggunakan *freezer*. Faktor penunjang pengelolaan limbah yaitu sumber daya manusia perlu mengikuti pelatihan penanganan limbah medis serta diperlukan pengadaan sarana APD secara lengkap untuk petugas pengelola.

Kata Kunci: Limbah Medis Padat, Infeksius, Pengelolaan Limbah

Daftar Pustaka: 36 (9 Buku, 23 Jurnal, dan 4 Peraturan Kementerian)

ABSTRACT

Vio Firdatus Vanesa

MANAGEMENT OF INFECTIOUS SOLID MEDICAL WASTE AT RUMKITAL

Dr. OEPOMO IN 2024

xiv + 64 Pages + 3 Picture + 9 Tabels + 8 Attachment

The hospital played a crucial role in treating health conditions and had the potential to cause negative impacts through generated medical waste. Based on the preliminary survey conducted, it was found that the management of infectious solid medical waste at Rumkital Dr. Oepomo Surabaya did not meet the requirements for containment, transportation, temporary storage, human resources, and infrastructure. Based on these issues, this study aimed to describe the management of infectious solid medical waste at Rumkital Dr. Oepomo in 2024.

The method used was descriptive with a cross sectional approach. Data was collected through direct observation of the management of infectious solid medical waste. Information was also obtained through interviews with infectious solid medical waste management officers. In addition, the volume of infectious solid medical waste was measured directly in the field. The data obtained was compared with Minister of Health Regulation Number 2 of 2023.

The results of this study indicated that the volume of infectious solid medical waste generated at Rumkital Dr. Oepomo Surabaya over 7 days was 5.34 kg/day. The assessment of the management process for infectious solid medical waste found that the containment, transportation, and temporary storage processes did not meet the requirements. The evaluation of supporting factors for managing infectious solid medical waste including human resources and facilities also did not meet the criteria.

The conclusion was that the management process of infectious solid medical waste at Rumkital Dr. Oepomo Surabaya did not fully meet the requirements. The recommendations that can be given were as follows in the containment process medical waste should not exceed $\frac{3}{4}$ of its maximum volume and should be tied into a single braid, transportation should use trolleys, and temporary storage should involve the use of freezers. Supporting factors in waste management include the need for personnel to undergo training in medical waste handling and the procurement of complete PPE facilities for waste management personnel.

Keywords: Medical Waste, Infectious, Waste Management

Bibliography: 36 (9 Books, 23 Journals, and 4 Ministry Regulations)