

INTISARI

Aini Rachman¹. M. I. Diah Pramudianti². Amiroh Kurniati². 2016. Pemantapan Mutu Internal Sampel Pra Analitik di Instalasi Patologi Klinik Rumah Sakit Umum Daerah Dr. Moewardi. ¹Program Studi D-IV Analisis Kesehatan, Fakultas Ilmu Kesehatan, Universitas Setia Budi. ²Bagian Patologi Klinik Rumah Sakit Umum Dr. Moewardi, Surakarta.

Kesalahan terbesar pada pengendalian mutu laboratorium adalah pra analitik (77,1%) dibandingkan analitik dan paska analitik. Tujuan penelitian adalah untuk mendapatkan hasil analisis pemantapan mutu internal (PMI) pra analitik di Instalasi Patologi Klinik Rumah Sakit Umum Daerah Dr. Moewardi (RSUD).

Desain penelitian adalah deskriptif *cross sectional*. Data sekunder dari *Laboratory Information system* (LIS) pada bulan Juli-Desember 2015. Hasil pengolahan data disampaikan secara deskriptif.

Jumlah sampel PMI pra analitik sebesar 1399 (0,33%) dari total 423.334 sampel. Berdasarkan ruangan, rawat inap (70,6%) lebih besar dibandingkan Instalasi Gawat Darurat (IGD) (20,16%) dan rawat jalan (9,08%). Berdasarkan sebelas kriteria sampel, secara urut yaitu *etilen diamin tetra asetat* (EDTA) beku (25,2%), ikterik (22,3%), hemolisis (15,3%), *prothrombin time activated partial thromboplastin time* (PT APTT) beku (13,2%), sampel tidak sesuai klinis (9,0%), sampel kurang (8,6%), sampel tidak ada (3,9%), *blood gas analysis* (BGA) beku (1,4%), BGA tidak sesuai klinis (0,6%), BGA curiga vena (0,4%) dan lipemik (0,0%). Berdasarkan unit pemeriksaan, terbanyak adalah hematologi (49,27%) kemudian kimia klinik (46,65%). Di unit hematologi didominasi EDTA beku (46,1%) dan PT APTT beku (26,6%), di unit kimia klinik didominasi ikterik (46,1%) dan hemolisis (29,6%). Diperlukan penelitian lanjutan dengan data primer, pembahasan sampel selain darah, serta PMI analitik dan paska analitik.

Kata Kunci : Pemantapan mutu internal, Pra analitik

ABSTRACT

Aini Rachman¹. M. I. Diah Pramudianti². Amiroh Kurniati². 2016. Pre Analytical Sample Internal Quality Assurance in Clinical Pathology Installation of Dr. Moewardi Hospital. ¹D-IV Study Program of Health Analyst, Faculty of Health Sciences, University of Setia Budi. ²Clinical Pathology Departement of Dr. Moewardi Hospital, Surakarta.

The Highest Error on laboratory quality control is pre analytical (77.1%) compared to analytical and post analytical. The aim of this study was to analyze results of pre analytical internal quality assurance (IQA) in Clinical Pathology Installation of Dr. Moewardi Hospital.

Design of study was cross sectional descriptive. Secondary data was taken from Laboratory of Information System (LIS) at July-December, 2015. The results of data processing was presented descriptively.

The Number of samples for pre analytical IQA are 1399 (0.33%) of the total 423.334 samples. Based on the room, inpatient care room (70.6%) is greater than the emergency room (ER) (20.16%) and outpatient care room (9.08%). Based on the eleven criteria of samples, there are respectively frozen ethylene diamine tetra acetic (EDTA) (25.2%), jaundice (22.3%), hemolysis (15.3%), frozen prothrombin time activated partial thromboplastin time (PT APTT) (13.2%), sample does not fit the clinical (9.0%), less sample (8.6%), sample does not exist (3.9%), frozen blood gas analysis (BGA) (1.4%), BGA does not fit clinical (0.6%), BGA with suspect vein (0.4%) and lipemic (0.0%), based on the inspection unit, the highest is hematology (49.27%) then clinical chemistry (46.65%). Hematology unit was dominated by frozen EDTA (46.1%) and frozen PT APTT (26.6%), clinical chemistry unit was dominated by jaundice (46.1%) and hemolysis (29.6%). Further research is needed with primary data, other samples discussion beside bloods, analytical and post-analytical IQA.

Keywords: Internal quality assurance, Pre analytical