



## Overview Of Nursing Care Implementation Critical in The Emergency Room Of Santa Elisabeth Hospital Medan

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**Abstract.** A Critical nursing care is a process for problem solving, decision making as well as an organized and systematic approach to nursing problems. Nursing care must be carried out completely and accurately because it is the nurse's self-defense against demands as well as proof that the correct nursing care has been carried out. The research objective is to find out the description of the implementation of critical nursing care in Emergency Room of Santa Elisabeth Hospital Medan 2023. The research design used is a descriptive research design. There are two populations in this study, namely nursing actions and documentation of critical nursing care, the sampling technique used purposive sampling 51 respondents and total sampling (critical nursing care documentation) as many as 68 respondents. The data collection instrument uses observation sheets for nursing actions consisting of infusions, ECG usage and oxygen therapy, as well as critical nursing care using observation sheets consisting of assessment, diagnosis, intervention/implementation and evaluation. The results show that the infusion was according to the SOP, the use of ECG was according to the SOP and sufficient oxygen therapy is according to the SOP for 51 respondents (100%). Critical nursing care complete review 65 (96%), diagnosis quite complete 48 (71%), complete intervention/implementation 65 (96%), complete evaluation 67 (99%) and documentation of critical nursing care majority complete 65 (96%) of 68 respondents. It is expected to be able to improve the accuracy and completeness of nursing care documentation through training for each officer.

**Keywords:** Implementation, Nursing Care, Critical

**Abstrak.** Asuhan keperawatan kritis merupakan proses untuk pemecahan masalah, pengambilan keputusan juga pendekatan yang terorganisir dan sistematis terhadap masalah keperawatan. Asuhan keperawatan harus dilakukan dengan lengkap serta akurat karena merupakan pertahanan diri perawat terhadap tuntutan juga sebagai bukti bahwa asuhan keperawatan benar telah dilakukan. Tujuan penelitian mengetahui gambaran pelaksanaan asuhan keperawatan kritis di IGD Rumah Sakit Santa Elisabeth Medan tahun 2023. Rancangan penelitian yang digunakan adalah rancangan penelitian deskriptif. Populasi dalam penelitian ini ada dua, yaitu tindakan keperawatan dan dokumentasi asuhan keperawatan kritis (perawat), teknik pengambilan sampel menggunakan purposive sampling (tindakan keperawatan) 51 responden dan total sampling (dokumentasi asuhan keperawatan kritis) sebanyak 68 responden. Instrumen pengumpulan data menggunakan lembar observasi untuk tindakan keperawatan terdiri dari tindakan pemasangan infus, tindakan pemakaian EKG dan tindakan terapi oksigen, serta asuhan keperawatan kritis menggunakan lembar observasi yang terdiri dari pengkajian, diagnose, intervensi/implementasi dan evaluasi. Hasil penelitian didapatkan tindakan pemasangan infus sesuai SOP, pemakaian EKG sesuai SOP dan terapi oksigen cukup sesuai SOP 51 responden (100%). Asuhan keperawatan kritis pengkajian lengkap 65 (96%), diagnose cukup lengkap 48 (71%), intervensi/implementasi lengkap 65 (96%), evaluasi lengkap 67 (99%) dan dokumentasi asuhan keperawatan kritis mayoritas lengkap 65 (96%) dari 68 responden. Diharapkan untuk dapat meningkatkan keakuratan dan kelengkapan dokumentasi asuhan keperawatan melalui pelatihan terhadap setiap petugasnya.

**Kata kunci:** Pelaksanaan, Asuhan Keperawatan, Kritis

### 1. INTRODUCTION

Critical care is defined as the direct delivery of medical care to critically ill or injured patients. A disease or injury that is considered critical is a disease that acutely damages one or more vital organ systems in such a way that there is a high probability of damage that can be life-threatening. Critical care involves very complex decision-making, for critical care there

are special areas such as coroner care units, intensive care units or emergency departments. Critical care specifically addresses the human response to life-threatening problems (Perrin & MacLeod, 2018).

The nursing process is a method to solve clinical problems, but not just a method of solving problems. The nursing process also takes an organized and systematic approach to clinical problems. The development of the intervention prompted recognition that nursing is important in the monitoring and observation of critically ill patients. Medical and surgical intensive care units separate the most critically ill patients (D.Urden et al., 2012).

Routine actions carried out at the emergency room of Santa Elisabeth Hospital Medan are the installation of infusions, the use of nebulizers, urethral catheterization, oxygenation therapy, the installation of a stigma, the implementation of triage, the use of ECG, and the transfer of patients to the inpatient ward. Based on the results of the initial survey conducted by the author using observations in the field, the author found that the implementation of nursing care in the emergency room that is included in the critical category is the act of installing 85% infusion, the action of oxygen therapy 85%, the act of transferring the patient to the inpatient ward 100%, and the act of using ECG 87% in accordance with the SPO at Santa Elisabeth Hospital Medan.

Specific and detailed actions performed by the nurse (e.g., measuring vital signs, monitoring intake and expenditure) are referred to as activities. Priority interventions from the NIC to review the first treatment activity associated with the intervention. In addition to priority interventions, the NIC contains other nursing interventions aimed at fatigue, for example increased exercise and sleep achievement. Nursing programs or activities should be aimed at the etiology in the patient's nursing diagnosis. With changes in the patient's condition, other activities may be added, altered or eliminated (Wilkinson, 2006).

According to Izzumi, in (Nuryani & Maridi, 2021), stated that the improvement of knowledge and communication *skills* affected the implementation of patient safety. Patient safety was improved, at a higher improvement in communication skills compared to the group that was not improved. In this case, another contributing factor that affects the implementation of patient safety is communication, where verbal and written communication is communication between nurses, nurses with doctors, nurses with other professions and nurses with patients. Effective, timely, accurate, complete, clear and easy-to-understand communication by the recipient can reduce errors during treatment and improve patient safety. Communication is also needed by nurses in carrying out nursing actions and in carrying out weighing and accepting

actions. The most patient safety occurs during weigh-in and acceptance, this is due to the lack of verbal and written communication by nurses during the implementation of weigh-in.

Based on the above background, the researcher is interested in conducting research on the Overview of the Implementation of Critical Care Care at the Emergency Room of Santa Elisabeth Hospital Medan in 2023.

## **2. THEORETICAL STUDIES**

According to Siagian, in (Pangemanan et al., 2019), nurses while providing care need to have high motivation in carrying out nursing care services where work motivation is a driving force for a person to make the greatest contribution to the success of the organization in achieving its goals, with the understanding that the achievement of organizational goals means the achievement of the personal goals of the members of the organization concerned, it can be concluded that the motivation in The basis is a person's interaction with a certain situation that he faces and is a reason for a person to act in order to meet the needs of his life.

According to Leininger, in (Sutriyanti & Mulyadi, 2019) Nurses' critical thinking skills are also needed in "*Transcultural Nursing*" which is nursing care with a scientific cultural area in the learning process and nursing practice focusing on the differences and similarities between culture and nursing care that requires nurturing awards, healthy illness, based on human cultural values, beliefs and actions, and the knowledge used in carrying out nursing care.

## **3. RESEARCH METHODS**

The design used is descriptive with a cross sectional approach, this approach is a type of approach that emphasizes observation time only once at a time. The design of this study aims to find out the critical nursing care actions in accordance with the existing SOPs. The population in this study is the documentation of critical patients totaling 68 people and critical nursing actions in accordance with SOP totaling 104 people carried out by nurses on patients in January 2023. The sampling technique used in the research on critical nursing care actions is non-probability sampling with the purposive sampling method, by selecting samples among the population according to the researcher's wishes. The number of samples for critical nursing care in this study was 51 people and critical nursing care in this study was 68 people (carried out by nurses on patients).

The variable in the study was the implementation of critical nursing care at the emergency room of Santa Elisabeth Hospital Medan. The instruments used are nursing care

observation sheets and observation sheets in accordance with the SOP of the Emergency Room of Santa Elisabeth Hospital Medan in 2022. This research was carried out at the Santa Elisabeth Hospital in Medan which is located on Jalan H. Misbah no.7, JATI, Medan Maimun district, Medan City, North Sumatra. The research was carried out on April 10 - April 22 (at the Emergency Room of Santa Elisabeth Hospital Medan) May 08 - May 10, 2023 (at the Medical Record of Santa Elisabeth Hospital Medan). This research has also been ethically feasible from the STIKes Santa Elisabeth Medan Health Research Ethics Commission with letter number No. 056/KEPK-SE/PE-DT/III/2023.

#### 4. RESULTS AND DISCUSSION

##### Distribution of standard operating procedures

**Table 1. Distribution of Respondents, Infusion Installation Actions Based on SOPs at the Emergency Room of Santa Elisabeth Hospital Medan in 2023**

<b>Infusion Installation</b>	<b>(f)</b>	<b>(%)</b>
Appropriate	<b>51</b>	<b>100</b>
Quite suitable	0	0
Less suitable	0	0
<b>Total</b>	51	<b>100.0</b>

Based on table 1, the distribution of respondents for the act of installing infusions based on SOPs at the Emergency Room of Santa Elisabeth Hospital Medan in 2023 was obtained according to 51 respondents (100%) out of 51 respondents.

**Table 2. Distribution of Respondents: ECG Usage Actions Based on SOPs at the Emergency Room of Santa Elisabeth Hospital Medan in 2023**

<b>EKG Installation</b>	<b>(f)</b>	<b>(%)</b>
Appropriate	<b>51</b>	<b>100</b>
Quite suitable	0	0
Less suitable	0	0
<b>Total</b>	51	<b>100.0</b>

Based on table 2, the distribution of respondents for the use of ECG based on SOPs at the Emergency Room of Santa Elisabeth Hospital Medan in 2023 was obtained according to 51 respondents (100%) out of 51 respondents.

**Table 3. Distribution of Oxygen Therapy Responders Based on SOPs at the Emergency Room of Santa Elisabeth Hospital Medan in 2023**

Oxygen Therapy	(f)	(%)
Appropriate	0	0
Quite suitable	<b>51</b>	<b>100</b>
Less Suitable	0	0
<b>Total</b>	51	<b>100.0</b>

Based on table 3, the distribution of respondents for oxygen therapy measures based on SOPs at the Emergency Room of Santa Elisabeth Hospital Medan in 2023 was quite in accordance with 51 respondents (100%) out of 51 respondents.

Distribution of critical nursing care

**Table 4. Distribution Based on the Assessment of Critical Nursing Care at the Emergency Room of Santa Elisabeth Hospital Medan in 2023**

Assessment	(f)	(%)
Complete	<b>65</b>	<b>96</b>
Quite complete	2	3
Incomplete	1	1
<b>Total</b>	68	<b>100.0</b>

Based on table 4. of the distribution based on the assessment of critical nursing care at the emergency room of Santa Elisabeth Hospital Medan, in 2023, a complete majority of 65 respondents (96%) and an incomplete minority of 1 respondent (1%) out of 68 respondents.

**Table 5. Distribution Based on Critical Care Diagnosis at the Emergency Room of Santa Elisabeth Hospital Medan in 2023**

Diagnosis	(f)	(%)
Complete	<b>4</b>	<b>6</b>
Quite complete	48	71
Incomplete	16	23
<b>Total</b>	68	<b>100.0</b>

Based on table 5. the distribution based on the diagnosis of critical nursing care at the Emergency Room of Santa Elisabeth Hospital Medan in 2023 was obtained by a complete minority of 4 (6%) respondents and a fairly complete majority of 48 (71%) of 68 respondents.

**Table 6. Distribution Based on Intervention and Implementation of Critical Care Care at the Emergency Room of Santa Elisabeth Hospital Medan in 2023**

<b>Intervention and Implementation</b>	<b>(f)</b>	<b>(%)</b>
Complete	<b>65</b>	<b>96</b>
Quite complete	0	0
Incomplete	3	4
<b>Total</b>	<b>68</b>	<b>100.0</b>

Based on table 6. of the distribution of respondents, intervention, and implementation of critical nursing care at the emergency room of Santa Elisabeth Hospital Medan, in 2023, a complete majority of 65 (96%) and an incomplete minority of 3 (4%) of 68 respondents.

**Table 7. Distribution Based on Evaluation of Critical Nursing Care at the Emergency Room of Santa Elisabeth Hospital Medan in 2023**

<b>Evaluation</b>	<b>(f)</b>	<b>(%)</b>
Complete	<b>67</b>	<b>99</b>
Quite Complete	0	0
Incomplete	1	1
<b>Total</b>	<b>68</b>	<b>100.0</b>

Based on table 5.8, the distribution based on the evaluation of critical nursing care at the Emergency Room of Santa Elisabeth Hospital Medan in 2023 was obtained with a complete majority of 67 (99%) and an incomplete minority of 1 (1%) from 68 respondents.

**Table 8. Distribution Based on Documentation of Critical Care Care at the Emergency Room of Santa Elisabeth Hospital Medan in 2023**

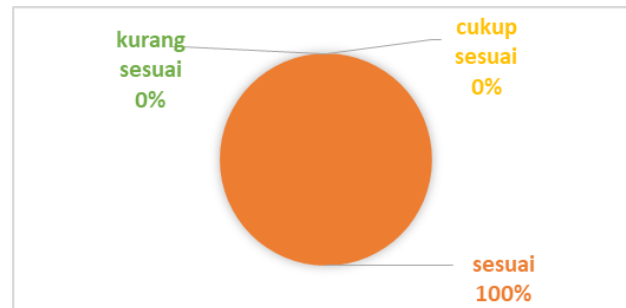
<b>Documentation</b>	<b>(f)</b>	<b>(%)</b>
Complete	<b>65</b>	<b>96</b>
Quite Complete	1	1
Incomplete	2	3
<b>Total</b>	<b>68</b>	<b>100.0</b>

Based on table 8, the distribution based on the overall coverage of critical nursing care at the Emergency Room of Santa Elisabeth Hospital Medan in 2023 was obtained with a complete majority of 65 (96%) and a fairly complete minority of 1 (1%) from 68 respondents.

## Discussion

### Implementation of critical nursing care (nursing action) at the Emergency Room of Santa Elisabeth Hospital Medan in 2023.

**Diagram 1. Distribution of Respondents, Infusion Installation Actions Based on SOPs at the Emergency Room of Santa Elisabeth Hospital, Medan, in 2023.**



Based on diagram 1, it shows that 51 respondents for the action of installing an infusion are the majority, namely 51 respondents (100%).

The act of installing infusions on patients is a very important measure in fulfilling nursing care for patients and is said to be an invasive measure, the act of installing infusions carried out in accordance with standard operating procedures (SOPs) can improve the quality of nursing care services. From the results of the study, it was found that the majority of respondents took the action of installing an infusion in accordance with the standard operating procedures (SOP), because if this action is not in accordance with the standard operating procedures (SOP), it can result in infection in patients.

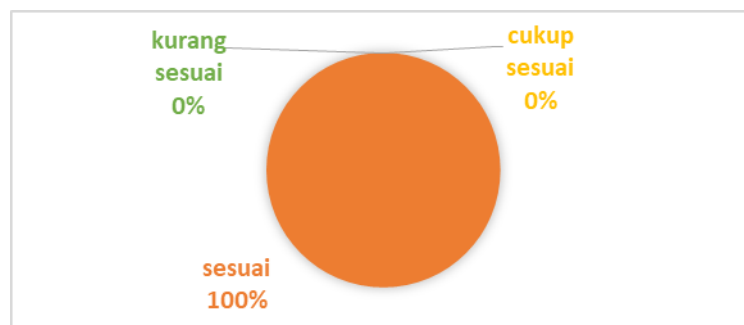
In the act of installing an infusion, there are several actions that are missed, such as explaining to the patient the meaning of why the infusion is installed, during the preparation of the device such as preparing sterile and anti-septic gauze, and when taking actions such as the helper not washing his hands before taking the action, recording on the label on the liquid bottle, the time of installation of the infusion and the speed of the drip. Of the few actions that are missed, it does not result in a fatal impact on the patient's health.

With the existence of standard operating procedures (SOPs), it can maintain consistency and the level of occupational safety and health. The implementation of standard operating procedures (SOPs) is part of the performance and behavior of each individual at work. The safety provided to patients can improve services and avoid the occurrence of malpractice demands. The installation of an IV is an invasive procedure and a procedure that is very often carried out in hospitals, especially in the emergency room.

This assumption is supported by research conducted by (Supriadin & Yuliana, 2021), that the act of inserting an infusion is used to treat various conditions of patients in all care settings in hospitals and is one of the main therapies. The installation of infusions is an invasive procedure, to prevent errors in taking action, the implementer of infusion installation applies standard operating procedures (SOP). If the implementer implements standard operating procedures (SOP), it can maintain patient safety and improve services for all patients and avoid malpractice demands.

This assumption is also supported by (Fauzia & Risna, 2020), that the act of inserting an infusion is an invasive procedure and is a very frequent procedure in hospitals. The act of installing an infusion will be of quality if in its implementation it always follows the standard operating procedures (SOP) that have been set. Infusion insertion is used to treat a wide range of patient conditions in all care settings in hospitals and is one of the main therapies.

**Diagram 2. Distribution of Respondents: ECG Use Actions Based on SOPs at the Emergency Room of Santa Elisabeth Hospital Medan in 2023.**



Based on diagram 2, it shows that 51 respondents for the use of ECG are the majority, namely 51 respondents (100%).

The researcher assumes that the use of ECG is a very important action to be carried out on patients for follow-up examination, the use of ECG carried out in accordance with standard operating procedures (SOP) can make it easier to provide nursing care. The use of ECG is at high risk because errors can occur in determining the diagnosis.

From the results of the research carried out, the use of ECGs is in accordance with the standard operating procedures (SOP), but there are several actions that are missed in the use of ECGs, such as nurses do not explain the meaning of the use of ECGs, and during the preparation of the equipment, nurses do not use jelly, but instead nurses use gauze that is moistened with water to speed up the process of recording the heart. Missed actions do not have a fatal impact on the use of ECG because they do not cause side effects to patients

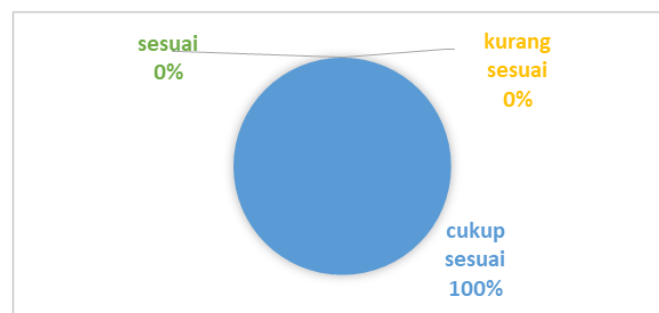


The use of ECG will be of quality if the implementation is in accordance with standard operating procedures (SOPs). The use of an ECG is a follow-up examination that is carried out to find out whether or not there is a blood pressure disorder or abnormality in the patient's heart. The use of this ECG needs to be carried out regularly or in accordance with standard operating procedures (SOPs) to be able to detect whether or not there are disorders in the patient's heart and blood vessels.

This assumption is supported by (Harun & Astuti, 2020), where ECG as one of the diagnostic aids for patients with simple heart disorders plays a very important role. The practitioner who will use the ECG on the patient will know first if there is a heart abnormality. ECG is a very important tool, because it is easy to master or because this tool can provide useful and very important information about various situations.

This assumption is also supported by (Zulmedia, 2021), that the standard operating procedure (SOP) for the use of ECG devices requires meticulousness and precision in operating the device because ECGs are sensitive devices that record the electrical activity of the heart in a certain time. Errors in operating the ECG device will be fatal, because it can result in misdiagnosis of the disease in patients, so it can also cause errors in the provision of treatment therapy to patients. To avoid this, it is necessary to take action to use ECGs in accordance with standard operating procedures (SOPs).

**Diagram 3. Distribution of Oxygen Therapy Respondents, Based on SOPs at the Emergency Room of Santa Elisabeth Hospital, Medan, in 2023.**



Based on diagram 3, it shows that the majority of 51 respondents for oxygen therapy measures are quite appropriate for 51 respondents (100%).

Researchers assume that the action of oxygen therapy is an action aimed at maintaining and meeting the oxygen needs needed by the patient's body. Oxygen therapy actions carried out in accordance with standard operating procedures (SOPs) can change the oxygen saturation status of patients who experience airway ineffectiveness. Things that must be considered to maintain the patency of the *airway*, breathing status, and circulation status.

From the results of the study, it was found that the action of oxygen therapy was quite in accordance with the standard operating procedures (SOP). Some of the actions that are missed such as the nurse not explaining to the family or the patient the meaning of oxygen therapy, during the implementation of the helper or nurse do not wash the hands first, do not clean the patient's airway first and if necessary, fix the hose with a plaster, the missed action does not have a great influence on the patient except for the patient who has a blockage in the airway.

Oxygen therapy measures provided in accordance with standard operating procedures (SOPs) can help patients who experience airway ineffectiveness. Increasing the oxygen level needed by patients who experience airway ineffectiveness requires nursing care implementers to first provide oxygen therapy in accordance with the standard operating procedures (SOP) that have been set in hospitals to increase oxygen saturation in patients who experience airway ineffectiveness.

This assumption is supported by research (Mulyadi, 2020), that oxygen is one of the most important and vital gas components for human life. Humans need enough oxygen levels in the body to be able to survive. Oxygen plays an important role in all functional body processes. The absence of oxygen will cause the body to functionally deteriorate or can even cause death. Oxygen saturation is the percentage of hemoglobin that is able to carry oxygen.

This assumption is also supported by (Abilowo & Lubis, 2022), that oxygen therapy is given to patients who experience blockages in the airway to maintain the oxygen levels needed by the patient's body. Ineffective airway clearance is a condition in which an individual is unable to remove phlegm secretion or obstruction from the airway to maintain airway plasticity.

**Knowing the overview of the implementation of critical nursing care at the Emergency Room of Santa Elisabeth Hospital Medan in 2023.**

**Diagram 4. Distribution of Critical Nursing Care Assessment at the Emergency Room of Santa Elisabeth Hospital Medan in 2023.**



Based on diagram 4, it shows that the majority of 68 respondents for the assessment of critical nursing care are complete, 65 respondents (96%) and 1 respondent (1%) are incomplete.

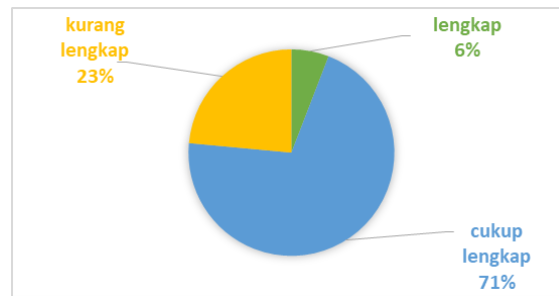
Providing critical nursing care to patients must go through several stages. The first stage of assessment in nursing care documentation. This assessment was carried out to fulfill the documentation of nursing care. From the results of the study, it was found that the assessment was carried out completely based on the nursing care at the emergency room of Santa Elisabeth Hospital Medan. The completeness of the assessment carried out by the provider or implementer of nursing care is very important in nursing documentation to be proof that the implementer has taken data both objectively and subjectively on the patient.

Assessment documentation records the results of the assessment conducted to collect information from the patient or the patient's family and create basic data about the patient. The purpose of conducting a complete assessment can be beneficial for the provider or implementer of nursing care. Such as avoiding errors in determining diagnoses for patients, and making it easier for nursing care providers or implementers to collaborate with other health workers.

This assumption is supported by research (P.Moni & ATY, 2019), that good and quality nursing care documentation must be accurate, complete and in accordance with standards so that the giver or implementer must have good knowledge of nursing care documentation. The quality of nursing documentation can be seen from the completeness and accuracy of writing the nursing care process, which is given to patients, which includes assessment, nursing diagnosis, action plan and evaluation. Assessment is the first step of the nursing process. Information obtained from patients or patients' families is the basic data obtained for nursing care services.

This assumption is also supported by (Jaya et al., 2019), that nursing care documentation has an important meaning in nursing in hospitals. Documenting nursing care accurately and completely according to standards will have an impact on accountability in legal aspects, service quality, communication between health workers, educational references and files or materials in the accreditation process.

**Diagram 5. Distribution of Critical Care Diagnosis at the Emergency Room of Santa Elisabeth Hospital Medan in 2023**



Based on diagram 5, it shows that 68 respondents for critical nursing care diagnosis are complete, the majority are complete 4 respondents (6%) and 48 respondents (71%) are quite complete.

Documentation of nursing care is then a nursing diagnosis, to establish a nursing diagnosis is closely related to the assessment carried out by the provider or implementer of critical nursing care on patients. If the provider or implementer of nursing care conducts an incomplete and inaccurate assessment, it can cause errors in determining the diagnosis of critical nursing care. Based on the results of the study, the diagnosis is quite complete because for the determination of the diagnosis, it is only a priority problem. It is possible that a nurse is not able to apply her knowledge about determining a diagnosis to a patient.

From the results of the study, it was found that the diagnosis was quite complete based on the nursing care format at the emergency room of Santa Elisabeth Hospital Medan. The diagnosis that is categorized is quite complete because at the time of treatment in the emergency room which is handled first, the problem is a priority, so when the situation has improved enough, other diagnoses are sometimes not treated or further examinations are carried out. In fact, it is not treated at all while in the emergency room but in the inpatient room or ICU room.

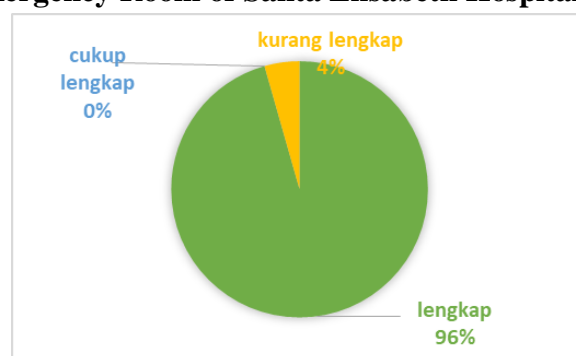
Documentation of nursing diagnosis clinical decisions about patients, if the assessment is carried out completely and accurately, can make it easier for nursing care providers or implementers to determine the diagnosis that will be determined on the data provided by the patient or the patient's family. The purpose of recording nursing diagnoses conveys the problems experienced by patients and can identify the main problems in the assessment of patient data.

This assumption is supported by research (P.Moni & ATY, 2019), that nursing diagnostic documentation is a clinical decision about a person, family, or society as a result of an actual or potential health problem or life process. The formulation of a nursing diagnosis is

how a nursing diagnosis is used in the problem-solving process. Determining the cause of the problem and describing the signs and symptoms can reinforce the problem.

This assumption is also supported by (Dewi et al., 2021), that nursing diagnosis is a clinical assessment of the patient's experience or response and the patient's family. Nursing diagnosis is a vital part in determining appropriate nursing care to help patients achieve optimal health. Nursing issues that are upheld are the basis for the preparation of nursing plans in saving lives and preventing disability or death.

**Diagram 6. Distribution of Interventions and Implementation of Critical Care Care at the Emergency Room of Santa Elisabeth Hospital Medan.**



Based on diagram 6, it shows that 68 respondents for intervention and implementation of critical nursing care are complete, the majority is complete, 65 respondents (96%) and the minority is incomplete, 3 respondents (4%).

The researcher assumes that the documentation of critical nursing care interventions and implementations resolve the patient's experienced problems or nursing diagnoses upheld by the provider or practitioner of nursing care. Solving the problems that have been set must be done completely, involving other health workers to achieve the desired goals, used as a guideline in carrying out systematic and effective nursing actions.

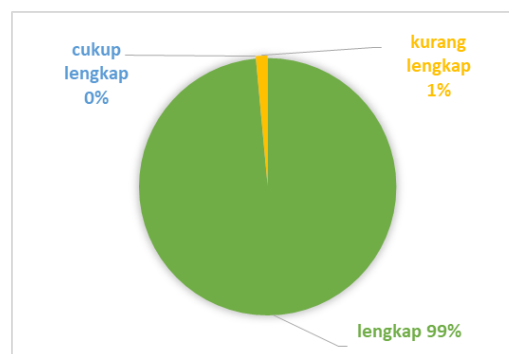
Intervention and implementation of critical nursing care is carried out by collaborating between health workers and others in order to solve problems properly and appropriately, and can reduce the risk of ineffective communication between nurses and other health workers. If the intervention and implementation are not carried out completely, nursing care cannot be achieved properly.

This assumption is supported by research (Dewi et al., 2021), that interventions and implementations are carried out in a complete manner to solve the problem or diagnosis of critical nursing care. The results that will be a reference for the provider or implementer of nursing care will be a reference for determining the most optimal possible health condition or status that is expected to be achieved by the patient after the intervention and implementation

of nursing care. Intervention and implementation can be achieved if the provider or implementer of nursing care performs each action and therapy completely and accurately.

This assumption is also supported by (Hanif, 2021), that intervention and implementation is the development of goals to prevent, reduce, or overcome problems and identify nursing plans that will assist patients in meeting goals. Nursing care intervention and implementation will result in a nursing care plan. Inform and write completely and accurately the intervention and implementation actions that have been carried out to make conclusions about whether the goals have been achieved or not.

**Diagram 7. Distribution of Evaluation of Critical Care Care at the Emergency Room of Santa Elisabeth Hospital Medan in 2023.**



Based on diagram 7, it shows that 68 respondents for the evaluation of critical nursing care are complete, the majority is 67 respondents (99%) and the minority is incomplete, 1 respondent (1%).

The researcher assumes that the evaluation of nursing care is a document on the implementation of all stages of nursing care. Nursing evaluation can be determined if the assessment, diagnosis, intervention and implementation of nursing care are carried out completely and accurately. If each stage is carried out completely and accurately, the final results or evaluation of nursing care can be concluded precisely, completely and accurately.

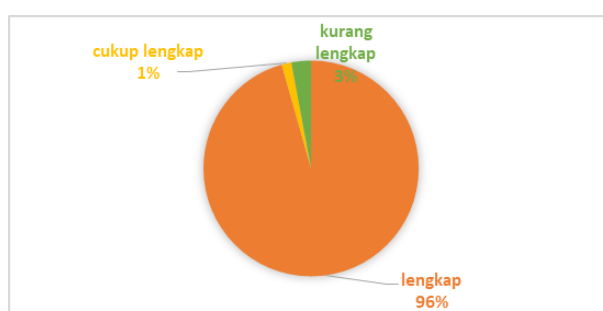
Nursing care evaluations can be communicated with individuals or patients who receive nursing care provided by nursing care providers or implementers. This information is written in complete by documenting each stage so that health care providers or other health workers can take action with one goal of understanding.

The purpose of documenting the evaluation of nursing care is to prevent errors in the provision of nursing care, in the evaluation of nursing care the name of the nurse and all actions that have been taken on the patient are listed so that it can be clarified who is responsible for the patient's condition.

This assumption is supported by (Hanif, 2021), that nursing care evaluations can be informed by communicating with patients and other health care team members, individually or in planning conferences. The information is written in a complete and accurate manner so that health care providers or other health teams can take actions with the same goals and understanding with each other.

This assumption is also supported by research (Jaya et al., 2019), that nursing evaluation is to compare the effects/results of interventions and the implementation of nursing care in accordance with predetermined criteria. The final step of the nursing care process assesses the objectives in the intervention and the implementation of nursing care is carried out completely, appropriately and accurately. Determine whether or not nursing actions are effective and the patient's development of the patient's problems are experienced.

**Diagram 8. Distribution of Critical Care Documentation at the Emergency Room of Santa Elisabeth Hospital Medan in 2023.**



Based on diagram 8, it shows that 68 respondents for documentation of critical nursing care at the emergency room of Santa Elisabeth Hospital Medan in 2023 are complete, 65 respondents (96%) and the minority is quite complete, 1 respondent (1%).

Based on the results of the research carried out on the documentation of critical nursing care as a whole in the emergency room of Santa Elisabeth Hospital Medan, in general, the majority is complete, 96%, in accordance with the nursing care format which is a reference for documenting every nursing care action carried out on patients.

Critical nursing care is categorized as complete because it can be seen from the results of research conducted by researchers for assessment, diagnosis, intervention/implementation and evaluation carried out in accordance with the format at the Emergency Room of Santa Elisabeth Hospital Medan. To ensure that the entire nursing care format is fully filled, it is also necessary for nurses to be precise so that the documentation of nursing care is complete and the services provided to patients can be carried out optimally.

There are several factors that support nurses in carrying out complete documentation at the Emergency Room of Santa Elisabeth Hospital Medan, such as knowledge, training

specifically in the field of emergencies, adequate facilities and the working period of nurses so that the filling out of the nursing care documentation format can be filled in completely.

This assumption is supported by research (Suwignjo et al., 2022), nursing documentation is a written document containing all nursing process activities that have been provided to patients that are useful to patients, care and other health teams and can be used as legal evidence if needed at any time which includes assessment, diagnosis, intervention, implementation and evaluation. Documentation is said to be complete if the nurse records all the health services provided and all formats are filled in completely and is said to be accurate if the nurse writes a note always starting by writing the date, time and listed according to the patient's condition.

This assumption is also supported by research (Evie & Suswinarto, 2019), that factors affecting the documentation of nursing care are significantly related to knowledge, attitudes, training, workload, and availability of facilities, while age, working period and education level are not related. Emergency nurses must be competent enough to perform all aspects of the nursing process skillfully under high pressure, and must also create accurate records of care through documentation.

## **5. CONCLUSIONS AND SUGGESTIONS**

The implementation of critical nursing care (nursing measures) at the Emergency Room of Santa Elisabeth Hospital Medan in 2023, it was concluded that the action of installing infusions was in accordance with the SOP of 51 people (100%), the use of ECG was in accordance with the SOP of 51 people (100%), and the action of oxygen therapy was quite in accordance with the SOP of 51 people (100%).

The implementation of critical nursing care at the Emergency Room of Santa Elisabeth Hospital Medan in 2023, it was concluded that the assessment of complete nursing care was 65 respondents (96%), the determination of diagnosis was quite complete for 48 respondents (71%), the determination of intervention and complete implementation for 65 respondents (96%), the implementation of complete evaluation for 67 respondents (99%), and the overall documentation of complete nursing care for 65 respondents (96%) from 68 respondents.

This research is expected to be an input for hospitals in maintaining nursing actions according to SOPs and further improving the implementation of nursing care, especially in nursing diagnosis. This research will be one of the research data that can be developed as input for further research and become a reference in the implementation of nursing care to be in accordance with the SOP and the completeness of nursing care documentation, especially at



the stage of nursing diagnosis and the next researcher's experience in making research on the implementation of critical nursing care in the emergency room of Santa Elisabeth Hospital Medan.

## REFERENCE

- Abilowo, A., & Lubis, A. Y. S. (2022). Tindakan keperawatan dalam mengatasi bersihan jalan napas tidak efektif pada pasien tuberkulosis paru di Puskesmas Renggang Belitung Timur. *Malhayati Health Student Journal*, 2(2), 332–349.
- D. Urden, L., M. Stacy, K., & E. Lough, M. (2012). *Critical care nursing diagnosis and management*.
- Dewi, N. H., Suryati, E., Mulyanasari, F., & Yupartini, L. (2021). Pengembangan dokumentasi asuhan keperawatan gawat darurat berbasis SDKI, SLKI, dan SIKI. *Jurnal Keperawatan Silampari*, 4(2), 554–565.
- Evie, S., & Suswinarto, D. Y. (2019). Analisis faktor-faktor yang berhubungan dengan kelengkapan dokumentasi keperawatan oleh perawat pelaksana di ruang IGD RSUD Mokopido Tolitoli. *Jurnal Poltekkes Kemenkes Palu*, 1(1), 6–17. <http://jurnal.poltekkespalu.ac.id/index.php/bs>
- Fauzia, N., & Risna. (2020). Tingkat kepatuhan perawat dalam melaksanakan standar operasional prosedur pemasangan infus. 2(2), 69–80.
- Hanif, N. A. (2021). Langkah-langkah proses asuhan keperawatan di ruangan IGD. *Jurnal Keperawatan*, 2, 1–12.
- Harun, S., & Astuti, E. (2020). Gambaran tingkat pengetahuan perawat dalam menginterpretasikan EKG dasar di ruang IGD, ICU dan IMC RS PKU Muhammadiyah Yogyakarta. *Jurnal Keperawatan*, 1–12.
- Hudak, C. M., & Gallo, B. M. (1997). *Keperawatan kritis pendekatan holistik (Volume 1)*.
- Jaya, K., Mien, Rasmiati, K., & Suramadhan. (2019). Gambaran pendokumentasian asuhan keperawatan ruang rawat inap RSUD Buton Utara. 02(03), 27–36.
- Kayden, S., D. Anderson, P., Freitas, R., & Platz, E. (2015). *Emergency department leadership and management: Best principles and practice*.
- M. Burns, S. (2014). *AACN essentials of critical care nursing*.
- Morton, P. G., Fontaine, D., Hudak, C. M., & Gallo, B. M. (2008). *Keperawatan kritis pendekatan asuhan holistik*.
- Motron, P., Gonce, Patricia, & Fontaine, D. K. (2009). *Critical care nursing: A holistic approach (9th ed.)*.
- Mulyadi, A. (2020). Gambaran saturasi oksigen pasien perokok pasca anestesi umum inhalasi di RSUD Kota Tarakan. *Jurnal Keperawatan*, 2, 1–81.

- Nursalam. (2020). Metodologi penelitian ilmu keperawatan.
- Nuryani, & Maridi, M. Dirdjo. (2021). Hubungan komunikasi dengan keselamatan pasien pada perawat di IGD rumah sakit: Literature review. *Borneo Student Research*, 3(1), 373–379.
- P. Moni, M., & ATY, Y. M. V. B. (2019). Gambaran pelaksanaan pendokumentasian pengkajian keperawatan pada instalasi gawat darurat RSUD PROF. DR. W.Z. Johannes Kupang (Studi Dokumentasi). *Jurnal Keperawatan*, 1–43.
- Pangemanan, W. R., Bidjuni, H., & Kallo, V. (2019). Gambaran motivasi perawat dalam melakukan asuhan keperawatan di Rumah Sakit Bhayangkara Manado. *Jurnal Keperawatan*, 7(1), 7–9. <https://doi.org/10.35790/jkp.v7i1.22879>
- Patrisia, I., Juhdeliana, Kartika, L., Pakpahan, M., Siregar, D., Biantoro, Hutapea, A. D., Khusniyah, Z., Sihombing, R. M., Mukhoirotin, Togatorop, L. B., & Sitanggang, Y. F. (2020). Asuhan keperawatan pada kebutuhan dasar manusia.
- Perrin, K. O., & MacLeod, C. E. (2018). Understanding the essentials of critical care nursing.
- Polit, D. F., & Beck, C. T. (2012). *Nursing research: Principles and methods*.
- Potter, P. A., & G. Perry, A. (2009). *Fundamentals of nursing: Fundamental keperawatan* (Buku 1, edisi ke-7).
- Saunders. (2009). *Advanced critical care nursing* (American Association of Critical-Care Nurses).
- Setyawan, F. E. B., & Supriyanto, S. (2019). *Manajemen rumah sakit*.
- Supriadin, & Yuliana, S. (2021). Hubungan motivasi perawat dengan tingkat kepatuhan perawat dalam melaksanakan prosedur tetap pemasangan infus di IGD RSUD Bima. *Jurnal Pendidikan STKIP Bima*, 3(2), 76–86.
- Sutrisno, N., Swasti, K. G., & Mulyono, W. A. (2019). Pengetahuan, persepsi dan sikap perawat RSUD Arjawinangun tentang asuhan keperawatan spiritual. *Journal of Bionursing*, 1(5), 55.
- Sutriyanti, Y., & Mulyadi, M. (2019). Analisis faktor-faktor yang mempengaruhi penerapan berpikir kritis perawat dalam melaksanakan asuhan keperawatan di rumah sakit. *Jurnal Keperawatan Raflesia*, 1(1), 21–32. <https://doi.org/10.33088/jkr.v1i1.394>
- Suwigno, P., Maidartati, Asmara, L. N., Saputra, A., & Khasanah, U. (2022). Gambaran kelengkapan dokumentasi asuhan keperawatan di instalasi rawat inap RSUD Kota Bandung. *Jurnal Keperawatan BSI*, 10(2), 226–233.
- Wiley, J., Sons, & Booker, K. J. (2015). *Critical care nursing: Monitoring and treatment for advanced nursing practice*.
- Wilkinson, J. M. (2006). *Buku saku diagnosis keperawatan dengan intervensi NIC dan kriteria hasil NOC* (Edisi ke-7).

- Yullyzar, Y., Hadisah, N., & Nurhidayah, I. (2020). Hubungan supervisi terhadap pelaksanaan asuhan keperawatan di Rumah Sakit Umum Daerah Dr. Zainoel Abidin Banda Aceh. *Jurnal Perawat Indonesia*, 4(2), 383. <https://doi.org/10.32584/jpi.v4i2.532>
- Zulmedia, S. (2021). Kepatuhan peserta didik mahasiswa dalam melaksanakan SOP pengoperasian alat elektrokardiogram (EKG). *Jurnal Pengelolaan Laboratorium Sains Dan Teknologi*, 1(2), 63–67.