

## INTISARI

Peningkatan jumlah operasi apendisitis akut dapat menyebabkan risiko infeksi setelah operasi semakin besar maka, ketepatan pemilihan dan penggunaan antibiotika profilaksis diperlukan untuk mencegah infeksi setelah operasi. Tujuan penelitian untuk mendapatkan gambaran pemilihan dan penggunaan antibiotika profilaksis pada pasien operasi apendisitis akut.

Metode penelitian non eksperimental dengan rancangan deskriptif evaluatif bersifat retrospektif. Populasi sebanyak 38 pasien dengan kriteria inklusi menjalani operasi apendisitis akut di RS Baptis Batu tahun 2011 dan menggunakan antibiotika profilaksis. Kriteria eksklusinya adalah operasi apendisitis akut yang dilakukan bersama dengan operasi lainnya. Kesesuaian pemilihan dan penggunaan antibiotika profilaksis ditinjau berdasarkan pada jenis, waktu, cara, dosis, dan lama pemberian antibiotika profilaksis yang dibandingkan dengan pedoman *WHO Guidelines for Safe Surgery* (WHO, 2009), *Antimicrobial Prophylaxis in Surgery* (Kanji, et al., 2008), dan *ASHP Therapeutic Guidelines* (ASHP, 2013). Faktor yang mendasari pemilihan antibiotika profilaksis diperoleh dengan wawancara.

Hasil penelitian menunjukkan (n=38) 18% pasien berusia antara 9-17 tahun, 21% pasien berusia antara 18-26 tahun, 26% pasien berusia antara 27-35 tahun, 16% pasien berusia antara 36-44 tahun, 16% pasien berusia antara 45-53 tahun dan 3% pasien berusia antara 54-62 tahun. 53% laki-laki, dan 47% perempuan. Semua pasien mengeluhkan nyeri perut kanan bawah, 50% dengan lama keluhan 2 hari, dan rata-rata lama perawatan 2 hari. Antibiotika profilaksis yang digunakan adalah seftriakson 63% dan sefotaksim 37% diberikan 30-60 menit sebelum operasi, seluruhnya diberikan secara intravena selama satu hari dengan dosis 2 gram.

Berdasarkan hasil penelitian disimpulkan bahwa 37% pemilihan dan pemberian antibiotika profilaksis di RS Baptis Batu sudah sesuai dengan pedoman.

**Kata kunci:** Antibiotika, antibiotika profilaksis, apendisitis akut

**ABSTRACT**

*Increasing the number of acute appendicitis surgery can cause the risk of infection after surgery is getting greater then, the accuracy of selection and use of prophylactic antibiotics is necessary to prevent infection after surgery. The aim of research to get an overview of the selection and use of prophylactic antibiotics in patients with acute appendicitis operation.*

*Methods of non-experimental research design with evaluative descriptive retrospective. A population of 38 patients with the inclusion criteria of acute appendicitis underwent surgery at Baptist Hospital Stone in 2011 and use of prophylactic antibiotics. Exclusion criteria were acute appendicitis operation conducted jointly with other operations. The suitability of the selection and use of prophylactic antibiotics be reviewed based on the type, time, method, dosage, and duration of administration of prophylactic antibiotics were compared with the guidelines of WHO Guidelines for Safe Surgery (WHO, 2009), Antimicrobial Prophylaxis in Surgery (Kanji, et al., 2008) , dan ASHP Therapeutic Guidelines (ASHP, 2013) . Factors underlying the selection of prophylactic antibiotics was obtained by interview.*

*The results showed (n = 38) 18% patients aged between 9-17 years, 21% patients aged between 18-26 years, 26% patients aged between 27-35 years, 16% patients aged between 36-44 years, 16% patients aged between 45-53 years and 3% patients aged between 54-62 years, 53% male and 47% female. All patients complained of right lower abdominal pain, 50% with the old complaint two days, and the average length of 2 days. Prophylactic antibiotics used were ceftriaxone and cefotaxime 63% 37% given 30-60 minutes before the operation, entirely administered intravenously over one day with a dose of 2 grams.*

*Based on the results of the study concluded that there are 37% of the election and administration of prophylactic antibiotics at Baptist Hospital Batu that was appropriate guidelines.*

**Keywords: Antibiotics, Prophylactic Antibiotics, Acute Appendicitis**