

**ABSTRACT**

Coronavirus Disease 2019 (COVID-19) is a disease caused by Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2). SARS-CoV-2 induces respiratory disorders in humans. This virus was first discovered in Wuhan, China, and was rapidly spreading across countries all over the world. COVID-19 may easily transmit through droplets. The rapidity of COVID-19 transmission has caused the number of COVID-19 cases to increase continuously, thus WHO announced COVID-19 as a global pandemic. COVID-19 was estimated to have started entering Indonesia on March 2020. Surabaya was included in the cities with highest COVID-19 case numbers in Indonesia.

One of the efforts that can be conducted to control the COVID-19 outbreak is contact tracing. Contact tracing is the process to identify and to follow-up those exposed to COVID-19. Contact tracing aims to break the transmission chain of COVID-19 through reducing the carriers of the SARS-CoV-2 virus that do day-to-day activities and hence have the potential to transmit it to other people.

In Surabaya, contact tracing was conducted by Dinas Kesehatan Kota Surabaya and different Puskesmas, one of which was Puskesmas Tambak Rejo. The activity included the act of identifying close contacts from subject—regardless confirmed cases, probable cases, or suspect cases—followed by a follow-up. The follow-up conducted was in the form of interviewing close contacts, educating, appealing; to do self-isolation and PCR test, to monitor daily health, and to give food and traditional medicine assistance. Contact tracing was followed by noting and reporting the results of the contact tracing. Data resulted from contact tracing were analyzed to know the relation between subject status and subject characteristics, such as age, sex, employment status, and underlying disease. The data analysis used was cross tabulation.

The analysis results showed that most of the confirmed cases were in the age interval of 30-35 years old (11.4%), male (25.7%), were not employed or were yet to get employed (17.1%), and didn't have any underlying disease (40%).

**Keywords:** COVID-19, SARS-CoV-2, *Contact Tracing*.

## ABSTRAK

*Coronavirus Disease 2019* (COVID-19) merupakan penyakit yang disebabkan oleh *Severe Accute Respiratory Syndrome Coronavirus 2* (SARS-CoV-2). SARS-CoV-2 menyebabkan gangguan pernafasan pada manusia. Virus ini pertama kali ditemukan di Kota Wuhan, China dan dengan cepat menyebar ke negara-negara lain diseluruh dunia. COVID-19 dapat dengan mudah menular antar manusia melalui *droplet*. Mudahnya penularan COVID-19 menyebabkan angka kasus COVID-19 terus meningkat, sehingga WHO menyatakan COVID-19 sebagai pandemi dunia. COVID-19 diperkirakan mulai masuk ke Indonesia pada bulan Maret 2020. Surabaya merupakan salah satu kota dengan angka kasus COVID-19 tertinggi di Indonesia.

Salah satu upaya yang dapat dilakukan untuk mengendalikan wabah COVID-19 adalah dengan melakukan *contact tracing*. *Contact tracing* adalah proses mengidentifikasi dan menindaklanjuti orang-orang yang telah terpapar COVID-19. *Contact tracing* bertujuan untuk memutus rantai penularan COVID-19 dengan cara mengurangi orang pembawa virus SARS-CoV-2 yang berkegiatan dan berpotensi menularkannya keorang lain.

Di Kota Surabaya, kegiatan *contact tracing* dilakukan oleh Dinas Kesehatan Kota Surabaya dan puskesmas, termasuk Puskesmas Tambak Rejo. Kegiatan *contact tracing* yang dilakukan di Puskesmas Tambak Rejo meliputi kegiatan mengidentifikasi kontak erat dari subjek, baik yang berstatus sebagai kasus konformasi, kasus *probable*, maupun kasus suspek, dan diikuti dengan melakukan upaya tindak lanjut. Upaya tindak lanjut yang dilakukan adalah mewawancarai kontak erat, memberikan edukasi, memberi himbauan untuk melakukan isolasi mandiri dan tes PCR, memantau kesehatan harian, dan memberi bantuan permakanan dan obat tradisional. Kegiatan *contact tracing* diikuti dengan pencatatan dan pelaporan hasil *contact tracing*. Data hasil *contact tracing* dianalisis untuk megetahui hubungan status subjek dengan karakteristik subjek yang meliputi usia, jenis kelamin, pekerjaan, dan penyakit penyerta. Analisis data yang digunakan adalah tabulasi silang.

Hasil analisis menunjukkan bahwa sebagian besar kasus konfirmasi terjadi pada rentang usia 30-35 tahun (11,4%), berjenis kelamin laki-laki (25,7%), tidak atau belum bekerja (17,1%), dan tidak memiliki penyakit penyerta (40%).

**Kata Kunci:** COVID-19, SARS-CoV-2, *Contact Tracing*.