

ABSTRAK

Latar Belakang: Hipotermia didefinisikan sebagai temperatur inti yang kurang dari 36°C (96.8°F) dan merupakan komplikasi yang umum terjadi, tetapi hal ini dapat dicegah dengan prosedur perioperatif yang baik. Anestesi menyebabkan tubuh menjadi poikilotermia dimana temperatur suhu tubuh cenderung turun mengikuti suhu sekitar. Sehingga sudah seharusnya suhu tubuh dipertahankan tetap dalam normothermia selama pemberian anesthesia.

Tujuan : Untuk mengukur prevalensi hipotermia pada pasien usia > 40 tahun yang dilakukan operasi elektif dengan general anestesi lebih dari 2 jam di GBPT RSU Dr.Soetomo

Metode : Penelitian ini merupakan penelitian deskriptif. Kami meneliti pasien yang dilakukan operasi elektif di GBPT selama satu bulan. Pasien diukur suhu membran timpani, suhu kamar operasi kami catat dan vital sign pada saat masuk kamar operasi. Durante operasi pada dua jam pertama kami lakukan pemeriksaan suhu tubuh pasien, suhu kamar operasi, vital sign, dan keseimbangan cairan. Post operatif kami analisa kejadian menggigil. Setelah itu hasilnya kami analisa.

Hasil : Setelah dilakukan anestesi selama 2 jam, terjadi penurunan suhu tubuh pasien dibawah 36°C sebanyak 48 penderita (85,69%) dengan rincian suhu antara 35,0 -35,9°C sebanyak 17 penderita (30,35%), suhu antara 34,0°C – 34,9°C sebanyak 27 penderita (48,2%) dan 4 penderita (7,14 %) suhu yang turun dibawah 34,0°C. Suhu kamar operasi di GBPT yang kami teliti tertinggi sekitar 26,2°C pada kamar operasi 503 dan suhu kamar operasi terendah di 610 berkisar 22,4°C. Sedangkan kejadian menggigil pasca operasi didapatkan sebanyak 4 pasien (7,14 %) dari total 56 pasien yang diteliti

Kesimpulan : Kejadian hipotermia masih tinggi di GBPT RSUD dr Soetomo, namun kejadian menggigil hanya ditemukan sekitar 7,14 %. Penelitian ini juga menemukan bahwa suhu kamar operasi masih kurang ideal untuk ruang operasi dimana suhu kamar operasi masih rata rata diatas 22°C.

Kata Kunci: hipotermia, menggigil



ABSTRACT

Background: Hypothermia is defined as a core temperature less than 36 °C (96.8 °F) and is a common complication, but this can be prevented with good perioperative procedures. Anesthesia causes the body to become poikilothermia which temperature the body temperature tends to drop with the temperature around. Body temperature so it should be kept in normothermia during anesthesia administration

Objective: To measure the prevalence of hypothermia in patients aged > 40 years who performed elective surgery with general anesthesia over 2 hours in GBPT RSU Dr. Soetomo **Methods:** This research is descriptive. We examined patients who underwent elective surgery in GBPT for a month. Patients measured temperature of the tympanic membrane, we recorded operating room temperature and vital signs at the time of entering the operating room. Durante operation in the first two hours we did checks a patient's body temperature, room temperature operation, vital signs, and fluid balance. Our analysis of the incidence of postoperative shivering. After that the results of our analysis.

Results : After anesthesia for 2 hours, the patient 's body temperature decreases below 36°C as many as 48 patients (85.69 %) with details of the temperature between 35.0 -35.9 °C to 17 patients (30.35 %) , the temperature between 34,0 °C - 34.9 °C by 27 patients (48.2 %) and 4 patients (7.14%) temperature falls below 34.0 °C. Room temperature operation in our study in GBPT highs around 26.2 °C in the operating room 503 and room temperature operating range from the lowest at 22.4 °C in the operating room 610 . While the incidence of postoperative shivering obtained by 4 patients (7.14%) of the 56 patients studied **Conclusion :** The incidence of hypothermia is still high in GBPT RSUD dr Soetomo, however, the incidence of shivering was found around 7.14%. The study also found that the temperature of the operating room is less than ideal for the operating room operating room where the temperature is still above the average of 22°C .

Keywords: Hypothermia, shivering