

ABSTRAK

Helena Kristi Vera

“Prosedur Pemeriksaan Kegawatdaruratan *Abdomen Akut* pada kasus *Ileus* obstruksi di Instalasi Radiologi RSUD RAA Soewondo Pati”

Jumlah lampiran depan 13 + 50 halaman + 3 tabel + 24 gambar + 15 lampiran akhir

Latar Belakang: Pemeriksaan abdomen *akut* pada *ileus* obstruksi menurut Lampignano & Kendrick (2018) menggunakan proyeksi AP supine, *Left Lateral Decubitus* (LLD), AP *erect*, atau PA *chest*, sedangkan Kastiaji dan Rasyidi (2023) menyebutkan AP, LLD, dan semi *erect*. Di RSUD RAA Soewondo Pati hanya menggunakan proyeksi AP *supine* dan LLD karena sudah cukup memberikan informasi diagnostik jelas. Sesuai Peraturan Kepmenkes HK.01.07/MENKES/1596/2024, pelaporan hasil kritis harus kurang dari 30 menit, tetapi di RSUD RAA Soewondo Pati maksimal 1 jam. Penelitian bertujuan mengetahui prosedur pemeriksaan kegawatdaruratan *ileus* obstruksi, alasan penggunaan 2 proyeksi tersebut, serta prosedur pelaporan hasil kritis di RSUD RAA Soewondo Pati.

Metode Penelitian : Penelitian kualitatif deskriptif dengan pendekatan studi kasus dilakukan di Instalasi Radiologi RSUD RAA Soewondo Pati pada 12-14 Mei 2025. Subjek penelitian terdiri dari satu dokter pengirim, satu dokter spesialis radiologi, dan tiga radiografer. Data dikumpulkan melalui observasi, wawancara, dan dokumentasi, kemudian direduksi dan dianalisis untuk ditarik kesimpulan.

Hasil penelitian: Pemeriksaan abdomen akut pada pasien dugaan *ileus* obstruksi menggunakan dua proyeksi, AP *supine* dan LLD, dengan Imaging Receptor 35x43 cm dan titik bidik di antara crista iliaca naik sekitar 5 cm (vertebra L4). Kedua proyeksi ini sudah mampu memberikan gambaran diagnostik yang jelas; AP *supine* memperlihatkan distribusi udara, dan LLD menampilkan air fluid level dengan baik. Pelaporan hasil kritis dilakukan maksimal dalam waktu 1 jam.

Kesimpulan: Pemeriksaan abdomen akut pada kasus *ileus* obstruksi di RSUD RAA Soewondo Pati menggunakan dua proyeksi, AP *supine* dan LLD, yang sudah cukup untuk diagnosis. Pelaporan hasil kritis dilakukan maksimal 1 jam

Kata Kunci: *Kegawatdaruratan Abdomen Akut, Ileus Obstruksi, AP supine dan Left lateral Decubitus (LLD)*

Referensi: 11 (2013-2024)

ABSTRACT

Helena Kristi Vera

“Procedures for Examining Acute Abdominal Emergencies in Cases of Obstructive Ileus at the Radiology Department of RAA Soewondo Pati Regional General Hospital”

Number of front attachments: 13 + 50 pages + 3 tables + 24 images + 15 end attachments

Background: Acute abdominal examination in cases of obstructive ileus, according to Lampignano & Kendrick (2018), uses supine AP projection, Left Lateral Decubitus (LLD), erect AP, or PA chest, while Kastiaji and Rasyidi (2023) mention AP, LLD, and semi-erect. At RSUD RAA Soewondo Pati, only AP supine and LLD projections are used as they provide sufficient diagnostic information. According to Ministry of Health Regulation HK.01.07/MENKES/1596/2024, critical results must be reported within 30 minutes, but at RSUD RAA Soewondo Pati, the maximum time is 1 hour. The study aims to determine the examination procedures for acute obstructive ileus, the reasons for using these two projections, and the critical result reporting procedures at RSUD RAA Soewondo Pati.

Research Method: A descriptive qualitative study using a case study approach was conducted at the Radiology Department of RSUD RAA Soewondo Pati from May 12–14, 2025. The research subjects consisted of one referring physician, one radiology specialist, and three radiographers. Data were collected through observation, interviews, and documentation, then reduced and analyzed to draw conclusions.

Research findings: Acute abdominal examinations on patients suspected of having obstructive ileus were performed using two projections, AP supine and LLD, with an Imaging Receptor of 35x43 cm and the target point located approximately 5 cm above the iliac crest (vertebra L4). Both projections provided clear diagnostic images; the AP supine view showed air distribution, and the LLD view clearly displayed the air-fluid level. Critical results were reported within a maximum of 1 hour.

Conclusion: Acute abdominal examinations in cases of obstructive ileus at RSUD RAA Soewondo Pati using two projections, AP supine and LLD, are sufficient for diagnosis. Critical results are reported within a maximum of 1 hour.

Keywords: Acute Abdominal Emergency, Obstructive Ileus, AP supine and Left Lateral Decubitus (LLD)

References: 11 (2013-2024)