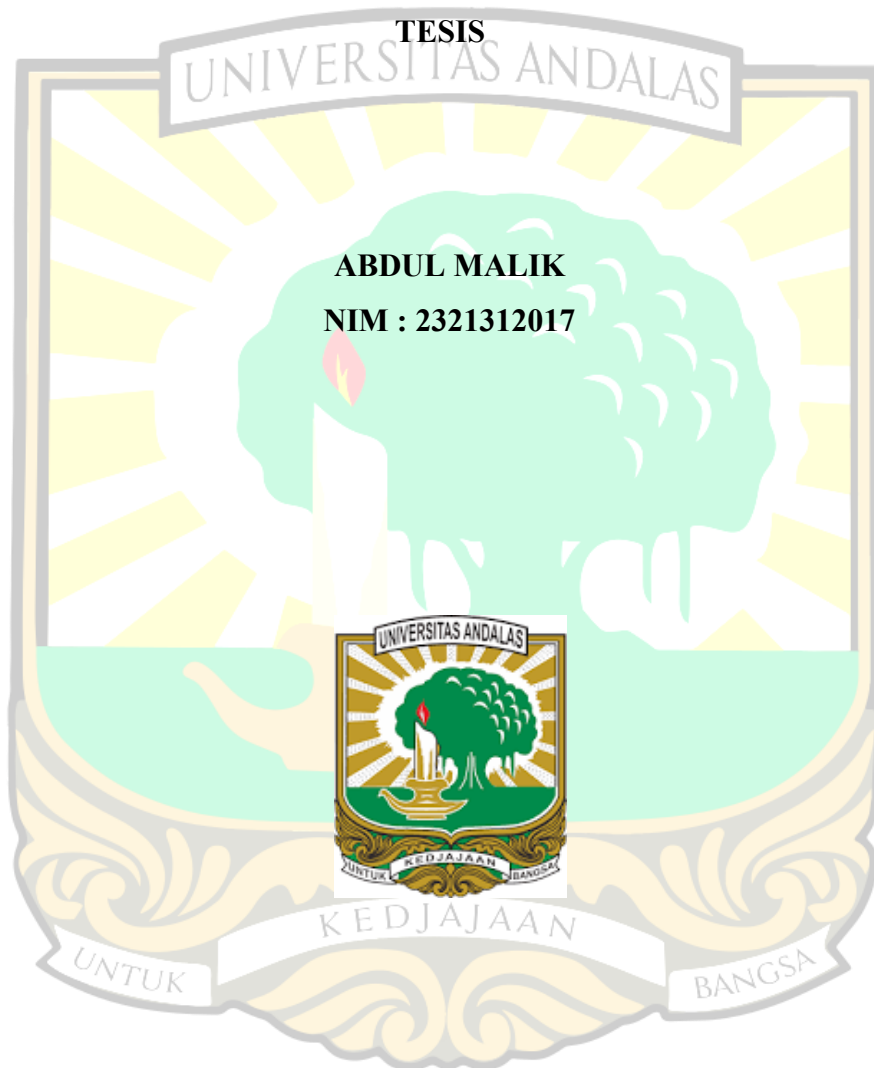


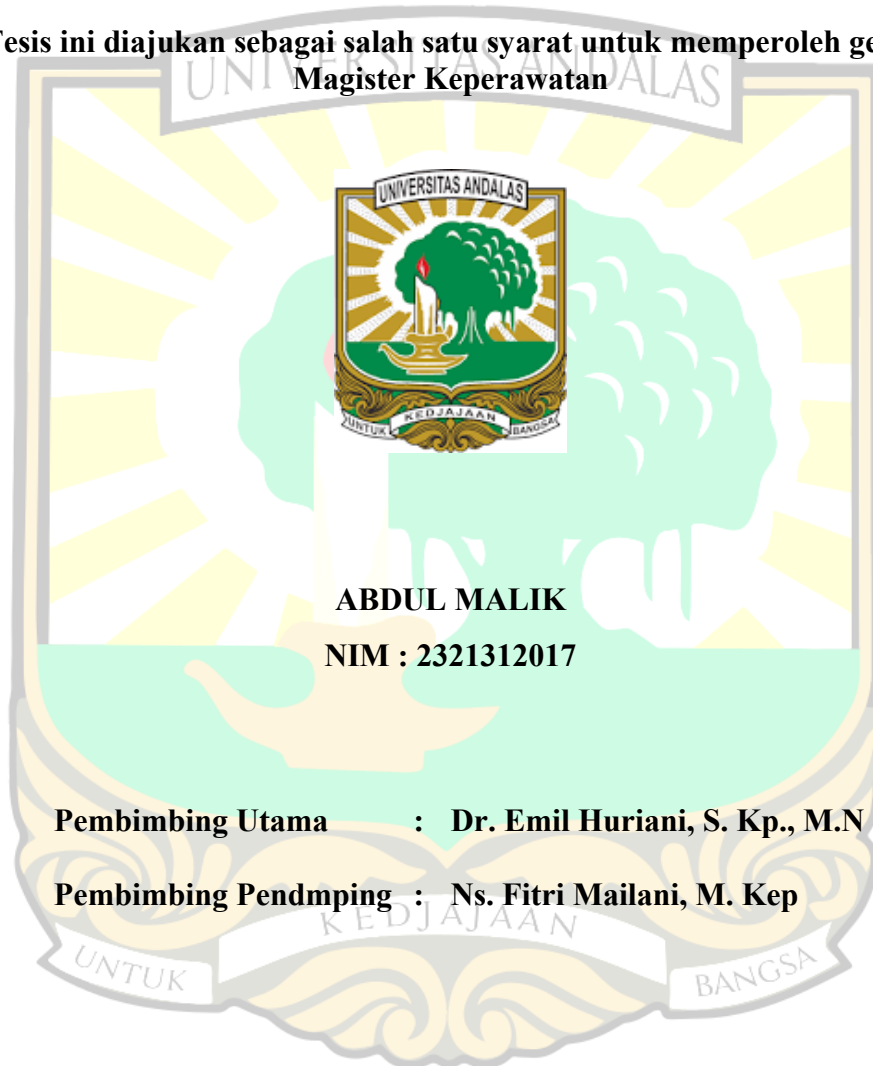
**PERBANDINGAN EFEKTIVITAS TEKNIK RANGSANGAN NYERI
TERHADAP RESPON PASIEN PENURUNAN KESADARAN
BERDASARKAN SKOR *GLASGOW COMA SCALE* (GCS)
DI INSTALASI GAWAT DARURAT
RSUP DR. M. DJAMIL PADANG**



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**Tesis ini diajukan sebagai salah satu syarat untuk memperoleh gelar
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**FAKULTAS KEPERAWATAN
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**Perbandingan Efektivitas Teknik Rangsangan Nyeri terhadap Respon Pasien
Penurunan Kesadaran Berdasarkan Skor *Glasgow Coma Scale* (GCS)
di Instalasi Gawat Darurat RSUP Dr. M. Djamil Padang**

Xiii + 101 hal+ 8 tabel+ 8 lampiran+ 4 skema

ABSTRAK

Kasus penurunan kesadaran di ruang gawat darurat sering dikaitkan dengan tingginya angka risiko kematian yang mencapai 54,7% dalam satu tahun. Teknik rangsangan nyeri dalam penilaian tingkat kesadaran masih bervariasi, sehingga menimbulkan potensi hasil pengkajian yang tidak valid. Penelitian ini bertujuan menganalisis perbedaan reliabilitas teknik rangsangan nyeri terhadap respon pasien dengan penurunan kesadaran berdasarkan skor *Glasgow Coma Scale* (GCS) di IGD RSUP Dr. M. Djamil Padang. Penelitian ini adalah kuantitatif dengan desain observasi analitik yang melibatkan 70 responden, sampel dipilih dengan *purposive sampling*. Pengumpulan data dilakukan pada Juli 2025, kemudian dianalisis menggunakan analisis *Intraclass Correlation Coefficient* (ICC) dengan model *two-way mixed, consistency*. Didapatkan nilai ICC *single* dan *average measures* sebesar 0,857 dan 0,923 (95% CI: 0,780–0,909; $p < 0,001$) serta *Cronbach's Alpha* 0.923 untuk teknik otot trapezius dan *single* dan *average measures* sebesar 0,710 dan 0,830 (95% CI: 0,571–0,809; $p < 0,001$) serta *Cronbach's Alpha* 0.830 untuk teknik ujung kuku. Disarankan agar teknik otot trapezius menjadi pilihan utama pada penilaian GCS pasien penurunan kesadaran, dan perlunya SPO teknik rangsangan nyeri serta memberikan edukasi bagi tenaga medis dan keperawatan tentang prosedur yang benar dalam menggunakan teknik rangsangan nyeri.

Kata kunci: Penurunan Kesadaran, *Glasgow Coma Scale*, Teknik Rangsangan Nyeri, Reliabilitas, *Trapezius Squeeze*, *Nail Bed Pressure*

Daftar pustaka : 76 (2013 - 2025)

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Comparison of the Effectiveness of Pain Stimulation Techniques on the Response of Patients with Decreased Consciousness Based on Glasgow Coma Scale (GCS) Scores at the Emergency Department of Dr. M. Djamil Hospital Padang

Xiii + 101 pages + 8 tables + 8 appendices + 4 schemes

ABSTRACT

Cases of decreased consciousness in the emergency department are often associated with a high mortality risk, reaching 54.7% within one year. Pain stimulation techniques in assessing the level of consciousness remain varied, which raises the potential for invalid assessment outcomes. This study aimed to analyze the differences in reliability between pain stimulation techniques on patient responses with impaired consciousness based on the Glasgow Coma Scale (GCS) score at the Emergency Department of Dr. M. Djamil General Hospital Padang. This was a quantitative study with an analytical observational design involving 70 respondents, selected using purposive sampling. Data collection was conducted in July 2025 and analyzed using the Intraclass Correlation Coefficient (ICC) with a two-way mixed model, consistency type. The trapezius squeeze technique yielded ICC single and average measures of 0.857 and 0.923 (95% CI: 0.780–0.909; $p < 0.001$), with a Cronbach's Alpha of 0.923. Meanwhile, the nail bed pressure technique produced ICC single and average measures of 0.710 and 0.830 (95% CI: 0.571–0.809; $p < 0.001$), with a Cronbach's Alpha of 0.830. These findings suggest that the trapezius squeeze technique should be prioritized in GCS assessment for patients with impaired consciousness. Furthermore, there is a need for a standardized operating procedure (SOP) on pain stimulation techniques, along with education for medical and nursing staff regarding the proper procedures in applying these techniques.

Keywords: *Decreased Consciousness, Glasgow Coma Scale, Pain Stimulation Technique, Reliability, Trapezius Squeeze, Nail Bed Pressure*

References: 76 (2013–2025)