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**ANALISIS SISTEM PENGELOLAAN LIMBAH B3 MEDIS
PADAT COVID-19 DI RSUD DR. ACHMAD MOCHTAR
BUKITTINGGI TAHUN 2021**

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xii + 115 halaman, 22 tabel, 16 gambar, 12 lampiran

ABSTRAK

Tujuan Penelitian

Pandemi COVID-19 berdampak pada peningkatan jumlah pasien COVID-19 yang dirawat di rumah sakit sehingga mengakibatkan terjadinya peningkatan jumlah limbah medis. Penelitian dilakukan untuk menganalisis sistem pengelolaan limbah B3 medis padat COVID-19 di RSUD Dr. Achmad Mochtar Bukittinggi

Metode

Metode penelitian secara kualitatif dengan wawancara mendalam, observasi lapangan dan telaah dokumen dari bulan Maret sampai Januari 2022. Informan sebanyak 9 orang berdasarkan *purposive sampling*. Variabel input, proses dan output. Data dianalisis menggunakan triangulasi sumber dan metode dan disajikan dalam bentuk tabel.

Hasil

Komponen input telah dibuat kebijakan dan SOP. SDM dan dana sudah mencukupi, namun sarana dan prasarana belum memadai. Pada ruang perawatan COVID-19 tidak dilakukan pemilahan. Penyimpanan dan pengangkutan belum memenuhi syarat. Komponen output belum terlaksana

Kesimpulan

Beberapa komponen pengelolaan limbah B3 medis padat COVID-19 belum sesuai dengan peraturan yang berlaku.

Daftar Pustaka : 32 (2005-2021)

Kata Kunci : Limbah B3, COVID-19, Rumah Sakit

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ANALYSIS OF COVID-19 SOLID MEDICAL WASTE MANAGEMENT SYSTEM IN DR. ACHMAD MOCHTAR HOSPITAL BUKITTINGGI 2021

xii + 115 pages, 22 tables, 16 pictures, 12 appendices

ABSTRACT

Objective

The COVID-19 pandemic has impact increasing the number of confirmed COVID-19 patients being treated in hospitals, resulting in increase the amount of medical. The study was conducted to analyze the COVID-19 solid medical B3 waste management system at RSUD Dr. Achmad Mochtar Bukittinggi

Method

This research method was qualitatively with in-depth interviews, field observations and document review from March 2021 to January 2022. Informants were nine people. The variables are input, process and output. Data were analyzed using source triangulation and method triangulation and presented in tabular form.

Result

Policies and SOPs have been made the input. Human resources and funds are sufficient, but facilities and infrastructure inadequate. In COVID-19 treatment room it was not carried out. Storage and transportation have not met the requirements. The output component has not been implemented

Conclusion

The management of COVID-19 solid medical B3 waste has not been implemented following the regulation.

Reference : 32 (2005-2021)

Keyword : B3 waste, COVID-19, Hospital