

## Studi Cost effectivities (CEA) penggunaan teknik anestesi regional blok subarachnoid pada tindakan mini laparatomi di RSUP Sanglah Bali 2014

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### Abstrak

Teknik anesthesia regional blok subarachnoid (RA BSA) adalah yang paling banyak dilakukan setelah teknik anesthesia umum inhalasi pipa endotrakea (GAPET) di RSUP Sanglah. Teknik anesthesia regional blok subarachnoid dapat menggantikan teknik anesthesia umum pipa endotrakea pada pasien minilaparotomi (appendisectomy dan laparatomi kehamilan ektopik). Belum pernah dilakukan studi tentang cost effectiveness analysis (CEA) pada teknik anestesi regional blok subarachnoid di RSUP Sanglah. Cost diambil dari catatan medis penggunaan obat di ruang operasi dan ruang pemulihan. Outcome (efektifitas) dilihat dari kejadian efek samping pasca operasi (nyeri akut pasca operasi, mual muntah pasca operasi / PONV dan menggigil (shivering) . Hasil penelitian menunjukkan bahwa teknik anesthesia regional blok subarachnoid lebih cost effective daripada teknik anesthesia umum pipa endotrakea pada pasien minilaparotomi (appendisectomy dan laparatomi kehamilan ektopik) di RSUP Sanglah Bali.

Regional anesthesia blok subarachnoid is the most common anesthesia technique after general anesthesia endotracheal tube at RSUP Sanglah. Regional anesthesia blok subarachnoid can replaced the general anesthesia endotracheal tube for minilaparotomy (appendisectomy & laparotomy ectopic pregnancy) patient. None of report on cost effectiveness analysis for regional anesthesia blok subarachnoid at RSUP Sanglah. Cost were calculated from anesthesia record paper at the operating room and recovery room. Outcome were taken from side effect after operation (acute pain, post operative nausea vomiting and shivering). The result, anesthesia regional blok subarachnoid were more cost effective than general anesthesia endotracheal tube for mini laparotomy (appendisectomy and laparotomy ectopic pregnancy) at RSUP Sanglah Bali.