

Relationship between Triage Response Time and Patient Satisfaction in the Emergency Room of Prof. Dr. Margono Soekarjo Purwokerto Hospital

Dani Arifianti^{1,2}, Etlidawati¹

¹Faculty of Health Sciences, Universitas Muhammadiyah Purwokerto, Indonesia

²Prof. Dr. Margono Soekarjo Purwokerto Hospital, Indonesia

ARTICLE INFO

Article history:

DOI:

[10.30595/pshms.v6i.1405](https://doi.org/10.30595/pshms.v6i.1405)

Submitted:

Sept 25, 2024

Accepted:

Dec 25, 2024

Published:

Jan 17, 2025

Keywords:

Triage Response Time; Patient Satisfaction

ABSTRACT

Emergency services are immediate, fast, accurate, and precise to prevent death or disability. Response time is required for a patient to receive appropriate assistance based on the severity of their condition from the moment they enter the Emergency Department (ED), with a standard of 5 minutes. This quantitative correlational study used a cross-sectional approach, purposive sampling, and a chi-square test for analysis. The study involved 97 respondents, with the fastest response time in the ED being two minutes (65 respondents) and the longest being six minutes. The patient satisfaction questionnaire results indicated that 40 respondents (41.2%) were very satisfied. Cross-tabulation showed that the highest percentage of very satisfied respondents (51.3%) were those who experienced a quick response time. There was a correlation between triage response time and patient satisfaction, $p = 0.002$. The study involved 97 respondents, with the fastest response time in the ED being two minutes (65 respondents) and the longest being six minutes. The patient satisfaction questionnaire results indicated that 40 respondents (41.2%) were very satisfied. Cross-tabulation showed that the highest percentage of very satisfied respondents (51.3%) were those who experienced a quick response time. Faster response times improve the quality of patient satisfaction. Patient satisfaction is one of the key indicators of hospital service quality.

This work is licensed under a [Creative Commons Attribution 4.0 International License](https://creativecommons.org/licenses/by/4.0/).



Corresponding Author:

Etlidawati

Faculty of Health Sciences, Universitas Muhammadiyah Purwokerto,

Soepardjo Rustam Street KM. 7, Banyumas, Indonesia

Email: etlidawati@ump.ac.id

1. INTRODUCTION

Law No. 17 of 2023 states that a hospital is a health service facility that provides comprehensive individual health services through promotive, preventive, curative, rehabilitative, and palliative health services by providing inpatient, outpatient and emergency services [1]. Emergency is a clinical condition of a patient that requires immediate medical and psychological action to save lives and prevent disability. Indonesia is one of the ASEAN countries with a high accumulation of patient visits to the ER. Data shows that the number of patients visiting the ER reached 4,402,205 patients in 2017 [2]. This figure is an accumulation of 12% of ER visits originating from RSU, namely 1,033 units and 1,319 other hospital units. In 2018, in Central Java there were 1,990,104 patient visits to hospitals.[2] Emergency services are services that require immediate service, namely fast, precise, and careful to prevent death or disability.

[2] said that Nurse Response Time is a process indicator to achieve the outcome indicator, namely survival with a standard of <5 minutes. Response time is the time needed for patients to get help that is in accordance with the emergency of their illness since entering the ER door. Triage is a system used to prioritize patients based on the severity of their condition [3]. Nurse triage plays an important role in ensuring that patients receive timely and appropriate care in the emergency room. Triage nurses' knowledge and perceptions of triage can affect the implementation of triage in the ER. The use of triage in the emergency room is important to ensure that patients with life-threatening conditions are prioritized for care. Triage nurses need to have a good understanding of triage and be able to assess patients quickly to determine their level of urgency. Overall, nurse triage is an important part of the emergency room team and plays an important role in ensuring that patients receive the care they need in a timely and efficient manner [4].

Based on the results of the preliminary study, the researcher obtained the results of a survey of the level of public satisfaction at Prof. Dr. Margono Soekarjo Purwokerto Regional Hospital in 2019 as much as 88.44%, in 2020 as much as 88.51%, in 2021 as much as 89.04%, in 2022 as much as 89.96% and in 2023 as much as 89.83%. From this data, it can be concluded that there was an increase in public satisfaction from 2019-2022, while in 2023 there was a decrease in public satisfaction with the quality of service. In 2023, data on patient visits to the Emergency Room of Prof. Dr. Margono Soekarjo Hospital in October - December was 3764 patients, an average of 1255 patients per month and an average of 42 patients per day. The large number of patients can cause problems. The results of interviews conducted by researchers at the Emergency Room of Prof. Dr. Margono Soekarjo Hospital on 10 patients, where 6 of the patients stated immediately served that when they arrived at the Emergency Room they were not, 2 people said they were waiting in the administration section and 2 people stated that the service provided by the nurse was late.

2. RESEARCH METHOD

Research Design is very important in research, which allows maximum control of several factors that can affect the accuracy of a result. This research is a quantitative correlational study with a cross-sectional approach [5]. The quantitative research method is a systematic, planned, and structured research method based on the philosophy of positivism. Correlational design to reveal the correlative relationship between independent variables and dependent variables [6]. Researchers can search, explain a relationship, estimate, test based on existing theories. According to Cross-sectional is a type of research that emphasizes the time of measurement/observation of independent and dependent variable data only once at one time. This study was conducted on patients who came to the ER who agreed to be respondents to be studied with the aim of determining the relationship between Response Time Triage and patient satisfaction in the ER of Prof. Dr. Margono Soekarjo Purwokerto Hospital.

3. RESULTS AND DISCUSSIONS

This research is located at RSUD Prof. Dr. Margono Soekarjo Purwokerto which is located at Jl. Dr. Gumbreg no. 1 Berkoh, Purwokerto. This research was carried out in the emergency room of the Prof Dr Margono Soekarjo Hospital, Purwokerto from 13 May 2024 to 13 June 2024 with a total of 97 research respondents.

3.1 Univariat

Table 1. Respondent Characteristics (n=97)

Characteristics of Respondents	F	%
Gender		
Male	45	46.39
Female	52	53.61
Education		
Primary School	12	12.37
Junior High School	30	30.92
Senior High School	42	43.29
College	13	13.42

Table 2. Respon time triage

Respon Time	N = 97	%	min	max	mean	Std.dev
Fast (0-5 mnt)	76	78,4	2 mnt	6 mnt	3,7 mnt	1,2 mnt
Slow (6-10 mnt)	21	21,6				

Table 3. Distribution of patient satisfaction

Variables	Result	Presentase
Very satisfied	40	41,2
Satisfied	27	27,8
Quite satisfied	12	12,3
Less satisfied	8	8,4
Not satisfied	10	10,3
Total	97	100

3.2 Bivariat

Table 4. Table of the relationship between triage time response and patient satisfaction

	Patient satisfaction										Total	
	Very satisfied		Satisfied		Quite satisfied		Less satisfied		not satisfied		N	%
Respon time	N	%	N	%	N	%	N	%	N	%		
Fast	39	51,3	21	27,6	11	14,47	2	2,63	3	3,9	76	100
Slow	1	4,76	6	28,6	1	4,76	6	28,5	7	33,3	21	100
Total	40	56,07	27	55,2	12	19,23	8	31,13	10	37,2	97	100

P Value : 0,002

Based on **Table 1**, it is known that most of the respondents are female, namely 52 (53.61%) respondents, and have an senior high school education 42 (43.29%) of respondents. The results show that most respondents were aged 25-59 years, female, had a high school education, and were employed in the private sector.

Based on **Table 2**, it shows that most of the Time Triage Responses carried out in the Emergency Room at Prof.Dr. Margono Soekarjo Purwokerto is classified in the fast category between 0 - 5 minutes as much as 78.4% while the slow category is between 6 - 10 minutes as much as 21.6%. The fastest Triage Response Time is 2 minutes, the longest is 6 minutes and the average Triage Response Time is 3.7 minutes. The Time Triage response is measured using a stopwatch.

Based on **Table 3**, it can be concluded that the results of the patient satisfaction questionnaire showed that the majority of respondents were in the very satisfied category, 41.2%, 27.8% in the satisfied category, and 10.3% in the very dissatisfied category.

Based on **Table 4**, it was found that the percentage of fast response time with very satisfied patient satisfaction (51.3%), was greater than the percentage of slow response time with very satisfied patient satisfaction (4.8%). The response time is fast with the results of patient satisfaction being very dissatisfied because in the satisfaction questionnaire the tangible part (physical evidence) is not yet available. There is evidence that nurses have provided information about ED orientation and the programs carried out for patients. Nurses are not always available at the nurse station when patients need them. Nurses are not always responsive to patient complaints. From this it can be concluded that the patient was very dissatisfied with the service in the emergency department.

In terms of responsiveness, nurses are quick in serving patients when they enter through the emergency room, nurses provide clear information about the patient's condition and nurses help patients if needed, whereas in terms of insurance, nurses sometimes don't smile when there are many patients coming together and before taking action they usually always provide an explanation first so that the patient knows what action to take.

Distribution of respondent characteristics

a. Age

The results of the research show that when viewed in terms of age, the majority of research respondents were in the age range 25-59 years (51.5%), or this means that the respondents in this study were patients in the adult to late adult age category. Based on research previously by [7] of 60 respondents, a small proportion (30.35%) were in the adult age range. The results of another study conducted by [8]Selvi Andani et al., (2018) showed the characteristics of the majority of respondents aged 24-59 years (65.03%). The results of another research by [9] showed that 90 (62.9%) aged 26-50 years were in the adult category and the majority of respondents were female.

Researchers assume that basically every patient, young and old, wants attention and affection, and every complaint they make wants to be heard by health workers, especially doctors and nurses. Maslow in [10], states that in his theory of human needs, he explains that every human being needs, wants to have and be owned, love and affection and self-esteem, so that the young and the old want good interpersonal relationships.

According to Sudibyo in [10] also states that the concepts of health and illness apply the same, both children and adults, only the symptoms may be different. Every patient who comes in sick, whether young or old, is full of hope, such as wanting to recover quickly, be treated quickly, quickly, and be able to return to work. So both young and old alike feel that if their condition is starting to improve or feel cured then they will feel the suitability of seeking treatment at the relevant health service.

b. Gender

The research results show that the majority of respondents in this study was female (53.61%). In the researchers' observations, more female patients came with internist problems. Thus, according to the researchers' analysis, women are more worried about their condition, which makes them more susceptible to illness compared to men. In adulthood, women work more to help the family. Research by [9] states that female respondents are more sensitive in feeling service satisfaction. This is because women's mother instinct is more caring. This is also in line with what Dolinsky stated in [10] that perceptions and reactions to pain disorders are influenced by gender, race, education, economic class and cultural background.

c. Education

The research results show that the majority of respondents in this study had a high school education background (43.29). This research is in line with what was researched by C [9] where the number of respondents at high school level was more than 78 respondents (54.5%). According to researchers, the level of education influences their expectations of the health services needed. A higher level of education has higher knowledge than those with low formal education. Someone with higher education has more comprehensive needs. Therefore, they need quality service to get satisfaction. This is also in accordance with what [11] stated, the higher the patient's education level, the higher their expectations for a service that provides satisfaction. A person's education will influence their knowledge of the level of community satisfaction with the facilities they use. The lower a person's education, the more knowledge they will assume that everyone's level of satisfaction is the same, that is, they are satisfied because when they get free treatment or health checks, they feel happy.

The desired formal and non-formal education is a change in ability, appearance or behavior. According to [11], the higher a person's education, the easier it will be to accept new things and the easier it will be to adapt to these new things. A low level of education will hinder the development of a person's attitude towards acceptance, information, etc. that are newly introduced. Cognitive abilities and behavioral abilities are greatly influenced by a person's developmental stage.

d. Work

The research results show that the majority of respondents in this study were private employees (41.23%). Private employees are not monitored by strict regulations. They can accompany the family if someone is sick in the hospital. Jobs with the fewest respondents are workers. This research is in line with research by [4] which stated that the most respondents were private employees with 69 people (48.3). According to [12], employment status is the type of position a person has in carrying out work in a business installation/activity. A worker/employee/employee is someone who works for another person or installation on a permanent basis and receives wages/salary in the form of money or goods. From the description above, it can be concluded that someone who works tends to be more demanding or critical of the service they receive if they do not feel satisfied with themselves compared to those who do not work. This is due to demands from people who do not work to obtain better services and is related to their understanding and education about health services.

As the community's economy improves, it is also necessary to improve the quality of health services, so that patients who work at middle to upper economic levels will have the ability to purchase quality health services.

Overview of Time Triage Response in the Emergency Room at Prof. Dr. Margono Soekarjo Regional Hospital

The research results showed that most of the Time Triage Responses carried out in the Emergency Room at RSUD Prof. Dr. Margono Soekarjo Purwokerto is classified in the fast category (78.4%) with the fastest Triage Response Time being 2 minutes, the longest being 6 minutes and the average Triage Response Time being 3.7 minutes. The results of this research are in line with research conducted by [9], showing that the response time of ER services was 117 respondents (81.8%) satisfied with the service of the officers. [13] showed that 35 respondents (58.3%) had fast response times (<5 minutes) and 33 respondents (55%) stated that emergency services were in the good category. Wayan Supiandila's research (2018) showed that the majority of response times were fast, as many as 91 respondents (72.2%) while family satisfaction was in the satisfied category as many as 65 respondents (51.6%).

Time is a very important factor in managing emergency situations. According to [14], the success of response time is very dependent on the speed available and the quality of assistance provided to save lives or prevent disability from the scene of the incident, on the way to hospital assistance, because emergency treatment in the hospital's Emergency Room (IGD) has a philosophy, namely Time Saving, it's Live Saving, which means that time is life or all actions taken during an emergency must be truly effective and efficient. This reminds us that in this condition the patient can lose his life in just a matter of minutes. Based on the analysis of research results, researchers are of the opinion that emergency patient care is a service that requires immediate service, namely fast, precise and careful to prevent death or disability. One of the indicators of service quality is response time. The results above, researchers clearly prove the importance of response time, apart from reducing the extent of damage to organs leading to disability, can also reduce the death rate.

The fast responsiveness of emergency services to patients who come will greatly influence patient satisfaction, the knowledge and competence of an emergency room officer will make the management in the emergency room better, and as the management of the emergency room improves, serving patients who come to the emergency room will get better.

Description of patient satisfaction in the emergency room at Prof. Dr. Margono Soekarjo Regional Hospital

The research results showed that the majority of respondents felt very satisfied, 40 (41.2%) and 27 respondents (27.8%). These results are in line with research by Nebsu Asamrew (2020) which states that the majority of patients (46.2%) stated they were satisfied with their health services. And research by Wayan Supiandila (2018) states that the majority of patient families were satisfied with the health services received (51.6%). According to [15] customer satisfaction is measured by responsiveness, guarantee, physical evidence, empathy and reliability. Responsive nursing services is one definition of the speed of nurses in carrying out care procedures so that it has an impact on the speed of nurses in dealing with health problems experienced by patients. Fast and responsive nursing service actions are very necessary for the quality of satisfaction felt by patients. In order to achieve maximum patient satisfaction, the implementation of nursing services must comply with the existing code of ethics in each hospital and the need to improve the quality of services therein.

Based on the results of the Emergency Unit community satisfaction survey in 2022, the product variable for service type specifications is Time Triage Response with a score of 100 in the very good category, while in 2023 the product variable for service type specifications is Time Triage Response with a score of 75 in the poor category. From this data, researchers can conclude that the results of the emergency department community satisfaction survey have experienced a decline in terms of health services so that patient satisfaction has decreased. According to researchers' assumptions, patient satisfaction is very necessary in services in the ER because if patients are satisfied with the service, it will have a positive impact on the nursing workforce and the hospital itself. The satisfaction felt by the patient shows that the nurse can fulfill the patient's expectations for excellent and good quality service in terms of clarity of information, timely service, the nurse's willingness to listen to patient complaints or problems and willingness to help resolve these problems. Patient satisfaction with nursing services is an absolute thing that must be fulfilled by nurses because one of the quality assurance indicators of a hospital is a statement of satisfaction from the service recipient or patient.

Relationship between Triage Time Response and patient satisfaction

The results of the research show that there is a relationship between Response Time Triage and patient satisfaction in the emergency room at Prof. Hospital. Dr. Margono Soekarjo Purwokerto. The percentage of fast response time with very satisfied patient satisfaction (51.3%), is greater than the percentage of slow response time with very satisfied patient satisfaction (4.8%). The results of this research are in line with research conducted by Isrofah et al., (2020), which states that there is a relationship between service response time and the level of patient satisfaction in the ER at Batang Regional Hospital. The response time given to a patient who comes to the ER must be based on standards that are in accordance with the nurse's competency and abilities so that it is hoped that they will be able to improve emergency treatment in a timely and fast manner [1]. Response time has been proven to be an indicator for assessing patient satisfaction in improving and evaluating the quality of health services [16].

According to [17], the success of response time is very dependent on the speed available and the quality of assistance provided to save lives or prevent disability from the scene of the incident, on the way to hospital assistance. [17] believes that satisfaction is felt and assessed by the client recipient from the first time they arrive until they receive the action service provided using the five principles of service quality, speed, accuracy, security, friendliness of the staff and service comfort. [8] said that patient satisfaction depends on the quality of service. An action is said to be good if the service obtained is satisfactory or disappointing. This is the client's perception that they receive services that are in accordance with reality, in this case including the length of time the service is provided. The speed and accuracy of assistance provided to patients who come to the Emergency Room (IGD) is very necessary, with standards that are in accordance with their competence and abilities so that they can guarantee the handling of emergency cases with a fast response time and appropriate treatment [18].

Responsiveness provides impact on patient satisfaction[19]. Responsiveness in services in the ER includes two things, namely response time when the patient arrives and service time until the service process is completed. Indicators that influence response time are speed and accuracy in carrying out actions according to standard operational procedures in the ER. Fast response time can increase patient satisfaction with services in the ER. Researchers assume that the achievement of a good response time is influenced by the level of responsiveness of nurses to what patients need. Influenced by the level of responsiveness of nurses to what patients need. Satisfaction in service is greatly influenced by the sense of attention, understanding and seriousness of nurses in providing services without having to distinguish patients from social status. Providing services quickly and precisely and being responsive to patient wishes is one way to satisfy patients.

So that the hospital is expected to provide family-friendly and patient-friendly services, especially emergency services that can be assessed according to the skills of nursing staff, including responsiveness, reliability (timely service), safety (attitude on duty), and service delivery Empathy (nursing) and attention) and tangible (service quality) from nurses to patients. Researchers believe that patient satisfaction depends on service quality. Patients consider that good service depends on whether the service provided can meet the patient's needs based on their perception of the service they receive. There are several factors that make patients satisfied with the response time of RSUD Prof. Dr. Margono Soekarjo Purwokerto, thanks to good communication between nurses and patients and their families, patient confidentiality, adequate facilities and infrastructure, the nurse at RSUD Prof. Dr. Margono Soekarjo Purwokerto is experienced, responsive and trained in providing nursing services.

4. CONCLUSIONS AND RECOMMENDATIONS

Most of the emergency room patients at Prof. Dr. Margono Soekarjo Purwokerto Hospital are between 25-59 years old (50 (51.4%), female (52 (53.61%), high school education (42 (43.29%) and private sector employees (40 (41.23%). Most of the Triage Response Time carried out at the Emergency Room of Prof. Dr. Margono Soekarjo Purwokerto Hospital is classified as fast (78.4%). Most of the patients in the Emergency Room of Prof. Dr. Margono Soekarjo Purwokerto Hospital are in the very satisfied category as many as 41.2% and the satisfied category as many as 27.8%. There is a relationship between Response Time Triage and patient satisfaction in the Emergency Room of Prof. Dr. Margono Soekarjo Purwokerto Hospital (p value = 0.002). Recommendation It is expected that nurses can work effectively and efficiently in solving problems quickly and accurately, nurses can serve patients in a friendly manner and with lots of smiles, and act fairly in providing services to all patients regardless of social status, conducting research using other research methods, larger samples, and longer time so that the research results obtained are more significant and using Google forms to shorten research time.

REFERENCES

- [1] A. Hidayat, "Pengantar konsep dasar keperawatan," *Jakarta Salemba Med.*, 2008.
- [2] Wildani, "Hubungan Antara Efikasi Diri Perawat Dengan Profesionalisme Perawat Di Ruang IGD Rumah Sakit Di Kabupaten Jember," no. Profesionalisme, Perawat, Self Efficacy, p. 93, 2019.
- [3] A. B. Ii, "Bab ii," pp. 42–51, 2021.
- [4] Nurdelima, P. P. Prayasta, and E. G. Gunawan, "Hubungan Respon Time dengan Kepuasan Pasien Di Puskesmas Cipedes," *Cerdika J. Ilm. Indones.*, vol. 1, no. 8, pp. 927–932, 2021, doi: 10.36418/cerdika.v1i8.160.
- [5] Della Arya, Apriani Apriani, and Helsy Desvitasari, "Hubungan Respon Time Dengan Kepuasan Pasien Di Igd Rumah Sakit Bhayangkara," *J. Kesehatan. J. Ilm. Multi Sci.*, vol. 13, no. 2, pp. 86–92, 2023, doi: 10.52395/jkjims.v13i2.379.
- [6] Marti, D. A. Nugraha, P. Studi, and S. Keperawawatan, "THE RELATIONSHIP BETWEEN RESPONSE TIME AND FAMILY SATISFACTION WITH HEALTH SERVICES Program Studi Sarjana Keperawawatan , STIKes Panti Rapih Yogyakarta perspektif yang mendasar bagi tenaga," vol. 8, no. 2, 2023.
- [7] H. D. Pisu, S. Rompas, and R. Malara, "Hubungan Respons TIME Perawat Dengan Kepuasan Pasien Di Instalasi Gawat Darurat Rsup Prof. Dr. RD Kandou Manado.," *J. keperawatan*, vol. 3, no. 2, 2015.
- [8] S. Pohan, "Jaminan mutu layanan kesehatan: dasar-dasar pengertian dan penerapan," Eg, 2019.
- [9] M. Aprillia, "Hubungan Respon Time Perawat Terhadap Kepuasan Keluarga Pasien Di Instalasi Gawat Darurat," *Media Husada J. Nurs. Sci.*, vol. 2, no. 1, pp. 1–6, 2021, doi: 10.33475/mhjns.v1i2.3.
- [10] M. S. Dahlan, "Besar Sampel dan Cara Pengambilan Sampel, Dalam Penelitian Kesehatan (Edisi Revisi)," *Penerbit PT. Rineka Cipta, Jakarta*, vol. 208, 2013.
- [11] N. Haryatun and A. Sudaryanto, "Perbedaan Waktu Tanggap Tindakan Keperawatan Pasien Cedera Kepala Kategori I–V Di Instalasi Gawat Darurat Rsup Dr. Moewardi," 2008.
- [11] P. Prahmawati, A. Rahmawati, and K. Kholina, "Hubungan Response Time Perawat Dengan Pelayanan

- Gawat Darurat Di Instalasi Gawat Darurat Rsud Demang Sepulau Raya Lampung Tengah,” *J. Wacana Kesehat.*, vol. 6, no. 2, p. 69, 2021, doi: 10.52822/jwk.v6i2.281.
- [12] R. I. Kemenkes, “Profil kesehatan Indonesia tahun 2019,” *Jakarta kemenkes RI*, vol. 2015, 2015.
- [13] R. Rindu, S. Lukman, H. Hardisman, M. Hafizurrachman, and A. Bachtiar, “The relationship between transformational leadership, organizational commitment, work stress, and turnover intentions of nurse at private hospital in Indonesia,” *Open Access Maced. J. Med. Sci.*, vol. 8, no. E, pp. 551–557, 2020, doi: 10.3889/oamjms.2020.4425.
- [14] S. Andani, C. Susilo, and S. R. Dewi, “HUBUNGAN RESPONSE TIME BERDASARKAN TRIAGE DENGAN KEPUASAN PELAYANAN KEGAWATDARURATAN PADA PASIEN GANGGUAN RESPIRASI DI INSTALASI GAWAT DARURAT (IGD) RS TINGKAT III BALADHIKA HUSADA JEMBER Oleh:,” vol. 11, no. 1, pp. 92–105, 2017.
- [15] S. Hartati and Halimuddin, “Response Time Perawat di Ruang Instalasi Gawat Darurat,” *J. Keperawatan Kebidanan*, vol. 4, no. 3, pp. 1–7, 2016.
- [16] S. Notoadmojo, *Metodologi Penelitian Kesehatan*, PT. 2010.
- [17] S. Notoatmodjo, “Metodologi penelitian kesehatan (Cetakan VI),” *Jakarta Penerbit PT. Rineka Cipta*, 2012.
- [18] T. Simandalahi, H. D. Morika, W. Sartiwi, and R. I. Sari Dewi, “Hubungan Response Time Dengan Tingkat Kepuasan Pasien Di Instalasi Gawat Darurat Puskesmas,” *J. Kesehat. Mesencephalon*, vol. 5, no. 2, 2019, doi: 10.36053/mesencephalon.v5i2.114.