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Penanggulangan Bencana Daerah Pekalongan Dalam
Resusitasi Jantung Paru
Nama : Ahmad Dhoni

Menerangkan bahwa abstrak ini telah diterjemahkan ke dalam Bahasa Inggris oleh Lembaga Pengembangan Bahasa dan Kerja Sama (LPBK), Universitas Muhammadiyah Pekalongan Pekalongan.

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Aida Rusmariansa, S.Kep., Ns., MAN *A*

**Program Studi Sarjana Keperawatan
Fakultas Ilmu Kesehatan
Universitas Muhammadiyah Pekajangan Pekalongan**

ABSTRAK

Ahmad Dhoni¹, Benny Arief Sulistyanto²

**Gambaran Kualitas Kompresi Dada Pada Petugas Badan Penanggulangan
Bencana Daerah Pekalongan Dalam Resusitasi Jantung Paru**

Latar Belakang: RJP berkualitas menjadi kewajiban bagi Petugas Penanggulangan Bencana Daerah (BPBD) mempunyai berkewajiban untuk menolong korban henti jantung, karena henti jantung yang terjadi dapat menyebabkan kematian sel otak dan organ vital dalam 10 menit. Meski tidak semua petugas BPBD menguasai RJP, BPBD memiliki tim khusus bersertifikat BTCLS. Disisi lain, ada juga petugas yang tergabung dalam dalam tim bencana yang berfokus pada dalam mitigasi bencana, BPBD tidak melibatkan tenaga kesehatan secara langsung dalam masa tanggap darurat bencana. Kualitas RJP sangat dipengaruhi faktor stres, lingkungan tidak kondusif, dan keterbatasan peralatan, sehingga pelatihan berkelanjutan diperlukan untuk memastikan efektivitas penyelamatan saat terjadinya henti jantung dilapangan.

Metode: Penelitian ini menggunakan metode deskriptif. Tempat penelitian dikantor BPBD Kabupaten dan Kota Pekalongan, Teknik *Total Sampling* sebanyak 30 responden. Instrumen pada penelitian menggunakan manekin CPR Ambu dan Software Ambu standar *America Heart Assosiation* (AHA 2020).

Hasil: Secara keseluruhan, hanya 6 petugas (20%) yang melakukan kompresi dada sesuai standar AHA 2020, sedangkan 24 petugas (80%) belum memenuhi standar. Dari aspek kecepatan, 36,67% petugas sesuai standar 100-120x/menit dengan mayoritas 53,33% terlalu cepat. Kedalaman kompresi menunjukkan 26,67% mencapai standar 50-60mm dengan 50% terlalu dangkal. Recoil dada menjadi aspek terbaik dengan 83,3% petugas melakukan sempurna, sementara posisi tangan hanya 50% yang tepat pada sternum.

Simpulan: Kualitas RJP yang dilakukan oleh Petugas BPBD Pekalongan masih kurang dari standar *America Heart Assosiation* (AHA 2020). Khususnya mengenai kedalaman dan kecepatan kompresi. Meskipun teknik recoil dada secara umum baik, untuk menangani korban henti jantung yang terjadi perlu Teknik RJP yang berkualitas sesuai standar AHA 2020. Diharapkan petugas BPBD Pekalongan untuk mengikuti pelatihan RJP secara formal untuk meningkatkan kemampuan RJP dalam situasi darurat

Kata Kunci: BPBD, Kompresi Dada, RJP

Daftar Pustaka: 34

**Undergraduate Program in Nursing
Fakulty of Health Sciences
University of Muhammadiyah Pekajangan Pekalongan**

ABSTRACT

Ahmad Dhoni¹, Benny Arief Sulistyanto²

Description of the Quality of Chest Compression by Officers of the Pekalongan Regional Disaster Management Agency in Cardiopulmonary Resuscitation

Background: High-quality CPR is essential for Regional Disaster Management Officers (BPBD), who assist victims of cardiac arrest. This is critical because brain cells and vital organs can begin to die within just 10 minutes of a cardiac arrest. Although not all BPBD officers are trained in CPR, there is a dedicated team certified by the National Center for Disaster Management (BTCLS) that is trained to provide this care. Additionally, some officers are part of disaster teams focused on disaster mitigation; however, BPBD does not typically involve healthcare workers during the emergency response phase.

The effectiveness of CPR can be greatly affected by stress, challenging environments, and limited resources, making ongoing training necessary to ensure that rescue operations are effective in the event of a cardiac arrest in the field.

Method: the study applied descriptive method. The location was the office of BPDD Pekalongan Regency and City, the total sampling technique used 30 respondents. The research instruments applied were Ambu CPR mannequins and Ambu software standardized by the American Heart Association (AHA 2020).

Result: In total, only 6 officers (20%) performed chest compressions according to the 2020 American Heart Association (AHA) standards, whereas 24 officers (80%) did not meet these standards. Regarding the speed of compressions, 36.67% of the officers achieved the recommended rate of 100-120 compressions per minute, while the majority, 53.33%, exceeded this rate. For compression depth, only 26.67% reached the standard of 50-60 mm, with 50% of the compressions being too shallow. Chest recoil was the strongest aspect of their performance, as 83.3% of officers executed it correctly. However, only 50% of the officers had their hands positioned correctly on the sternum.

Conclusion: The quality of CPR performed by officers of the Pekalongan Regional Disaster Management Agency (BPBD) does not meet the standards set by the American Heart Association, particularly in terms of compression depth and speed. While the techniques for chest recoil are generally good, providing care for cardiac arrest victims requires high-quality CPR that adheres to these established standards. To enhance their skills in emergency situations, Pekalongan BPBD officers are encouraged to participate in formal CPR training.

Keywords: *BPBD, Chest Compression, RJP*

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