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EVALUATION OF SEVERE PREECLAMPSIA CLINICAL PATHWAYS IMPLEMENTATION **BASED ON LENGTH OF STAY, USE OF** DIAGNOSTIC TESTS AND USE OF DRUGS INDICATORS AT WAHIDIN SUDIROHUSODO **HOSPITAL**

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Background: The purposes of clinical pathways are reducing variations within health care, more predictable cost, more standardized cares, improving quality of care, improving the procedure costs, improving the quality of collected information and as a counter-check especially in high cost and high value cases.

Method: A prospective cohort study was used to compare evaluation of clinical pathways implementation in patients with severe preeclampsia. Statistical analysis using Kolmogorov-Smirnov test and Mann Whitney U test.

Result: More patients with three days length of stay (10 patients or 50%) while patients without clinical pathways implementation with three days length of stay were (four patients or 20%). Type of test done in patients with clinical pathways implementation was complete blood count (20 patients or 100%) and the least was cardiotocography (eight patients or 40%). The most common drug used in patients with clinical pathways implementation was nifedipine/perdipine (19 patients or 95%) and the least was methyldopa (two patients or 10%)

Conclusion: Clinical pathways implementation in patients with severe preeclampsia may reduce length of stay in hospital, provide guidelines for appropriate diagnostic test, but there is no difference in the effectiveness of drug use.

BIOGRAPHY

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