



The Relationship of Nurse Characteristics with Length of Stay (LOS) Patients in Emergency Room of dr. Slamet Garut Hospital

Zahara Farhan^{1*}, Devi Ratnasari², Buyung Reza Muhammad², Eti Suliyawati¹, Eva Daniati¹

¹Study Programme of Diploma III, Karsa Husada Garut Health Science College, Indonesia.

²Department of Medical Surgical Nursing, Study Programme of Bachelor Nursing, Karsa Husada Garut Health Science College, Indonesia.

Received: July 10, 2025

Revised: August 16, 2025

Accepted: September 25, 2025

Published: September 30, 2025

Corresponding Author:

Zahara Farhan

zaharafarhan585@gmail.com

DOI: [10.29303/jppipa.v11i9.12544](https://doi.org/10.29303/jppipa.v11i9.12544)

© 2025 The Authors. This open access article is distributed under a (CC-BY License)



Abstract: Fast and precise service must be done in handling patients in the emergency room. Services in the emergency room can be hampered if there is a condition of accumulation of patients in the emergency room which is usually caused by an imbalance between the number of patients entering the emergency room with the number of nurses. This study aims to determine the relationship between nurse characteristics and length of stay (LOS) in the emergency department of dr. Slamet Garut Regional General Hospital. This research design uses cross sectional with a sample size of 50 people. The sampling technique uses total sampling. Data collection will use a questionnaire. Data analysis of gender variables (nominal) and length of stay (ordinal) uses the chi-square test, while for variables of age, education level, length of work, (ordinal) and length of stay (ordinal) uses the spearman-rho test. The research location will be carried out in the emergency department of General Hospital dr. Slamet Garut for 2 months from August to September 2025. The results of the study show that no relationship between the educational level of nurses and the length of stay of patients in the emergency room with a p-value of 0.40, no relationship between the gender of nurses and the length of stay of patients with a p-value of 0.94, no relationship between the age of nurses and the length of stay of patients with a p-value of 0.21, and no relationship between the work experience of nurses and the length of stay of patients with a p-value of 0.91. The high workload of nurses can lead to fatigue, loss of concentration, narrowed focus and attention, which impacts the speed and accuracy of nurses in performing emergency procedures on patients, thereby increasing the length of stay of patients in the emergency room. Overall, there was no correlation between the age, gender, educational level, and work experience of nurses and the length of stay of patients in the emergency room at dr. Slamet Garut Hospital.

Keywords: Emergency Department; Length of Stay (LOS); Nurse Characteristics

Introduction

Emergencies can occur anywhere and at any time. An emergency is a clinical condition requiring immediate medical attention to save lives and prevent further disability (Undang-Undang RI No 44 tentang Rumah Sakit, 2009). Emergency services can provide 24-

hour, 7-day-a-week emergency care with the ability to conduct initial assessments of emergency cases, perform resuscitation, and stabilize patients in accordance with established standards (Kemenkes, 2010).

One indicator of the success of medical treatment for emergency patients is the speed with which adequate assistance is provided to emergency patients

How to Cite:

Farhan, Z., Ratnasari, D., Muhammad, B. R., Suliyawati, E., & Daniati, E. (2025). The Relationship of Nurse Characteristics with Length of Stay (LOS) Patients in Emergency Room of dr. Slamet Garut Hospital. *Jurnal Penelitian Pendidikan IPA*, 11(9), 83-89. <https://doi.org/10.29303/jppipa.v11i9.12544>

(Hartati & Halimudin, 2016). The speed and accuracy of assistance provided to patients arriving at the emergency room require standards in line with their competence and capabilities to ensure rapid and appropriate emergency care (Mostafa & El-Atawi, 2024). Emergency room services are provided 24 hours a day, 7 days a week, for emergency cases, resuscitation, and stabilisation (life-saving) with a response time from the moment patient arrives of approximately <5 minutes, and a length of stay (LOS) of approximately < 6-8 hours (Kemenkes RI, 2009).

In an emergency situation, a patient can lose their life within 2-3 minutes due to respiratory arrest, which can lead to death. The first hour is a critical period (golden hour) where every second is precious for the patient's survival (Maatilu et al., 2014). The longer the time wasted without adequate assistance, the lower the patient's chances of survival (Kemenkes, 2010).

Nurses, as one of the health workers in the emergency room, must meet certain qualifications in order to provide services to patients. These qualifications include: having a certificate in emergency training, a minimum of a D3 education, and experience. Nurses are required to be able to carry out emergency procedures in accordance with professional standards based on their knowledge and competence in performing procedures to prevent complications (Kemenkes RI, 2009).

The response time of nurses in handling emergencies is determined by their length of service, level of education, and age. The longer the length of service, the broader the knowledge, competence, and experience gained (Hania et al., 2020). The factors affecting nurses' response time are education level, knowledge level, length of service, and training (Maatilu et al., 2014). Fast and accurate service must be provided when treating patients in the emergency room. Overcrowding in the emergency room can be caused by an imbalance between the number of patients admitted and the number of nurses available. This situation can result in delays in treatment, which can lead to patient deaths before they are examined by a doctor due to excessively long lengths of stay (LOS) (Kathleen et al., 2008)

Length of stay (LOS) is the length of time a patient is treated during a single period of care. Length of stay is defined as the condition of keeping patients in the emergency room or temporary placement unit until a decision is made to admit them or transfer them to another unit, where the recommended length of stay in the emergency room is no more than 4 hours for the sake of patient safety and quality of service (Comission, 2013). Long waiting times and long lengths of stay in the emergency room indicate poor quality of emergency

care at a hospital, which will lead to a decline in patient and family satisfaction (Mayhew & Smith, 2008). The lengthening of the length of stay (LOS) of patients can result in delays in patients leaving the emergency room, which will lead to an increase in patient care costs. Delays in patient discharge can be identified by the time interval between the time the patient is ready to be transferred from the emergency room and the time of transfer, which is more than 6 hours (Pitang et al., 2016).

The speed at which patients are transferred from the emergency room is also influenced by the number of patients arriving. An imbalance between nursing staff and workload can create gaps that can lead to a decline in the quality of nursing care. Nurses' workload is related to the response time for emergency treatment according to the perceptions of patients in the emergency room (Kambuaya et al., 2016).

Based on empirical studies conducted in the emergency room of dr. Slamet Garut Hospital data shows, that several factors affecting the length of stay of patients include the time required from the patient's arrival until a medical diagnosis is made, which takes 1-2 hours. Patients and their families complain about the excessive waiting time for examinations and procedures by doctors or nurses, the prolonged waiting time during radiology and laboratory examinations to determine the patient's diagnosis, resulting in patients waiting more than one day before being transferred to another ward.

Method

This study design is cross sectional to determine the correlation between nurse characteristics and length of stay (LOS) in the emergency room. The sample for this study consisted of all nurses working in the emergency room of dr. Slamet Garut General Hospital, totaling 43 people. The sampling technique used was total sampling. This research instrument uses a questionnaire.

Data collection is conducted through questionnaire completion and observation to measure the length of time spent by patients from the time emergency treatment is administered until they are transferred. Univariate data analysis using frequency distribution, and bivariate analysis using the Spearman-rho. Research period from August to September 2025.

Result and Discussion

Result

The results of the study on the characteristics nurses in the emergency room of dr. Slamet Garut General Hospital can be seen in Table 1. Based on Table 1 it is known that the majority (67.4%) of nurses in the

emergency room of dr. Slamet Garut General Hospital are between the ages of 25 and 40 (early adulthood), while the other half (46.5%) are between the ages of 41 and 60 (middle adulthood). The educational level of nurses is predominantly (67.4%) registered nurse, and small proportion (32.6%) diploma III in nursing. The gender distribution of nurses is such that half (58.1%) are male and the other half (41.9%) are female. In terms of nurses' work experience, half (48.8%) had 6-15 years of experience, nearly half (27.9%) had over 15 years of experience, and nearly half (23.3%) had less than 5 years of experience.

Table 1. Frequency Distribution of Characteristics Nurses in the Emergency Room (N=43)

Characteristics	Frequency	Percentage %
Age:		
25 - 40 Years	23	53.5
≥ 40 - 60 Years	20	41.9
Gender:		
Male	25	58.1
Female	18	41.9
Level of Education:		
Diploma III in Nursing	14	32.6
Registered Nurse (RN)	29	67.4
Work Experience:		
< 5 Years	10	23.3
6 - 15 Years	21	48.8
≥ 15 Years	12	27.9

The results of the study on the length of stay of patients in the Emergency Room of dr. Slamet Garut Regional General Hospital can be seen in Table 2.

Table 2. Length of Stay (LOS) of Patients (N=43)

Length of Stay (LOS)	Frequency	Percentage %
< 6 hours	1	2.3
6- 8 hours	16	37.2
> 8 hours	26	60.5

Based on Table 2 it is known that most (60.5%) of the length of stay (LOS) of patients in the emergency room was more than 8 hours, almost half (37.2%) was 6-8 hours, and a small portion (2.3%) was less than 6 hours.

The results of the study relationship of nurse characteristics with length of stay (LOS) patients in emergency room of dr. Slamet Garut General Hospital were analyzed using Spearman's rho which can be seen in Table 3.

Table 3. Relationship of Nurse Characteristics with Length of Stay (LOS) Patients in Emergency Room (N=43)

Characteristics	Length of Stay (LOS)								p value
	< 6 hours		6-8 hours		> 8 hours		Total		
	N	%	N	%	N	%	N	%	
Age :									
25 - 40 Years	1	2.3	10	23.1	12	27.9	23	53.5	0.21
41 - 60 Years	0	0	6	14	14	32.7	20	46.5	
Gender:									0.94
Male	0	0	10	23.1	15	35	25	58.1	
Female	1	2.3	6	14	11	25.6	18	41.9	
Level of Education:									0.40
D3									
Ners	0	0	7	16.3	7	16.3	14	32.6	
	1	2.3	9	20.8	19	44.3	29	67.4	
Work Experience									0.91
< 5 Years	0	0	5	11.6	5	11.6	10	23.1	
6-15 Years	1	2.3	5	11.6	15	35	21	49	
> 15 Years	0	0	6	14	6	14	12	27.9	

Based on Table 3 it is known there is no relationship between the age of nurses and the length of stay of patients with a p-value of 0.21, no relationship between the gender of nurses and the length of stay of patients with a p-value of 0.94, no relationship between the educational level of nurses and the length of stay of patients a p-value of 0.40, and no relationship between the work experience of nurses and the length of stay of

patients with a p-value of 0.91 in the emergency room of dr. Slamet Garut General Hospital.

Discussion

The Relationship Between Nurse Age and Length of Stay of Patients in the Emergency Room

The results of the study in Table 1 show that there is no relationship between the age of nurses and the

length of stay in the emergency room of dr. Slamet Garut General Hospital. Early adulthood is the productive age range for individuals in terms of work. Maturity influences individuals in their decision-making when performing emergency procedures, which reflects the ability of nurses to manage each patient case in the emergency room (Prasetyowati et al., 2023). Young nurses have low job satisfaction, especially when they are working for the first time. This is due to their lack of experience and responsibility for their work, as well as their desire to find more challenging jobs (Setyani, 2013).

According to the European Commission for Employment and Social Affairs (2023), individuals aged 20-40 tend to strive to adapt to rapidly changing social environments, conflicts, confusion, and social interaction issues. Individuals in this age group are beginning to enter the formal workforce and have high expectations for their careers. However, if they feel a mismatch with their work conditions, they are likely to experience dissatisfaction and work related stress.

There was no correlation between the age of nurses and the length of patient hospitalization in the study because half of the nurses were of productive age and had good physical and emotional maturity. However, nurses of productive age tend to lack a sense of responsibility for the tasks they must perform, lack discipline, are selfish, change jobs frequently, are unable to demonstrate emotional maturity, and are unable to think rationally. Nurses in this age group require guidance and direction in maintaining discipline and instilling a strong sense of responsibility in managing critically ill patients.

Nurses who are in their productive age range are still trying out and experiencing work that tends to result in a lack of confidence in performing emergency procedures, so they still need guidance and direction in independent thinking, emergency response skills, speed, and accuracy in decision-making as part of their responsibility in managing patients in the emergency room.

The Relationship Between the Gender of Nurses and the Length of Stay of Patients in the Emergency Room

The results of the study in Table 3 show that there is no relationship between the gender of nurses and the length of stay in the emergency room of dr. Slamet Garut General Hospital. Gender also determines a person's perception and mindset. Basically, women and men are very different in terms of physical characteristics, emotional maturity, mindset, nature, behavior, and personality, so men tend to be more productive (Lone et al., 2025), which affects the speed and accuracy in handling emergency cases in patients (Fernalia & Trianingsih, 2023).

The high mobility and workload of male nurses in the emergency room can affect their physical and psychological condition, resulting in fatigue and impacting the quality of service provided, patient safety, and treatment outcomes (Labrague, 2024). This can increase the number of patients leaving the emergency room and have an impact on the length of time patients spend in the emergency room (Pitang et al., 2016).

The presence of male nurses in the emergency room is essential, as men have greater physical strength than women (Schwiter et al., 2021). Male nurses can perform tasks that require more physical strength, such as cardio pulmonary resuscitation (CPR), applying splints, or moving patients to stretchers. Female nurses can provide emotional support to patients because of their empathy and caring nature, which tends to be higher than that of male nurses.

The Relationship Between Nurses' Educational Level and Length of Stay of Patients in the Emergency Room

The results of the study in Table 3 show that there is the knowledge gained by individuals through education is an experience to develop individual abilities and qualities. The higher the level of education, the greater the knowledge and skills of individuals. Education influences the mindset and behavior of individuals, and nursing education has a major influence on improving the quality of nursing services in hospitals (Wulandari et al., 2025).

The quality of nursing care in the emergency room is influenced by nurses' knowledge. Nurses' knowledge is their ability to accurately handle emergencies, which affects the length of stay (LOS) of patients in the emergency room. An extended LOS affects the quality of nursing care performance in the emergency room. A prolonged length of stay in the emergency room indicates a lack of nursing competence and poor coordination of the emergency care system (Peñacoba et al., 2021).

The abilities and skills of nurses in the emergency room can be acquired through education and training. The longer the time spent on education and training, the higher the ability and competence in performing the job (Pitang et al., 2016). However, this is not related to the length of stay of patients in the emergency room. This is because nurses working in the emergency room are faced with heavy workloads and high risks. Additionally, the prolonged length of stay of patients in the emergency room is also influenced by incomplete patient administrative records, unfinished diagnostic test results, the severity of the patient's condition, the adequacy of nursing staff, and the ability to cover the costs of treatment and care. One of the roles and responsibilities of a nurse in the emergency room is to

assess and prioritize broader clinical conditions in various acute conditions, from life threatening conditions to chronic conditions, in order to provide accurate and appropriate emergency care.

Another factor contributing to the lack of correlation between nurses' educational levels and length of stay is the high level of work stress experienced by nurses in the emergency room. Workers who are unable to control and adapt to problems in their work environment will become a burden that can affect the individual's physical response. One cause of work stress is workers' understanding of their work environment. High workloads can lead to workers becoming more prone to illness, difficulty concentrating, increased stress, procrastination, and decreased work productivity (Barpanda & Saraswathy, 2023; Setyani, 2013).

This condition can also occur in nurses working in emergency rooms, which treat patients whose lives are at risk and who are at risk of death or disability. The high workload of nurses can lead to fatigue, loss of concentration, narrowed focus and attention, which impacts the speed and accuracy of nurses in performing emergency procedures on patients, thereby increasing the length of stay of patients in the emergency room.

The Relationship Between Nurses' Work Experience and Length of Stay of Patients in the Emergency Room

The results of the study in Table 3 show that there is no relationship between the work experience of nurses and the length of stay of patients in the emergency room, with a p-value of 0.91. Individuals who have been working for more than 5 years tend to experience job burnout compared to those who are new to the job. This burnout can lead to stress in performing daily tasks, which in turn affects the quality of their work (Setyani, 2013).

The role of nurses as caregivers in the emergency room includes examination and treatment strategies used in handling various cases (Andersson et al., 2022). Nurses in the emergency room can act as leaders, managers, and communicators. This results in a very high workload for nurses, which can cause them to experience fatigue, thereby reducing their focus and attention in performing emergency procedures, which in turn increases the length of stay for patients (Bukhari et al., 2014).

According to the results of (Pitang et al., 2016), the role of nurses as caregivers did not have a significant effect on the length of stay of patients in the emergency department. The implementation of the role of nurses as care givers, starting from assessment, establishing a diagnosis, determining interventions, implementing them, and conducting evaluations with the involvement of other nurses who were observed, did not have a

significant effect on reducing the length of stay (Parreira et al., 2021; Smith et al., 2022).

Another factor contributing to the lack of correlation between nurses' work experience and the length of stay of patients in the emergency room is the nurses' task of completing patient administrative documents. This is cause patients cannot be discharged or transferred to a ward if their administrative documents are incomplete (Pitang et al., 2016). The increase in the length of stay of patients in the emergency room is also caused by the severity of the patients' conditions, where patients in the emergency category (red label) affect the need for and availability of healthcare personnel in the emergency room. The treatment of patients in this category requires a large number of doctors and nurses because it demands high concentration due to the complexity of the actions taken in an effort to save the patients' lives.

Conclusion

The conclusion of this study characteristics of nurses in the emergency room the majority (67.4%) of nurses in the emergency room of dr. Slamet Garut General Hospital are between the ages of 25 and 40 (early adulthood), The educational level of nurses is predominantly registered nurse, the gender distribution of nurses is such that half are male, in terms of nurses' work experience half had 6–15 years, and most the length of stay (LOS) of patients in the emergency room was more than 8 hours in the emergency room of dr. Slamet Garut General Hospital. The results of the hypothesis test show that no relationship between the age of nurses and the length of stay of patients, no relationship between the gender of nurses and the length of stay patients, no relationship between the educational level of nurses and the length of stay of patients, no relationship between the educational level of nurses and the length of stay of patients, and no relationship between the work experience of nurses and the length of stay of patients in the emergency room of dr. Slamet Garut General Hospital.

Acknowledgments

We would like to thank the Directorate General of Higher Vocational Education of the Ministry of Education, Culture, Research and Technology of the Republic of Indonesia for providing research funds for the implementation of this research. In addition, we would also like to thank the Head of the National Unity and Politics Agency (Bakesbangpol) and the Head of the Wanaraja Health Center of Garut Regency who have given research permits and cooperated so that the research can be carried out.

Author Contributions

Each author has contributed to the research process. The process of conceptualizing the theory and research methods,

obtaining research permits, data collection, data analysis, and supervision were carried out by Zahara Farhan as the corresponding author. The process of data collection, data validation, data analysis, and preparation of the publication manuscript were assisted by Devi Ratnasari, Buyung Reza Muhammad, Eva Daniati, and Eti Suliyawati as research members.

Funding

This research received funding from STIKes Karsa Husada Garut as an internal research grant for lecturers in even semester of 2024/2025 academic year.

Conflict of Interest

During the research process and preparation of this research report, there was no personal conflict of interest that influenced the research results, either in data collection, data presentation or interpretation of research data. Each author has agreed to publish the results of this research at his/her own expense so that no one can interfere with the process of publishing this research.

References

- Andersson, U., Andersson Hagiwara, M., Wireklint Sundström, B., Andersson, H., & Maurin Söderholm, H. (2022). Clinical reasoning among registered nurses in emergency medical services: a case study. *Journal of Cognitive Engineering and Decision Making*, 16(3), 123–156. <https://doi.org/10.1177/15553434221097788>
- Barpanda, S., & Saraswathy, G. (2023). The Impact of Excessive Workload on Job Performance of Healthcare Workers during Pandemic: A Conceptual Mediation-Moderation Model. *IJMAR*, 10, 24–39. Retrieved from <https://www.ceeol.com/search/article-detail?id=1196980>
- Bukhari, H., Albazli, K., Almaslmani, S., Attiah, A., & Bukhary, E. (2014). Analysis of Waiting Time in Emergency Department of Al-Noor Specialist Hospital, Makkah, Saudi Arabia. *Journal of Emergency Medicine*, 2(4), 67–73. <https://doi.org/10.4236/ojem.2014.24012>
- Comission, J. (2013). *The Patient Flow Standard and the 4-Hour Recommendation*. National Institute of Health (NIH). Retrieved from <https://pubmed.ncbi.nlm.nih.gov/23785957/>
- Fernalia, P., & Trianingsih, K. (2023). Jurnal Kesehatan Medika Saintika. *Jurnal Kesehatan Medika Saintika*, 14(1), 195–210. <https://doi.org/10.30633/jkms.v16i1.3108>
- Hania, U. P., Budiharto, I., & Yulanda, N. A. (2020). Literature Review: Faktor-Faktor yang Mempengaruhi Response Time Perawat pada Penanganan IGD. *ProNers*, 5(3), 1–14. <https://doi.org/10.26418/jpn.v5i2.46168>
- Hartati, S., & Halimudin. (2016). Response Time Perawat di Ruang Instalasi Gawat Darurat. *Jurnal Ilmiah Mahasiswa Keperawatan Fakultas Keperawatan Universitas Syiah Kuala*, 3(2). Retrieved from <https://jim.usk.ac.id/FKep/article/view/4331/2994>
- Kambuaya, P. R., Kumaat, L. R., & Onibala, F. (2016). Hubungan Beban Kerja Perawat dengan Waktu Tanggap Pelayanan Keperawatan Gawat Darurat Menurut Persepsi Pasiendi IGD RSUD Kabupaten Sorong. *E-Journal Keperawatan (e-Kp) Universitas Sam Ratulangi*, 4(1). <https://doi.org/10.35790/jkp.v4i1.11908>
- Kathleen, S. O., Koziol Mclain, J., & J. Scheetz, L. (2008). *Panduan Belajar Keperawatan Emergensis*. EGC. <https://shorturl.asia/NBMDc>
- Kemenkes, R. (2010). *Peraturan Menteri Kesehatan Republik Indonesia Nomor 340 Tentang Klasifikasi Rumah Sakit*. Kementerian Kesehatan Republik Indonesia. Retrieved from <https://pelayanan.jakarta.go.id/download/regulasi/peraturan-menteri-kesehatan-nomor-340-tentang-klasifikasi-rumah-sakit.pdf>
- Kemenkes RI. (2009). Standar Instalasi Gawat Darurat (IGD) Rumah Sakit. In *Peraturan Menteri Kesehatan Republik Indonesia* (pp. 1–29). Retrieved from <https://sardjito.co.id/wp-content/uploads/2015/12/kepmenkes-856-thn-2009-standar-IGD.pdf>
- Labrague, L. J. (2024). Emergency room nurses' caring ability and its relationship with patient safety outcomes: A cross-sectional study. *International Emergency Nursing*, 72, 101389. <https://doi.org/10.1016/j.ienj.2023.101389>
- Lone, M. A., Jan, R., & Rehman, A. (2025). Are Men and Women Psychologically Different Does It Matters. *The International Journal of Indian Psychology*, 13(1), 393–401. <https://doi.org/10.25215/1301.038>
- Maatilu, Vitrise, Mulyadi, & Reginus, M. (2014). Faktor-Faktor yang Berhubungan dengan Respon Time Perawat pada Penanganan Pasien Gawat Darurat di IGD RSUP Prof. DR. R. D. Kandou Manado. *Jurnal Keperawatan*, 2(2). <https://doi.org/10.35790/jkp.v2i2.5229>
- Mayhew, L., & Smith, D. (2008). Using Queuing Theory to Analyse the Government's 4-h Completion Time Target in Accident and Emergency Departments. *Health Care Management Science*, 11(1), 11–21. <https://doi.org/10.1007/s10729-007-9033-8>
- Mostafa, R., & El-Atawi, K. (2024). Strategies to measure and improve emergency department performance: a review. *Cureus*, 16(1). <https://doi.org/10.7759/cureus.52879>
- Parreira, P., Santos-Costa, P., Neri, M., Marques, A.,

- Queirós, P., & Salgueiro-Oliveira, A. (2021). Work methods for nursing care delivery. *International Journal of Environmental Research and Public Health*, 18(4), 2088. <https://doi.org/10.3390/ijerph18042088>
- Peñacoba, C., Velasco, L., Nursing, F. J. C., & Gil-almagro, F. (2021). Stress and quality of life of intensive care nurses during the COVID-19 pandemic : Self-efficacy and resilience as resources. *Willeyonlinelibrary.Com/Journal/Nicc*, 26(July), 493–500. <https://doi.org/10.1111/nicc.12690>
- Pitang, Y., Widjajanto, E., & Ningsih, D. (2016). Pengaruh Peran Perawat Sebagai Care Giver terhadap Length of Stay (LOS) di IGD RSUD DR.T.C.HILLERRS Maumere dengan Pelaksanaan Triage sebagai Variabel Moderasi. *Journal of Nursing Science Update. FIKes Universitas Brawijaya*, 4(2), 240–255. Retrieved from <https://jik.ub.ac.id/index.php/jik/article/view/112/121>
- Prasetyowati, I., Ratnasari, R., & Victoria, A. Z. (2023). Hubungan Pengetahuan Perawat Triase dan Lama Pemeriksaan Laboratorium terhadap Length of Stay (LOS) pada Saat Pandemi Covid-19 di IGD. *Jurnal Keperawatan Sumba*, 1(2), 96–102. <https://doi.org/prefix.10.31965>
- Schwiter, K., Nentwich, J., & Keller, M. (2021). Male privilege revisited: How men in female-dominated occupations notice and actively reframe privilege. *Gender, Work & Organization*, 28(6), 2199–2215. <https://doi.org/10.1111/gwao.12731>
- Setyani, T. W. (2013). *Analisis Stres Kerja dan Hubungannya dengan Karakteristik Pekerja, Kondisi Pekerjaan dan Lingkungan Kerja pada Dosen di Fakultas Kedokteran dan Ilmu Kesehatan UIN Syarif Hidayatullah tahun* [Thesis: Universitas Islam Negeri Syarif Hidayatulloh]. Retrieved from https://repository.uinjkt.ac.id/dspace/bitstream/123456789/26529/1/Tetik_Wulandari_Setyani-Fkik.Pdf
- Smith, S. K., Benbenek, M. M., Bakker, C. J., & Bockwoldt, D. (2022). Scoping review: Diagnostic reasoning as a component of clinical reasoning in the US primary care nurse practitioner education. *Journal of Advanced Nursing*, 78(12), 3869–3896. <https://doi.org/10.1111/jan.15414>
- Undang-Undang RI No 44 tentang Rumah Sakit. (2009). Undang-Undang RI No. 44 tahun 2009. *Tentang Rumah Sakit*, 10, 2–4. Retrieved from <https://farmalkes.kemkes.go.id/unduh/uu-44-2009/>
- Wulandari, K. A. D., Sudayasa, I. P., & AndSusanty, S. (2025). The Association Between Physical Activity, Level of Stress, and Economic Status with The Nutritional Status Among Adolescent Females in Coastal Regions. *The Indonesian Journal of Public Health*, 20(1), 120–132. Retrieved from <https://e-journal.unair.ac.id/IJPH/article/download/56268/32400>