

**GUIDELINES**

**PROFESSIONAL PRACTICE IN EMERGENCY, CRITICAL, AND DISASTER  
NURSING  
REGULAR A21 PROGRAM STUDENTS**

**Batch 1: January 5 – February 7, 2026**

**Batch 2: February 9 – March 14, 2026**



**PROFESSIONAL NURSING EDUCATION STUDY PROGRAM**

**FACULTY OF NURSING**

**UNIVERSITAS AIRLANGGA**

**2025**

## 1. COURSE IDENTITY

Course Title	: Keperawatan Gadar, kritis dan bencana
Course Code	: KPG 502
Credit Units	: 5 sks
Participants	: Regular A21 Program Students
Duration of Practice	: 5 weeks (offline)
Practice Location	: RSUA
Practice Hours	: 8 hours per day, 6 days per week

## 2. COURSE DESCRIPTION

The professional practice in Emergency, Critical, and Disaster Nursing is a program designed to facilitate students' transition into professional nursing practice. This program enables students to provide nursing care, deliver health education, perform advocacy roles for clients, and make legal and ethical decisions based on the best available evidence for clients in critical, emergency, and disaster situations. The professional practice in emergency nursing encompasses nursing care for clients across all age groups who experience nursing problems resulting from impairment of one or more body systems under critical, emergency, or disaster conditions.

## 3. LEARNING OUTCOMES

The expected final competencies to be achieved and mastered by students of the Professional Nursing Education Program, Faculty of Nursing, Airlangga University, upon completion of the professional practice are as follows:

### **Emergency and Critical Nursing**

1. Apply effective interpersonal skills in teamwork and in delivering nursing care to clients of all age groups in emergency, critical, and disaster situations.
2. Develop critical, logical, and ethical thinking in planning and providing nursing care to clients of all age groups in emergency, critical, and disaster situations.

3. Apply the nursing process in solving client problems across all age groups in emergency, critical, and disaster conditions.
4. Apply ethical and legal decision-making processes for patients of all age groups in emergency, critical, and disaster situations.
5. Demonstrate technical nursing skills in accordance with applicable standards, or creatively and innovatively, to ensure efficient and effective care for clients of all age groups in emergency and critical conditions, including:
  - a. Conducting monitoring of critically ill patients
  - b. Meeting the needs of critically ill patients
  - c. Providing nursing care for clients with respiratory system disorders
  - d. Providing nursing care for clients with cardiovascular system disorders
  - e. Providing nursing care for clients with neurological system disorders
  - f. Providing nursing care for clients with urinary system disorders
  - g. Providing nursing care for clients with digestive and endocrine system disorders
  - h. Providing nursing care for clients with multisystem disorders
  - i. Providing nursing care for clients in pre-hospital and in-hospital emergency settings
  - j. Providing nursing care for clients with special conditions, including children and pregnant women
6. Perform advocacy roles for clients and families across all age groups in emergency and critical situations to protect clients' rights and support informed decision-making.
7. Develop self-potential to enhance professional competence.
8. Apply research findings in the provision of nursing care for clients of all age groups in emergency and critical conditions.
9. Conduct simulations of hospital Code Blue scenarios

**Disaster Nursing:**

1. Conduct simulations of disaster prevention and management health education by integrating principles and theories of adult learning.

2. Demonstrate disaster victim assistance and disaster management while ensuring the safety of victims, healthcare personnel, and environmental security.
3. Conduct simulations of hospital disaster plan scenarios or Code Green.

#### **4. IMPLEMENTATION STRATEGY**

##### **a. Time and Location of Practice**

The Professional Practice in Emergency and Critical Nursing is conducted over a period of five (5) weeks, as follows:

Batch 1: January 5 – February 7, 2026

Batch 2: February 9 – March 14, 2026

##### **b. Student Rotation Schedule**

The following is the student rotation schedule based on group assignments and practice periods for the Professional Practice in Emergency and Critical Nursing. Students are organized to ensure the achievement of competencies in emergency and critical nursing. Students are divided into small groups as follows:

##### **c. Clinical Practice Timeline**

<b>No</b>	<b>Week</b>	<b>Activities</b>
1	I	Hospital Health Promotion (PKRS) and determination of seminar case topics
2	II	Hospital Health Promotion (PKRS) and seminar case consultation
3	III	Case Seminar
4	IV	Code Blue and/or Code Green Simulation
5	V	Clinical Rotation Examination

**d. List of Units and Academic & Clinical Educators (CE)**  
**1) Airlangga University Hospital**

UNIT	Person in Charge / Unit Coordinator	Academic & Clinical CE	
		Batch 1	Batch 2
Emergency Department RSUA	Sundawan Priyo Seputra, S.Kep., Ns. Phone. 081335402963	1. Erna Dwi Wahyuni, S.Kep., Ns. M.Kep 2. Sundawan Priyo Seputra, S.Kep., Ns.	1. Erna Dwi Wahyuni, S.Kep., Ns. M.Kep 2. Sundawan Priyo Seputra, S.Kep., Ns.
ICU RSUA	Nissa Aruming Sila, S.Kep., Ns., M.Kep Phone. 08563085354	1. Dr.Yulis Setya D,S.Kep.,Ns, MNg. 2. Nissa Aruming Sila, S.Kep., Ns., M.Kep	1. Dr.Yulis Setya D,S.Kep.,Ns, MNg. 2. Nissa Aruming Sila, S.Kep., Ns., M.Kep
ICU 5B1 GRHA TRIMED	Wikan Purwihantoro, S.Kep.,Ns., M.Kep Phone. 081556484244	1. Arina Qona'ah, S.Kep.Ns.,M.Kep. 2. Wikan Purwihantoro, S.Kep.,Ns., M.Kep.	1. Arina Qonaah, S.Kep., Ns., M.Kep 2. Wikan Purwihantoro, S.Kep.,Ns., M.Kep.
ICU 5B2 GRHA TRIMED	Bangun Mukti, S.Kep.,Ns.,M.Ke p Phone. 085235000025	1. Dr. Ninuk Dian K, S.Kep.Ns.MANP 2. Bangun Mukti, S.Kep.,Ns.,M.Kep	1. Dr. Ninuk Dian K, S.Kep.Ns.MANP 2. Bangun Mukti, S.Kep.,Ns.,M.Kep
STROKE UNIT	Andis Yuswanto, S.Kep.,Ns., M.Kep Phone. 081703944240	1. Harmayetty,S.Kp.M.Kes 2. Andis Yuswanto, S.Kep.,Ns	1. Harmayetty,S.Kp.M.Kes 2. Andis Yuswanto, S.Kep.,Ns
Operating Room – Anesthesia	Indri Dyah Puji Lestari, S.Kep.,Ns Phone. 082141130227	1. Dr Sriyono, S.Kep., Ns.M.Kep.Sp.KM B 2. Indri Dyah Puji Lestari, S.Kep.,Ns.	1. Dr Sriyono, S.Kep., Ns.M.Kep.Sp.KMB Indri Dyah Puji Lestari, S.Kep.,Ns.
Disaster Nursing	Yogo Apriawan, S.Kep., Ns.,M.Kep. Phone. 085230749829	1. Yogo Apriawan, S.Kep., Ns., M.Kep. 2. Erna Dwi Wahyuni., S.Kep.Ns.,M.Kep./ Dr. Sriyono, S.Kep.Ns.,M.Kep.Sp.Ke p. MB.	1. Yogo Apriawan, S.Kep., Ns., M.Kep. 2. Erna Dwi Wahyuni., S.Kep.Ns.,M.Kep./ Dr. Sriyono, S.Kep.Ns.,M.Kep.Sp.Ke p. MB.

**e. Student Group Assignments**

**Batch 1 (January 5 – February 7, 2026)**

<b>GROUP</b>	<b>January 5–10, 2026</b>	<b>January 12–17, 2026</b>	<b>January 19–24, 2026</b>	<b>January 26–31, 2026</b>	<b>February 2–7, 2026</b>
<b>Group 1</b> 1. Dewa Ach Rohmatullah 2. Andika Satrio Purnomo 3. Khemal Maulana 4. Herlina Indarni 5. Audrey Tiurma Raflesia 6. Inges Mutia Kafsah 7. Sri Wahyuni Sidiq T.A 8. Kharisma Desbi Y. P 9. Nadia Ayuningtyas 10. Fadhilah Aliyyah Widya 11. Hilda Maghfiroh 12. Zainiyyah Alfa Rahmita	<b>ICU 5B1 GRAH A TRIME D</b>	<b>STROK E UNIT</b>	<b>Operating Room (Anesthesi a)</b>	<b>Emerg ency Depart ment &amp; Disaste r Simula tion</b>	<b>ICU RSU A</b>
<b>Group 2</b> 1. Nafisa Sandi Putra 2. M.Fadli Farih 3. Divano Azriel Denandra 4. Ramadhana Fitria N 5. Sabhina Khoirunnimah 6. Nabilla Syahwa A 7. Dita Dwi Oktav P 8. Najwa Zamira 9. Lovita Angeli Aprilia I 10. Wahyuni Sasi Kartika 11. Mutiara Salwa Ismi N 12. Dewi Muizatul Ayu 13. Yesa Anggraita	<b>ICU 5B2 GRAH A TRIME D</b>	<b>ICU 5B1 GRAH A TRIME D</b>	<b>STROK E UNIT</b>	<b>Operat ing Room &amp; Disaste r Simula tion</b>	<b>Emergency Department</b>

<b>Group 3</b> 1. Yohanes Setiawan 2. Ach Roziqi 3. Rendhika Fauzi Fitria H 4. Tessa Audy Janiar 5. Dewi As Syamsi 6. Nur Rofiqoh Chasanah 7. Dliyaa Qamarani 8. Desty Aurellia Pramesti 9. Maulidha Nur K 10. Salsabila Putri An-Nida 11. SulistyawatI 12. Elok Kusuma W 13. Lisa Trimurti	ICU RSUA	ICU 5B2 GRAH A TRIME D	ICU 5B1 GRAH A TRIME D	Stroke Unit & Disaster Simulation	Operating Room
<b>Group 4</b> 1. Bayu Bactiar Yudhistira 2. Firmansyah Rizky S 3. Hansa Nur Halina 4. Dina Akmarina S 5. Mella Ratna Dewi 6. Putri Tria Amanda 7. Dhea Annisa Maharani	Emergency Department	ICU RSUA	ICU 5B2 GRAH A TRIME D	ICU 5B1 GRAH A TRIME D & Disaster Simulation	STROKE UNIT
<b>GROUP</b>	January 5–10, 2026	January 12–17, 2026	January 19–24, 2026	January 26–31, 2026	February 2–7, 2026
8. Cindy Anindya Putri 9. Hana Vita Nurfaizah 10. Anisa Anggraini 11. Rozan Fatmala 12. Salwa Az Zahra					
<b>Group 5</b> 1. Moch Syahrul Bagus R 2. Rahmad Rijaldi Wahabi 3. Alfina Sarah Sadjidah 4. Ni Putu Ayu Cahyanti 5. Ratih Islami 6. Tsabita Amalia Haq 7. Dwi Yuvta Nurensa S.N 8. Almira Wida Fourdiva 9. Nony Kristianda 10. Dwi Thelma Isadora D 11. Bella Sevian W 12. Norviasita Dwi H	Operating Room	Emergency Department	ICU RSUA	ICU 5B2 GRAH A TRIME D & Disaster Simulation	ICU 5B1 GRAH A TRIME D

**Batch 2 (February 9 – March 14, 2026) - W2**

<b>GROUP</b>	<b>February 9–14, 2026</b>	<b>February 16–21, 2026</b>	<b>February 23–28, 2026</b>	<b>March 2–7, 2026</b>	<b>March 9–14, 2026</b>
<b>Group 1</b> 1. Muhammad Chusnul M 2. Arthamevia Annisatun 3. Marta Uropmabin 4. Putri Nur Wahyuni 5. Binti Musyarofah 6. Galuh Shalwa Rojabi 7. Putri Anjeli 8. Anita Puspita Sari 9. Nessa Chiquita Bunga 10. Mazidatul Izza 11. Berlian Wijaya Santoso 12. Debby Pristya Pranita	<b>ICU 5B1 GRAH A TRIME D</b>	<b>STROKE UNIT</b>	<b>Operating Room</b>	<b>Emergency Department &amp; Disaster Simulation</b>	<b>ICU RSUA</b>
<b>Group 2</b> 1. Farhan Dwi Prasetyo 2. Auria Eka Setya Putri 3. Nailil Izzati 4. Bilqis Neilun Nidda F 5. Nadira Emillita 6. Nur Dhea Nisfahu T 7. Novi Nur Inayah 8. Dinatur Rofifah 9. Adinda Suenda 10. Lidya Adelia Wibisono 11. Adinda Nurul Hamidah 12. Jacinda Syakura E	<b>ICU 5B2 GRAH A TRIME D</b>	<b>ICU 5B1 GRAH A TRIME D</b>	<b>STROKE UNIT</b>	<b>Operating Room &amp; Disaster Simulation</b>	<b>Emergency Department</b>
<b>Group 3</b> 1. Achmad Zacky Rayhan 2. Beril Pramudya A 3. Salsabila Herlina 4. Audy Widyawati 5. Nickyta Dewi Maulidya 6. Candra Febika A 7. Anne Febrianti Suhono 8. Eva Marlia 9. Nimas Nining Wardani 10. Firlir Ramadhana 11. Rana Hanin Pradita	<b>ICU RSUA</b>	<b>ICU 5B2 GRAH A TRIME D</b>	<b>ICU 5B1 GRAH A TRIME D</b>	<b>STROKE UNIT &amp; Disaster Simulation</b>	<b>Operating Room</b>

<b>GROUP</b>	<b>February 9–14, 2026</b>	<b>February 16–21, 2026</b>	<b>February 23–28, 2026</b>	<b>March 2–7, 2026</b>	<b>March 9–14, 2026</b>
12. Nur Hayati 13. Pascaningwiyati S.P					
<b>Group 4</b> 1. Paundra Deastama 2. Ziaul Azmi Musyaffa' 3. Firda Alicia Rahma 4. Putri Nanda Sundari 5. Mayang Pujianti K 6. Aelva Deliana 7. Wardatul Faradis 8. Lulu Hiliyatun Nisa 9. Lukky Agustya Wulan 10. Safitri Bellia Izzati 11. Titania Ning Tyas 12. Arum Helvi Nur Azizah	<b>Emergency Department</b>	<b>ICU RSUA</b>	<b>ICU 5B2 GRAH A TRIME D</b>	<b>ICU 5B1 GRAH A TRIME D &amp; Disaster Simulation</b>	<b>STROKE UNIT</b>
<b>Group 5</b> 1. Afif Ersadyawan A 2. Muhammad Nurriyanto 3. Aulia Amanda Sukma S 4. Nur Ika Fadillah 5. Alanistya Ardhianti 6. Maula Monafida R 7. Tasliyatul Qolbi 8. Rani Putri Permatasari 9. Riska Anindya Novianti 10. Dipa Apsari Putri 11. Rr. Yania Talitha A 12. Adinda Kartika Dewi	<b>Operating Room</b>	<b>Emergency Department</b>	<b>ICU RSUA</b>	<b>ICU 5B2 GRAH A TRIME D &amp; Disaster Simulation</b>	<b>ICU 5B1 GRAH A TRIME D</b>

### **E. Duties and Evaluation of Professional Clinical Practice**

The duties and evaluation of the professional clinical practice in Emergency and Critical Nursing are described as follows:

- 1) During clinical practice in the assigned units, students are given responsibility to manage one patient with a minimum of three days of care, and are required to prepare a complete case report for the managed patient.
- 2) Students are responsible for the assigned patient and are also required to provide

nursing care to other patients in the unit according to the clinical instructor's guidance while adhering to health protocols. If the assigned patient has been discharged (KRS) and the student no longer has a managed patient on that day, the student is required to take another case as a case resume. Note: Students assigned to the Emergency Department (IGD) and Resuscitation Room are required to manage patients daily (one case report and a minimum of four case resumes).

- 3) Prior to practice in each clinical unit, students are required to complete unit orientation, receive a case assignment based on the recommendation of the clinical instructor, and prepare a preliminary case report. (3) The professional practice supervision process includes the following stages: A) Pre-Conference B) Bedside Teaching and/or Conference (conducted as needed based on agreement with the instructor); C) Post Conference (conducted at the end of each week in accordance with the agreement with the academic supervisor).
- 4) Students are required to prepare a daily final report/nursing care report for each clinical unit in a complete manner. The components and format of the weekly final report are attached.
- 5) Case reports and the competency logbook must be completed daily. The competency logbook must be signed by the clinical instructor and stamped by the unit.
- 6) Prior to the pre-conference, students are required to prepare a handwritten preliminary report, written neatly and legibly. The structure of the preliminary clinical practice report (based on the assigned case) includes the following components:
  - A. Client's health problem (medical diagnosis)
  - B. Definition, etiology/risk factors, pathophysiology, signs and symptoms, diagnostic/supporting examinations, medical management, and nursing care focused on the medical diagnosis (for Emergency Department cases, management algorithms may also be included), and complications
  - C. Web of Causation (WOC) including all possible nursing problems
  - D. Basic nursing assessment of the client
  - E. Possible nursing diagnoses based on the case (minimum of three nursing diagnoses), including goals, outcome criteria, nursing interventions, and rationales
  - F. Sources/references/bibliography consisting of at least five (5) references, including books published within the last ten (10) years and journal articles from the last five (5) years

- 7) The pre-conference is guided by the clinical or academic instructor and discusses the prepared preliminary report. Students must demonstrate mastery of the managed case during the oral examination (responsi), which is included in the assessment.
- 8) Bedside teaching and/or conferences are guided by clinical or academic instructors and focus on patient cases or specific skills not yet mastered by students (responsi is included in the assessment).
- 9) The post-conference is guided by the clinical or academic instructor and discusses:
  - A. Assessment results and nursing diagnoses prepared by students
  - B. Nursing interventions that have been implemented
  - C. Competencies that have been achieved
  - D. Evaluation of nursing interventions
  - E. Problems encountered during clinical practice
- 10) Students who do not bring the nursing care report during the post-conference or submit incomplete reports in accordance with the applicable requirements will be considered absent.
- 11) During clinical practice, students are required to read and bring relevant literature (either e-books or printed books) according to the selected case topic.
- 12) Mandatory reference books that must be read and brought during practice are the 3S books: SDKI, SLKI, and SIKI (latest editions).
- 13) Students are required to bring the competency logbook whenever rotating to another unit and must complete and obtain signatures from the clinical instructor immediately after performing procedures. The logbook must be submitted to the Course Coordinator of Critical Nursing no later than one week after completion of the emergency nursing professional practice.
- 14) Reports and competency logbooks must be submitted online (via AULA or Google Drive:  
[https://drive.google.com/drive/folders/1eWH0Tlcaq0cv6o\\_1bgtXrmtti2iUtfL8?usp=sharing](https://drive.google.com/drive/folders/1eWH0Tlcaq0cv6o_1bgtXrmtti2iUtfL8?usp=sharing)) after receiving approval from clinical and academic instructors. The submission deadline is Monday of the following week at 15:00 WIB. Late submission will result in grade penalties. The final report consists of:
  - A. Nursing Care Report, including the main cover, approval sheet signed by the Academic Supervisor, Clinical Educator (CE), and Head of Unit, complete with the unit stamp
  - B. Student attendance sheet

- C. Preliminary report
- D. PKRS activity report consisting of lesson plans (SAP), educational materials, leaflets, and activity summaries (for Operating Room–Anesthesia and Emergency Department, or if length of stay < 3 days)
- E. Other activity resume reports (e.g., special seminars conducted in certain units)
- F. If nursing care (LK) has been conducted for more than three (3) days in a unit, a resume is not required
- G. Disaster nursing assignment papers on Code Blue and Code Green.

- 15) PKRS (Health Education) activities are conducted during Week 1 and Week 2 in each unit. PKRS topics are determined by the clinical instructor based on situational analysis of the unit.
- 16) Professional Clinical Practice Seminar:
  - A. The seminar schedule is attached.
  - B. The case to be presented must be a second-week case with a minimum of three days of care and is presented in the third week. Students must obtain a recommendation from the clinical instructor and consult the seminar case prior to the seminar. The seminar may be conducted offline or online via the academic Zoom platform, depending on conditions. Students are required to coordinate seminar implementation at least seven days prior with the course coordinator (PJMK) and other involved parties.
  - C. Seminar invitations for all instructors are prepared by students with acknowledgment from the Coordinator of Emergency and Critical Nursing and coordinated with the Professional Academic Advisor (PAA). Invitations must be distributed no later than two days prior to the seminar.
  - D. Students must prepare seminar evaluation sheets per group, including case and group identification, according to the number of instructors present. Online evaluations may be conducted via Google Forms without altering the assessment components.
- 17) Code Blue and Code Green Simulation:
  - A. Students develop a project and conduct simulations/demonstrations related to disaster prevention and response in the hospital.
  - B. The project is conducted in Week 4, with one day allocated for simulation activities.
  - C. Group representatives must contact the Clinical Educator (CE) to obtain cases and prepare a project proposal.
  - D. All students in the cohort are required to participate in the simulation.
  - E. For practice at RSUA, simulation results must be presented in the form of a YouTube video (4–7 minutes), a web news report, and a simulation report
- 18) Professional Practice Examination is conducted in Week 5 under the following provisions:
  - A. Students are eligible to take the final rotation examination after fulfilling 100% attendance requirements in each unit.
  - B. Students must coordinate with academic and clinical instructors prior to the examination.
  - C. Each student must prepare examination evaluation forms (PDF format) for each examiner, including student identity and examination case.

D. The examination case is determined by lottery on the examination day according to the assigned clinical unit.

E. Examination provisions:

1. The examination includes comprehensive nursing care (data collection, diagnosis, planning, implementation, and evaluation) and oral examination (responsi), conducted from 07:00–13:00 WIB. For offline examinations, students must perform at least one clinical skill on a patient, directly assessed by the examiner.
2. During the examination, students must prepare a report on the nursing care and WOC of the examination case.
3. Students are strictly prohibited from opening textbooks, preliminary reports, other reading materials, or using mobile phones/laptops until the examination is completed

F. For practice at RSUA, examinations are conducted in each respective unit with clinical and academic instructors

G. Students who do not pass the examination are given the opportunity to remediate or retake the examination on the following day or as agreed by the examiners.

H. Students who are absent due to illness or official leave supported by valid documentation may take a make-up examination.

I. Students who change duty assignments must contact the relevant academic and clinical CEs. If the student has not yet taken the examination, the examination will be conducted with the respective CE.

J. If a make-up examination with the relevant CE cannot be conducted for academically justified reasons, the decision regarding remedial examination lies with the Course Coordinator (PJMK).

K. The minimum passing grade for the Critical Nursing Professional Examination is B (70).

L. Academic honesty is mandatory. Cheating or opening reference materials during the examination will result in disqualification and the requirement to retake the Emergency and Critical Nursing Professional Examination. Academic ethics must be upheld throughout the professional program. Social media should be used only as a supporting communication tool, not as the primary means of communication with academic and clinical CEs.

19) The evaluation of the professional clinical practice consists of:

A.	-	Preliminary Report	: 15%
	-	Oral Examination	:10%
	-	Case Report	: 10%
	-	Assignments, ADL, PKRS, Code Blue and Code Green Projects	: 15%
B.		Seminar	: 10%
C.		Softskills (Disiplice, <i>Teamwork</i> )	:10%
D.		Examination	: 30%
		<b>Total</b>	<b>: 100%</b>

20) Late submission of reports is subject to the following regulations:

- A. 1 day late: score reduced by 20%
- B. 2 days late: score reduced by 40%
- C. More than 3 days late: score reduced by 50%
- D. 1 week late: no score will be given

21) Final Graduation Requirements for Critical and Emergency Nursing Professional Practice

- A. The final evaluation must obtain a minimum grade of B (70)
- B. Students who obtain a final evaluation score below B (70) are declared not passed the Critical and Emergency Nursing rotation.

Grading System:

Score Range	Letter Grade
86 - 100	A
78 - <86	AB
70 - <78	B
62 - <70	BC
54 - <62	C
40 - <54	D
<40	E

## REFERENCES

- 1) Baird & Bethel. (2016). *Manual of Critical care Nursing*. 7<sup>th</sup> ed. The USA: Elsevier Mosby.
- 2) Emergency Nurses Association. (2013). *Sheehy's Manual of Emergency Nursing: Principles and Practice*. 7<sup>th</sup> ed. Mosby: Elsevier Inc
- 3) Tim Pokja SDKI DPP PPNI. (2017). *Standar Diagnosis Keperawatan Indonesia*. 1<sup>st</sup> ed. Jakarta: DPP PPNI.

- 4) Tim Pokja SIKI DPP PPNI. (2018). Standar Intervensi Keperawatan Indonesia. Definisi dan Tindakan Keperawatan. 1ed. Jakarta: DPP PPNI
- 5) Tscheschlog, B. A. & Jauch, A. (2014). *Emergency nursing made incredibly easy*. Wolter Kluwers.

Surabaya, 30 December 2025

Critical & Emergency Nursing Professional Practice

Person in Charge  
(PIC)



Dr. Ilya Krisnana, S.Kep.Ns.,M.Kep.  
S.Kep.Ns.,M.Kep. NIP. 198109282012122002



Erna Dwi Wahyuni,  
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Acknowledged by  
Head of the Medical-Surgical Nursing Department



Prof. Dr. Tintin Sukartini, S.Kp.M.Kes.  
NIP. 19721217200003201

## APPENDIX 1

### Seminar and Examination Schedule

#### 1. Seminar Schedule

Case Selection	Seminar Implementation
Week 1/2	Week 3

**NOTE:**

- Seminars are conducted online, with schedules agreed upon mutually.
- Students are required to prepare the seminar venue.
- Students must invite their clinical supervisors for each seminar.
- Students must prepare the seminar assessment forms.
- Seminar cases (according to the schedule) must be consulted with the supervisor in advance

**Competency Notes:**

During the Critical, Emergency, and Disaster Nursing practice, each student must achieve the following minimum competencies at each rotation:

1. Perform physical examinations under supervision at least 5 times, with verification signatures in the ADL logbook.
2. Perform tracheostomy care at least 5 times, especially in the ICU.
3. Perform postural drainage, suctioning, clapping, vibration, and left–right positioning at least 5 times, particularly in the ICU and Stroke Unit.
4. Perform oral hygiene and NGT care at least 5 times.
5. Perform personal hygiene and catheter care at least 5 times.
6. Perform blood sampling and interpretation of BGA results at least 5 times.
7. Prepare patients for surgery at least 5 times.
8. Observe postoperative patients at least 5 times.

## **Appendix 2**

### **Structure of the Preliminary Report**

The preliminary report must be prepared using the following format:

- I. Case Theoretical Review
  1. Medical Diagnosis (Definition, Etiology, Clinical Manifestations, Supporting Examinations, Complications)
  2. Pathophysiology
  3. Case Management and/or Algorithm
  4. WOC including all potential nursing problems
  
- II. Nursing Care Review (Theory)
  1. Nursing Assessment
  2. Potential nursing diagnoses according to SDKI nomenclature (minimum of 3 diagnoses), arranged by priority scale
  3. Goals and Outcome Criteria (according to NOC – Nursing Outcome Classification)
  4. Nursing Interventions according to SIKI (Indonesian Nursing Intervention Standards) or NIC, including rationales
  
- III. References
  1. References must be published within the last 10 years, minimum 5 references
  2. At least one scientific case study article must be included; if an exact match is unavailable, a closely related article may be used.

## LIST OF CLINICAL PRECEPTORS AIRLANGGA UNIVERSITY HOSPITAL

NO	UNIT	NAME OF CLINICAL PRECEPTORS
1	Emergency Department RSUA	1. Sundawan Priyo S, S.Kep.,Ns 2. Randy Yusuf Pratama Putra, S.Kep., Ns 3. Riza Kusumawati, S.Kep., Ns 4. Latifatul Muna, S.Kep., Ns 5. Seliyuzika D., S.Kep., Ns 6. Bayutirta Hadi P., S.Kep., Ns
2	ICU 5 B1	1. Wikan Purwihantoro Sudarmaji, S.Kep.,Ns.,M.Kep. 2. Rosidatus Salimah S.Kep.,Ns 3. Agus Saputro, S.Kep.,Ns 4. Rio Yanuar, S.Kep.,Ns. 5. Juniar Nur R, S.Kep., Ns 6. Devi Ayu Kumalasari, S.Kep.,Ns
3	Operating Room – Anesthesia Unit	1. Indri Diyah Puji Lestari,S.Kep.,Ns. 2. Fatiyah Malihah,S.Kep.,Ns. 3. Priyo Febri Nurhartanto,S.Kep.,Ns. 4. Emi Widiastuti,S.Kep.,Ns. 5. Nurul Wachyu Fitriyah,S.Kep.,Ns.
4	ICU RSUA	1. Nissa Aruming Sila, S.Kep., Ns., M.Kep 2. Evy Dwi Rahmawati, S.Kep.,Ns.,M.Kep 3. Ardhena Ekasari, S.Kep., Ns.,Sp.,KMB 4. Kartika Nurhayati, S.Kep.,Ns 5. Nikein Trisna H., S.Kep., Ns 6. Siska Dwi P., S.Kep., Ns 7. Meyta Dwi Yunitasri,S.Kep.,Ns 8. Syahtya Dzulandita, S.Kep., Ns 9. Pamela Ridzky, S.Kep., Ns 10. Nikmatul Khoiriyah, S.Kep., Ns 11. Iqbal Taufiq Ariansyah, S.Kep., Ns
5	ICU 5B2	1. Bangun Mukti, S.Kep.,Ns.,M.Kep. 2. Silfia Desi A, S.Kep.,Ns 3. Alfina Mghfiroh, S.Kep.,Ns 4. Syafrida Widya Nuryana, S.Kep.,Ns
6	STROKE UNIT	1. Andis Yuswanto, S.Kep., Ns., M.Kep 2. Muhammad Shulhan Azzuhri, S.Kep., Ns 3. Khoerun Asna, S.Kep., Ns 4. Aang Kunaifi, S.Kep., Ns.,M.Kep