

DAFTAR PUSTAKA

1. Wiguna IGNI, Putra DGSA. Pencegahan Infeksi Sekunder Pada Kasus Patah Tulang Terbuka. *Cdk*-285. 2020;47(4):265.
2. Dewiyanti, Kamriana, Zainuddin, Alwi, Rahmadani F. Pengaruh Edukasi Berbasis Video Terhadap Pengetahuan Balut Bidai Pertolongan Pertama Fraktur Tulang Pada Masyarakat Di Wilayah Kerja Puskesmas Polongbangkeng Selatan. *J Ilm Keperawatan (Scientific J Nursing)*. 2023;9(1):149–55.
3. Black, J dan Hawks J. No Title. R. N, editor. Keperawatan Medikal Bedah : Manajemen Klinis Untuk Hasil yang Diharapkan. Jakarta: Salemba Emban Patria; 2014.
4. Permatasari C, Sari IY. Terapi Relaksasi Benson Untuk Menurunkan Rasa Nyeri Pada Pasien Fraktur Femur Sinistra: Studi Kasus. *JKM J Keperawatan Merdeka*. 2022;2(2):216–20.
5. Nur Hidayat, Abdul Malik A, Nugraha Y. Assistancy in nursing care of medical surgical nursing for patients with musculoskeletal system disorders (Femur Fracture) in Anggrek Room, General Hospital of Banjar City. *Kolaborasi J Pengabdian Masy*. 2022;2(1):52–87.
6. Dewi E, Rahayu S. Kegawatdaruratan syok hipovolemik. *Ber Ilmu Keperawatan [Internet]*. 2010;2(2):93–6. Available from: <https://journals.ums.ac.id/index.php/BIK/article/download/3799/2459>
7. PPNI TPSD. Standar Diagnosis Keperawatan Indonesia. 3rd ed. Jakarta Selatan: DPP PPNI; 2017. 64 p.
8. Millizia A, Rizka A, Afriani D, Anastesi SMF, Kedokteran F, Malikussaleh U, et al. Level of Knowledge of Paramedics about Hypovolemic Shock at Cut Meutia General Hospital , North Aceh. 2023;6(April):244–50.
9. Hidayatulloh MN, Supriyadi, Sriningsih I. Pengaruh Resusitasi Cairan Terhadap Status Hemodinamik (Map), Dan Status Mental (Gcs) Pada Pasien Syok Hipovolemik Di Igd Rsud Dr. Meowardi Surakarta. *J Ilmu Keperawatan dan Kebidanan [Internet]*. 2016;8(2):222–9. Available from: <http://182.253.197.100/e-journal/index.php/jikk/article/view/376>
10. Andriati R, Trisutrisno D. Effect of fluid resuscitation on hemodynamic status of Mean Arterial Pressure (MAP) in hypovolemic shock patients in IGD balaraja hospital , Tangerang City. *Med Surg Concerns*. 2021;1(1):1–13.
11. Rahmawati I, Dilaruri A, Sulastyawati, Supono. The Role of Passive legs Raising Position in Hypovolemic Shock: A Case Report and Review of the Literature. *J Nurs Pract*. 2021;4(2):177–84.
12. Monnet X, Teboul JL. Passive leg raising: Five rules, not a drop of fluid! *Crit Care*. 2015;19(1):18–20.

13. Hutabarat E. The Effect of Passive Leg Raising towards Hemodynamics on Patient with Hypovolemic Shock at the Emergency Ward of Dustira Cimahi Hospital. *Int Semin Glob Heal*. 2017;271–4.
14. Yunirianita D. Open Fraktur Digiti Manus Dextra. 2020;1:1–73.
15. Association EN, Belinda B H, Polly Gerber Z, N MS MBA C. Keperawatan Gawat Darurat dan Bencana [Internet]. 1st ed. Kurniati A, Trisyani Y, Theresia SI, editors. Indonesia: Elsevier; 2018. Available from: https://books.google.co.id/books?id=sez3DwAAQBAJ&printsec=frontcover&source=gbs_atb#v=onepage&q&f=false
16. Leksana E. Dehidrasi dan syok. *Cdk*. 2015;42(5):391–4.
17. Nurarif AH, Kusuma H. Asuhan KC, NOC dalam Berbagai Kasus. Jilid 2. Rahil NH, editor. Yogyakarta: Mediacion Publishing; 2016.
18. Fountaine D, Hudak CM, Gallo BM. Keperawatan Kritis : Pendekatan Asuhan Holistik/Patricia Gonce Morton. Edisi 8. Jakarta: EGC; 2016.
19. PPNI TPS. Standar Intervensi keperawatan indonesia : Definisi dan Tindakan keperawatan. Edisi 1. Jakarta Selatan: DPP PPNI; 2018.
20. Jalil B, Thompson P, Cavallazzi R, Marik P, Mann J, El-Kersh K, et al. Comparing Changes in Carotid Flow Time and Stroke Volume Induced by Passive Leg Raising. *Am J Med Sci* [Internet]. 2018;355(2):168–73. Available from: <http://dx.doi.org/10.1016/j.amjms.2017.09.006>
21. Herdman TH, Kamitsuru S. Diagnosis Keperawatan Definisi dan Klasifikasi. Edisi 10. Jakarta: EGC; 2015.
22. Parahita PS, Kurniyanta P, Sakit R, Pusat U, Denpasar S. Management of Extrimity Fracture in Emergency Department. *e-Jurnal Med Udayana*. 2013;2(9):1597–615.
23. Krisanty P. Asuhan Keperawatan Gawat Darurat. Jakarta: Trans Info Medika; 2016.
24. Ilmu F, Universitas K, Tangerang M, Tangerang K, Evri Ulfianasari, Karina Megasari Winahyu AAAN. Jurnal Ilmiah Keperawatan Indonesia (JIKI) Fakultas Ilmu Kesehatan Universitas Muhammadiyah Tangerang. Cyberbullying dan Kecemasan Remaja Sebuah Stud Deskriptif. 2022;6(1).
25. Mesquida J, Gruartmoner G, Ferrer R. Passive leg raising for assessment of volume responsiveness: A review. *Curr Opin Crit Care*. 2017;23(3):237–43.
26. Beurton A, Teboul JL, Gavelli F, Gonzalez FA, Girotto V, Galarza L, et al. The effects of passive leg raising may be detected by the plethysmographic oxygen saturation signal in critically ill patients. *Crit Care*. 2019;23(1):1–10.
27. Sajidah J, Doli J, Donsu T. Pengaruh Passive Leg Raising (PLR) terhadap Perubahan Tekanan Darah pada Pasien dengan General Anestesi di RSUD

dr . Soedirman Kebumen The Effect of Passive Leg Raising (PLR) toward the Blood Pressure Change in Patients with General Anest. Caring J Keperawatan. 2020;9(1):60–8.

28. Maizel J, Airapetian N, Lorne E, Tribouilloy C, Massy Z, Slama M. Diagnosis of central hypovolemia by using passive leg raising. *Intensive Care Med.* 2007;33(7):1133–8.
29. He HW, Liu DW. Passive leg raising in intensive care medicine. *Chin Med J (Engl).* 2016;129(14):1755–8.
30. Kweon TD, Jung CW, Park JW, Jeon YS, Bahk JH. Hemodynamic effect of full flexion of the hips and knees in the supine position: A comparison with straight leg raising. *Korean J Anesthesiol.* 2012;62(4):317–21.
31. Hidayat AA. *Proses Keperawatan; Pendekatan NANDA, NIC, NOC dan SDKI.* Edisi 1. Health Books Publishing;
32. PPNI TPSD. *Standar Luaran Keperawatan Indonesia : Definisi dan Kriteria Hasil Keperawatan.* Edisi 1. Jakarta Selatan: DPP PPNI; 2019.