SELF-EFFICACY AND ABILITY TO PERFORM ACTIVITIES OF DAILY LIVING (ADL) IN APPENDICECTOMY POST-OPERATIVE PATIENTS

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Article Info	Abstract
DOI: https://doi.org/10.26751/ijp.v9i2. 2632	The incidence of appendicitis in Indonesia ranks highest among other abdominal emergencies. The cause is usually an obstruction in the lumen of the appendix and causes acute inflammation with perforation and abscess formation. Treatment of appendicitis can be done by
Article history: Received December 28, 2024 Revised February 22, 2025 Accepted February 22, 2025	surgery. Postoperative recovery restores normal physical, psychological, social, habitual, and daily activities. The ability to perform Activities of Daily Living (ADL) depends on cognitive, motor, and perceptual abilities, which can affect postoperative patients in mobilizing is a psychological factor, one of which is self-efficacy; someone who can mobilize early requires strong or high self-efficacy. This study aims to analyze the relationship between self-efficacy and ADL in appendicectomy postoperative patients. This study used a
Keywords: Activity Of Daily Living, Appendicectomy, Post- Operation, Self-efficacy.	correlational research design using a cross-sectional approach and purposive sampling technique. The variables in this study were self-efficacy and ADL ability of appendicectomy postoperative patients. This research was conducted at Sunan Kalijaga Demak Hospital in August 2024. The sample obtained was 57 people who met the criteria. This research instrument uses the General Self-Efficacy (GSE) questionnaire and the Care Dependency Scale (CDS) questionnaire—data analysis using the Spearman Rank Test statistical test. Based on the results of this study, we obtained a p-value of 0.351 (p<0.05). It can be concluded that there is a relationship between self-efficacy and ADL in postoperative patients at Sunan Kalijaga Demak Hospital. The results of this study can provide input to the nursing profession that self-efficacy can improve Activity of Daily Living (ADL) in postoperative patients.
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I. Introduction

According to (World Health Organisation, 2018), the incidence of appendicitis reaches 7 of the world's population. The incidence of acute appendicitis in developing countries is lower compared to developed countries. In Southeast Asia, Indonesia has the highest incidence of acute appendicitis, with a prevalence of 0.05%, followed by the Philippines at 0.022% and Vietnam at 0.02%.

The survey results in 2018 showed that the incidence of appendicitis in some parts of Indonesia is still high. In Indonesia, the number of patients with appendicitis is around 7% of the total Indonesian population of around 179,000 people, based on the Health Office (2018). Acute appendicitis is

one of the causes of acute abdomen and several indications for abdominal emergency surgery.

The incidence of appendicitis in Indonesia ranks highest among other abdominal emergencies (Amurwani, 2018). Surgery in Indonesia in 2012 reached 1.2 million people; an estimated 32% of them were laparotomy operations (Kemenkes RI, 2020).

The number of appendicitis cases in Central Java was 5,980, and 177 of them caused death in appendicitis patients (Central Java Health Office, 2018). The most common cause of death is increased germ growth, resulting in inflammation of the appendix (Arifuddin, 2017).

Based on data obtained from the Sunan Kalijaga Demak Hospital Medical Records, the incidence of appendicitis at Sunan Kalijaga Demak Hospital in December 2015 was 5 (0.003%) patients suffering from appendicitis out of a total of 1507 patients admitted to Sunan Kalijaga Demak Hospital. In 2016, the incidence of acute appendicitis at Sunan Kalijaga Demak Hospital in January-May was 101 patients; from the data above, it can be concluded that every month at Sunan Kalijaga Demak Hospital, there is an increase in the incidence of appendicitis. All of these patients underwent surgery or appendicectomy. (Sunan Kalijaga Hospital Medical Record Data 2016).

Research by Han Ms (2018) shows that an obstruction to the lumen of the appendix usually causes appendicitis. This can be from appendicoliths (appendiceal stones) or mechanical etiology. Appendiceal tumors such as carcinoid tumors, appendiceal adenocarcinoma, intestinal parasites, and hypertrophied lymphatic tissue are all known causes of appendiceal obstruction and appendicitis. Often, the exact etiology of acute appendicitis is unknown.

When the lumen of the appendix is obstructed, bacteria accumulate in the appendix and cause acute inflammation with perforation and abscess formation. One of the most popular misconceptions is the story of Harry Houdini's death. After being suddenly punched in the stomach, rumor has it his appendix ruptured, causing sepsis and immediate death. However, recent next-generation sequencing research revealed a much higher bacterial phyla in patients with complicated perforated appendicitis.

Treatment of appendicitis can be done by surgery. Appendiceal surgery is performed using appendectomy, which is an act of surgically removing the appendix. The response that arises after an appendectomy to remove the infected appendix is pain. Pain indicates that tissue damage occurs, and pain is subjective to each individual (Wijaya & Putri, 2018).

After surgery, patients often experience physical activity restrictions with a long recovery time and experience limited movement due to anesthesia or pain due to However, patients surgery. who have undergone surgery are expected to move to do activities (Kozier, 2018). Postoperative patients are expected to be able to perform self-care as quickly as possible because it can improve the patient's ability to move and can speed up the patient's day of care; if the patient has long mobility, it will cause several complications or health problems including the occurrence of decubitus, muscle stiffness, loss of muscle mass, blood circulation tension, respiratory disorders and peristaltic disorders and urinary disorders (Smeltzer, 2017).

According to (Hoyer et al., 2017 and Donkers et al., 2018), loss of muscle mass after surgery can be reduced through early mobility programs in the hospital. Patients can mobilize early after surgery, such as moving their legs in bed until they can get out of bed and walk to and out of the bathroom (Smeltzer, 2017).

One of the factors that affect the wound healing process due to appendiceal removal surgery (appendectomy) is the lack of / not doing ADLs. ADL is a major factor in accelerating recovery and preventing post-surgical complications. ADL is vital in accelerating days of care and reducing the risk of prolonged bed rest, such as decubitus, stiffness or tension of muscles throughout the body, impaired blood circulation, respiratory disorders, and peristalsis or urinary disorders (Carpenito, 2017).

The cause of the decline in ADL ability is that postoperative patients have not carried out daily activities but still depend on nurses and family because patients are afraid to move their lower extremities or are afraid of feeling pain, so their activities depend on others. One of the patient's needs is fulfillment in Activity of Daily Living (ADL), which is all patient activities in meeting the needs of life and self-care, which includes eating, drinking, toileting, bathing, dressing, writing, managing finances, and being able to use the telephone ((Zulfikar, 2018).

Postoperative recovery is to restore the normal state of physical, psychological, social, and habitual functions and daily activities; the earlier the patient gets out of bed and starts walking, eating, and drinking after surgery, the better it is to restore the patient's full health quickly. Performing ADLs depends on cognitive, motor, and perceptual abilities (Mlinac, 2017).

The inability to fulfill ADLs in postoperative patients has an impact on wound healing to be longer, patient discharge to be slower, and quality of life to be worse; physical abilities after surgery are useful in determining the decline in ADLs and prolonged disability. Individuals can generally manage ADLs so that they can live without assistance from others (Smeltzer, 2017).

According to (Lina, 2019), psychological factors can affect postoperative patients in mobilizing, one of which is self-efficacy; someone who can mobilize early requires strong or high self-efficacy. Self-efficacy is a belief in individuals in terms of thinking, motivating themselves, and how to act. Self-efficacy can affect a person's choices, the effort they will make, the way they behave, and their perseverance and seriousness. It can also affect one's thoughts and feelings. A person's lack of self-efficacy tends to have the thought that the tasks looked difficult to undertake (Kozier, 2018).

According to Anindita et al. (2019) research, good self-efficacy tends to be obedient in physical exercise. If a person's self-efficacy improves, the individual will be obedient in doing the indicated physical exercise. According to research conducted by Siswiyanti (2017), one of the problems that often occur after postoperative patients are bed rest for a long time for the healing process, so these conditions can make patients dependent on carrying out their daily activities needs. In this case, the researcher will only focus on examining 1 case, namely postoperative appendicitis, while previous researcher examined all major postoperative cases.

The results of a preliminary study that have been completed by researchers at the Sunan Kalijaga Demak Regional General Hospital show the number of patients who have undergone major postoperative measures in the last three months in 2022 to 2023 from December are 56 people, in January 44 people and in February 42 people. The total number from December to February was 141 patients, and researchers conducted direct interviews with nine patients who had undergone surgery regarding their ability to carry out daily activities.

It was found that the average patient experienced obstacles in toileting and moving. These obstacles are influenced by patient psychological factors, namely anxiety, and fear of feeling pain at the surgical site when moving. Patients after surgery and transferred to the treatment room for 1-2 days will be mobilized early with the help of nurses to avoid muscle stiffness in patients for interventions carried out by researchers to teach to tilt right and left first, then after being able to tilt right and left can learn to sit.

In a study by Nur Aas Aisyah et al. (2022), as many as 62 respondents who had undergone major surgery showed that the mean early mobilization of patients was 2.02 with a standard deviation of 2.53. The mean value of early mobilization ability after major surgery is less than half of the maximum value with a 95% CI value in the range of 1.37-2.66, while the average post-major surgery self-efficacy respondent is 36.56 with a standard deviation of 3.15. The mean value is close to the maximum value, with a 95% CI of 35.76-37.36. The analysis of the relationship test of self-efficacy and early mobilization showed that the p-value = 0.172(p> 0.05), so there was no relationship between self-efficacy and early mobilization post-major surgery patients. correlation coefficient value (r) = 0.181indicates that the relationship between selfefficacy and early mobilization in major postoperative patients is positive, with a very weak level of relationship.

The results of the study are by the theory presented by Darmojo (1999) that changes in health status can affect the level of dependence on basic daily activities, which can be related to individual characteristics, namely the time needed for care so that implications are obtained such as discoveries

to overcome the problem of self-efficacy and ADLs after appendicectomy postoperative patients, with patient research will increase knowledge to reduce the occurrence of morbidity and mortality rates so that patients do not need a long time in treatment so that scientific development will occur with much research.

The role of nurses in the study is as educators to educate and teach patients about daily activities after surgery, and here, they are also researchers because nurses research the relationship between self-efficacy and ADL in postoperative appendicectomy patients. This study aims to analyze the relationship between self-efficacy and ADL in appendicectomy postoperative patients.

II. METHODS

The research design in this study is correlation analysis. The independent variable in this study is self-efficacy. The dependent variable in this study is Activity Of Daily Living (ADL).

This research was conducted at Sunan Kalijaga Demak Regional General Hospital on 1 August-30 August 2024 with the title of the relationship between Self-efficacy and Activity Of Daily Living (ADL) in postoperative appendectomy patients.

The sampling technique used in this study was purposive sampling. The samples used in this study were 57 patients. With inclusion criteria, namely postoperative appendicectomy patients, patients with ≥ 18 years, patients who have been hospitalized for 24-48 hours, and conscious patients with compliments. The exclusion criteria are blind, deaf, and speech-impaired patients and patients who experience psychological disorders (mental disorders).

Researchers obtained data using the General Self-Efficacy (GSE) questionnaire, which was translated and modified by Puspita 2018. The GSE questionnaire has 10 question items. Each question describes the dimensions of self-efficacy based on Bandura's theory, namely indicators of magnitude (3 items), strength (2 items), and generality (5 items). The GSE questionnaire

uses a Likert scale. The score of each statement in the questionnaire consists of scores 1 = strongly disagree, 2 = disagree, 3 = agree, and 4 = strongly agree. After completing the questionnaire, each statement is added; the lowest score is 10, and the highest score is 40. In this study, the researcher will accompany the respondent when filling out the 10 items contained in the questionnaire. Researchers will explain each question item to respondents to make it easier for them to understand and avoid bias. The researcher used the Care Dependency Scale (CDS) questionnaire in the ADL variable. The CDS questionnaire has 15 question items, each with a Likert scale of 1 to 5. Value 1 = completely dependent, value 2 = very dependent, value 3 = partially dependent, value 4 = somewhat independent, and value 5 = independent. The total score of this questionnaire is calculated by summing the answer value for each item. Primary data can also be obtained from the characteristics of respondents, namely name, age, marital status, gender, occupation, and education. Secondary data in the study were obtained from records in the Soka Room of Sunan Kali Jaga Demak Regional General Hospital, namely the number of visits, the operating schedule, and the number of cases of postoperative patients. The analysis test in this study used the Spearman test.

Ethical considerations in research with respondent consent, data confidentiality, and respect for the rights and dignity of respondents.

III. RESULTS AND DISCUSSION

A. Characteristics of respondents:

Table 1. Frequency distribution of age, gender, education, occupation, and marital status of respondents at Sunan Kalijaga Demak Regional General Hospital (n=57)

Type	Category	f	%
Age	20-35 years	44	77.2
	36-60 years	13	22.8
Gender	Man	24	42.1
	Woman	33	59.9
Education	No school	4	7.0
	Elementary	5	8.8
	school		
	Junior High	3	5.3
	School		

Type	Category	f	%
	Senior High	25	43.9
	School		
	DIII/Graduate	20	35.1
Work	Laborer	3	5.3
	Private sector	20	35.1
	employee		
	Etc	10	17.5
	Farmer	6	10.5
	PNS	1	1.8
	Does not work	8	14.0
	Self-employed	9	15.8
Marital	Not married yet	23	40.4
Status			
	Marry	34	59.6
	Total	57	100

Based on table 1. explained that most respondents were aged 20-35 years, namely 44 respondents (77.2%). It was found that the majority of respondents were female, namely 33 respondents (59.9%). Most respondents had a high school educational background, namely 25 (43.9%). Some respondents worked as private employees, namely 20 (35.1%). Most respondents were married, namely 34 respondents (59.6%).

The results showed that most respondents were between 30 years old, namely 39 people (68.4%). In line with research (Dewi, Hakam, and Murtaqib 2022), the results showed that most respondents were between 30 years old, namely 39 people (68.4%). For the gender of the respondents, the results showed that half of the respondents were female, namely 33 respondents (59.9%). Female patients have three times the risk of surgery compared to male patients because there are women who want to give birth to children without pain by surgery. (Hijazi et al. 2018).

The results above align with the research (Dewi et al., 2022). The study's results of female respondents were more than men's, respondents (61.4%). 35 respondents' education level was stated to be half of the respondents with a high school background, namely education respondents (43.9%). The results of this study are in line with research (Pahlawati & Nugroho, 2019), which reported that some respondents who did not go to school (10.8%), elementary school (36.0%), junior high school (14.4%), high school (31.5%), and college (6.3%). The study results explained that some respondents worked as private employees, namely as many as 20 respondents (35.1%).

This proves that higher activity at work will impact the physical and high levels of stress, which can later result in less focus on the road, which can result in accidents, this is if an accident occurs. Surgery will be carried out, such as fractures, abdominal trauma, etc. The explanation above is in line with research (Wafa). The explanation above is in line with research (Wafa, 2023) showing that the majority of respondents' current jobs are private employees, as many as 16 people (33.3%), while the least are civil servants, as many as one person (2.1%). The study results stated that half of the respondents were married, namely 34 (59.6%). The results of the study (PURBA 2019) showed that the majority of respondents in the married category were 56 people (80.0%), the results of the study (Lalu Irwandi, 2020) Based on marital status, it was found that 23 respondents (60.2%) were married, 12 people (31.6%) were not married, and three people (7.9%) were widows/widowers.

B. Self-Efficacy

Table 2. Distribution of results of self-efficacy analysis of respondents at the Sunan Kalijaga Regional General Hospital, Demak

Variable	Mean	SD	
Self-efficacy	30.56	4.709	

Based on Table 2, the average self-efficacy is 30.56, with a standard deviation of 4.709.

C. Activity Of Daily Living (ADL)

Table 3. Distribution of results of activity of daily living (ADL) of respondents at the Sunan Kalijaga Regional General Hospital, Demak

Variable	Mean	SD
ADL	51.33	12.641

Based on Table 4.3, it is found that the average ADL frequency is 51.33, with a standard deviation of 12.641.

The results of the frequency distribution study of self-efficacy averaged 30.56 with a standard deviation of 4.709, a minimum number of self-efficacy values of 13, and a maximum value of 40. Self-efficacy is a belief in individuals in terms of thinking, motivating themselves, and how to act. Self-efficacy can affect a person's choices, the efforts they will make, the way they behave, and their perseverance and seriousness. It can also affect one's thoughts and feelings. A person's lack of self-efficacy tends to have the thought that the tasks looked difficult to undertake (Berman et al., 2018).

The results of this study are in line with research conducted by Hellström et al. ((Erlina, 2020)), where the role of selfefficacy in stroke patients shows the results that stroke patients with low self-efficacy show a tendency to have functional abilities and slower improvement than individuals with patients who have high self-efficacy. Research (Anindita, Diani, and Hafifah 2019) shows good self-efficacy tends to have compliant behavior in physical exercise. If a self-efficacy improves, person's individual will be obedient in doing the indicated physical exercise.

The results of the frequency distribution study of Activity Of Daily Living (ADL) averaged 51.33 with a standard deviation of 12.641, with a minimum number of 26 and a maximum of 71. After surgery, patients often experience physical activity restrictions with a long recovery time and experience limited movement due to anesthesia or pain due to surgery. However, patients who have undergone surgery are expected to be able to move to do activities by doing ADL (Berman et al., 2018).

ADL is a major factor in accelerating preventing post-surgical and complications. ADL is vital in accelerating days of care and reducing the risk of prolonged bed rest, such as decubitus, stiffness or tension of muscles throughout the body, impaired blood circulation, respiratory disorders, and peristalsis or urinary disorders. The cause of decreased ADL ability is postoperative patients as long as they have not done daily activities, mobilization is carried out but still depends on nurses and family because patients are afraid to move their lower extremities or are afraid of feeling

pain so that their activities depend on others (Yuda, 2019). This study's results align with the research (Indanah et al., 2021). The results show that maternal independence is influenced by parity. First-time mothers are more likely to feel afraid than mothers who have given birth more than once. Maternal independence mainly involves taking care of the genital area. Moreover, most people who do passive early mobilization show heavy dependence (26.5%).

D. The relationship between self-efficacy and Activity of Daily Living (ADL) in post-appendectomy surgery patients

Table 4. The relationship between self-efficacy and activity of daily living (ADL) in postoperative patients at the Sunan Kalijaga Regional General Hospital, Demak

Variable	Standard error	Correlation confection	p-value
Self-efficacy	.000	.351	0.007
ADLs	.132	•	

Based on Table 4 above, the statistical analysis results of the rho sperm test obtained p value = 0.007, which is smaller than the significance level value α <0.05. then Ho is rejected, and Ha is accepted. Meanwhile, the strength of the relationship is based on the p-value (Rho), namely .351; this means the strength of the relationship is weak. It can be concluded that there is a relationship between self-efficacy and Activity of Daily Living (ADL) in post-appendectomy surgery patients at the Sunan Kalijaga Regional General Hospital, Demak.

The research shows the relationship between self-efficacy and Activity of Daily Living (ADL) in postoperative patients at the Sunan Kalijaga Regional General Hospital, Demak. The statistical analysis results of the rho sperm test obtained p value = 0.000, smaller than the significance level value a <0.05. then Ho is rejected, and Ha is accepted. Meanwhile, the strength of the relationship is based on the p-value (Rho), namely .351; this means the strength of the relationship is weak.

The above results are in line with research (Husni et al., 2023), with the results of the hypothesis test showing that the P-value is

0.005 < 0.05, so Ho is rejected and Ha is accepted, which means that there is a significant relationship between self-efficacy and activity of daily living in post-caesarean section mothers. So, it is important to have high self-efficacy; mothers' self-confidence level after SC surgery will help them complete activities of daily living (ADL). Increasing self-efficacy can be done by providing motivation and distributing leaflets in hospitals. Patients with high self-efficacy will have the confidence to perform the recommended rehabilitation actions after post-surgery, impacting their independence in carrying out daily activities as before (Sitorus et al., 2020). This shows that selfefficacy influences the independence of performing ADLs in postoperative patients. One of the roles of nurses in the postoperative phase is to provide physical and psychological services, such as selfefficacy, because it can influence confidence motivation regarding postoperative rehabilitation actions. Apart from that, health workers, especially nurses, can provide interventions on the psychological aspects of postoperative patients, such as education to increase postoperative patient self-efficacy so that it positively impacts rehabilitation actions for postoperative patients. It can be concluded that there is a relationship between self-efficacy and Activity of Daily Living (ADL) in postoperative patients at the Sunan Kalijaga Regional General Hospital, Demak.

IV. CONCLUSION

The results of research on the relationship between self-efficacy and Activity of Daily Living (ADL) in postoperative patients at the Sunan Kalijaga Regional General Hospital Demak. The results of this research can provide input to the nursing profession that self-efficacy can increase Activity of Daily Living (ADL) in postoperative patients.

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