

**REDUCTION ANXIETY PATIENTS IN *ONE DAY SURGERY*
BY MUSIC THERAPY**

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ABSTRACT

Introduction: Anxiety increases the sympathetic stress response of Patients before surgery. The Aimed of the study to analyze Decrease anxiety evel on a one-day surgery Patients with music favored. **Method:** The study design was a quasi-experimental design with a Randomized Controlled Trial of the double-blind. The large samples each group amount of 20 people with a comparison of men and women, respectively. Dependent variable is the level of anxiety. Independent Variable music is favored. R esearch instruments include State-Trait Anxiety Inventory; Music, MP4, headphone. Data analysis using T test. **Result** The results in Patients with ODS in Surabaya Hajj Hospital between treatment and control groups Showed a difference in mean Decrease: 1) anxiety ($p = 0.000$). Patients treated group experienced an av erage Decrease of 6:05 anxiety The average score pre-test anxiety using STAI in patients treated group at 63, 25 ($SD \pm 3.52$), while the control group of 59.25 ($SD \pm 3.492$). **Discussion:** anxiety is increasing in patients One Day Surgery because has a short preparatory period, little time orientation in the unknown operating environment and isolated. Music waves induce vibrations in the eardrum stimulus transmitted to the SSP. When listening to music can make the time seemed to stop for a patient can be carried in a song lyric and follow sing even carried away in the atmosphere of the song lyrics. Suggested nurses provide patient comfort before surgery ODS use music song / type of rhythm he liked

Keyword: anxiety, music therapy, one day surgery

INTRODUCTION

Anxiety is a common psychologic symptom reaction which is often occurs in patients who underwent surgery (Pfitser, 2011; Potter & Perry, 2005). Anxiety increased in patients undergoing surgery *One Day Surgery* (a day). Anxiety extreme caused the cancellation as well as surgical complications *One Day Surgery* (ODS) (Bisri 2007 in Yendi, 2012)

Advances in science and technology affects Indonesia Economic surgery and anesthesia techniques. This led to shorten the days of treatment after surgery. Nowadays there are more surgical procedures that could be done in a day (*ODS*). Surgery *One Day Surgery* is a surgical procedure planned for the patient and go home on the same day (Cooke *et.al.*, 2005). The main goal of surgery *One Day Surgery* is the implementation of more effective and more economical surgical procedure to provide

benefits to patients, hospitals and the payer (*third party payrs*) (Yendi, 201 1).

Patient who underwent surgery within one day (ODS) had only preparation in a short time period, less time orientation in the operating unknown environment and isolated. This condition caused high anxiety compared with planned surgery (elective).

Anxiety usually occurs before surgery when patients were waiting for surgical procedures (Wetsch., *Et al.* 2009; Potter & Perry, 2005). Patient before surgery conducted may experience anxiety associated with life safety, anesthesia, ignorance about the operating procedures and Another threat to the image of the body, pain after surgery, consciousness after surgery (Pfisters 2011 ; Smeltzer, *et.al.* 2009; Sobur 2003 in Zuchro, 2012).

Several domestic and foreign researchs studies the patient's anxiety before surgery. Wetsch, *et al.* (2009) in the *British Journal of Anaesthesia* (2009) reported a 38.3% One Day Surgery patients had

anxiety before surgery. Pfister (2011) reported a total of 91% of patients experience anxiety before surgery.

Anxiety (*anxiety*) is an unpleasant fear and can not be justified is often accompanied by physiological symptoms, perceived by the patient pre-operative (Smeltzer et al, 2009). Research shows that anxiety affects both physical and psychological. (Leach *et al.* 2000). Anxiety also increase sympathetic stress response resulting in hypertension, tachycardia, myocardial infarction, hyperventilation and panic. Response worried that a prolonged effect on anesthesia and surgery so that the operation can not be done. The final result of the operation depends on the patient's condition before surgery (Yendi, 2011). Therefore nurses as the one who are directly involved to prepares patient mental and physical needs before surgery.

Nurses can apply the *theory of Katherine Kolcaba comfort* in providing comfort patients needed, before one day surgery occurred. Nurses can perform compliance to the integrity of convenience (*Relief*) psychospiritual Patients were included to avoid anxiety, improve physiological parameters including blood pressure and pulse before surgery (Kolcaba, 2011; Wolf, 2011). Therefore, it can reduce the cancellation as well as outpatient surgical complications.

Many studies on the use of music as an intervention has been performed in a wide variety of order hospitals (oncology, obstetrics, dentistry, gynecology, pediatrics) has been studied since the 1990s. Research Cooke et.al. (2005) in Australia and Ni, et.al (2011) in Taiwan reported that music interventions may reduce the patient's anxiety before surgery and improve physiological parameters.

McCaffery (1990) in Cooke *et al.* (2005) argued that the music is one of the most effective techniques of sensory distractions that can promote relaxation. Music is a universal language for people who are very effective in the treatment. One Day Surgery patients can

do themselves and choosing favored music while waiting for surgery.

The theoretical basis for music as justified by Thaut (1990) that hearing stimulation by the music as mediating perceptual response. Music increases feelings of physical and relaxation. The feeling of tension, palpitations often appear while waiting for the operation in the preparation room. Patients can eliminate feelings of tension, anxiety and fear by refocusing attention by listening to music so that the relaxation response meningkat.

Operation quickly and simply aimed at minimizing tension but very little attention to patients stress response before *One Day Surgery* (Wetsch, *et al.* 2009).

The general objective of this research is to analyze One Day Surgery patient anxiety and pain reduction at Hajj Hospital of Surabaya. Special objective of this research is to analyze One Day Surgery patient anxiety and pain reduction.

Research Benefits: 1) For a service institution, this research acts as input additional intervention in the fixed procedure which had to be done nurses in patients undergoing outpatient surgery and One Day Surgery based on facts (evidence based). And to improve the quality of patient care can improve patient satisfaction in the health care institution; 2) for patients provide peace and reduce anxiety, blood pressure, pulse and pain scale in preparation for the *one-day Surgery*

RESEARCH METHOD

This type of research is a quasi-experimental design was Randomized Controlled Trial with single blind.

The population is all adult patients undergoing surgery One Day Surgery at Hospital Haji Surabaya. Total population an average of 20 people per month. The samples are mostly adult patients undergoing surgery One Day Surgery. Sample research in the group into intervention and control groups. Sampling using inclusion sample criteria as follows: Ages 18-60 years, ASA I-III, The whole surgical

procedure *One Day Surgery*: 1) Patients who underwent surgery in and out on the same day; 2) All types of anesthesia (local, regional, and general); 3) Patients can read and write

Large samples were taken based on previous research as much as 40 patient, each group of 20 votes with the number of men and women in each group in the amount of a balanced (equal).

Dependent Variable research was *One Day Surgery Anxiety patients*. Variables Independent research was the most favored songs.

The research instruments used were:

1. Anxiety Data Measurement using standard questionnaires / standards ie *The State-Trait Anxiety Inventory (STAI) Form Y* translated into Indonesian (Wetsch, *et al.*, 2009).
2. Headphone
3. Mp4 in a volume of 12 to 14
4. Music that contains soundtrack patients

Music provided to patients set as follows:

1. type of music (genre) have been selected according to the type of songs and singer who hits today.
2. Each song / music used in though using a computer program for LINUX *Auda city*.
3. Songs in the frequency of 44100 Hz, 32 bit float rhythm, intensity / audible -69 to -10 db (average -24 dB)
4. Tools: Free Open Source Software For Gnu / Linux "Audacity"

Data collected through the following ways: Grouping of samples according to the criteria in the control group and the treatment by the research assistants who have been trained : 1) In the treatment group s Meanwhile, before induction of anesthesia performed measurements of anxiety and pain level to 1 before surgery; 2) The intervention group was asked to choose the type of music and songs of the most preferred based on the type of music and singers who provided the team, then asked to listen to music through headphones for 30 minutes; 3) The control group performed measurements of anxiety

and pain level to 1 before the operation and then wait for 30 minutes and treated as a routine procedure 4) Once a patient listening to music like before the surgery Measurement of anxiety

Management collected data do sorting, editing and tabulating. The data have been tabulated and then do: Normality Test variable data to be tested using the *Kolmogorov-Smirnov* test demographic characteristics between treatment and control groups using *Chi Square*. The difference decreased anxiety and pain levels in both groups using *T-test*. All of the data analysis was performed using 95% confidence level ($\alpha = 0, 05$)

RESULT

The demographic characteristics of patients who underwent *One Day Surgery* (ODS)

Research results in shown the demographic characteristics of the patients in both groups as follows:

The sex ratio of men and women in each group was the same ie 1: 1. In this study the number of male patients and women undergoing ODS in hospital Haji Surabaya in both groups was the same, respectively as many as 10 people , Results of the test of proportionality group with Fisher's exact test showed no significant gender differences in the two groups ($p = 1.000 > \alpha = 0.05$)

Most patients in the treatment group at home ODS hospital Hajj Surabaya aged 18-29 years by 3 to 5% (7). Most control group patients age 30-39 years is 35% (7) and the least were patients aged 60-66 years at 5% (1). Results proportionality test Chi Square test group showed no difference in age between the group treated with control ($p = 0, 685 > \alpha = 0.05$).

In most patients the treatment group had high school ODS as much as one fourth (70%), the rest is elementary education as much as 3 people (15%) and S1 as many as 2 people (10%). Patient education control group

mostly an S1 many as six people (30%) and the least was S2 by 1 person (5%). Results proportionality test Chi Square test group showed no difference in educational levels between the group treated with control ($p = 0.123 > \alpha = 0.05$). group treatment most patients ODS work as self-employed as many as eight people (40%). In the control group the most is not working as many as eight people (40%). Results proportionality test Chi Square test group showed no difference between the work of the group treated with control ($p = 0.077 > \alpha = 0.05$).

In the intervention group of mostly acknowledgment as many as 19 people (95%) are Muslims and the rest 1 (5%) Christian / Catholics. Patients in the control group was entirely Muslim. Proportionality test results with Fisher's exact test showed no religious

differences between the treatment groups with the control ($p = 1.000 > \alpha = 0.05$).

Research results in Table 4 indicates the highest purpose of the use of music for patient treatment and control group was aiming for a relaxation of 40% (8) and the least was for the purpose of religious activity by 1% (5). The test results showed no difference in the intended use of music between the two groups ($p = 0.724 > \alpha = 0.05$).

Type of music preferred by the patient treatment group was the song of nostalgia Indonesia by 25%, songs campursari and new age (music band now) respectively by 20%. Patients group control of most of the most liked pop music Indonesia by 45% (9). The test results showed no difference in the type of music the most favored patients in both groups ($p = 0.318 > \alpha = 0.05$) as shown in Table 1

Table 1 Objectives user's music and music of the most preferred type of patients undergoing ODS in Haji Hospital Surabaya

variable	treatment group (n = 20)		Control group (n = 20)		P
	f	%	f	%	
Intended use Music					
1. relax	8	40.0	8	40.0	0.724
2. more Enjoy	4	20.0	5	25.0	
3. Fill the free time	2	10.0	4	20.0	
4. reduce stress	5	25.0	2	10.0	
5. religious activities	1	5.0	1	5.0	
Most preferably Genre					
1. Campursari	4	20.0	2	10.0	0.318
2. dangdut	-	-	2	10.0	
3. Religion Islam	1	5.0	1	5.0	
4. pop Indonesian	3	15.0	9	45.0	
5. Rock	2	10.0	1	5.0	
6. pop West	1	5.0	-	-	
7. nostalgia Indonesian	5	25.0	3	15.0	
8. Nowadays music	4	20.0	2	10.0	

Table 2 Opinions About Music Therapy Treatment Group Provided to the Patient In Hospital Haji Surabaya ODS, from August to November 2013

opinion patient	f	%
1. Happy and fit to listen to songs are given	15	75.0

2.	All patients favorite song	2	10, 0
3.	Most of his favorite songs	2	10, 0
4.	A small part of her favorite song	1	5, 0

Results of patient data collection treatment group who had been given music therapy majority (75%) expressed pleasure and match the songs are given, as many as 10% said all the songs are given is a favorite patient, and only 5% of patients who expressed a fraction songs the play is a favorite (table 2).

Effect of Music Therapy in Anxiety Reduction *One Day Surgery* Patients

The results in Table 4 showed significant differences in the average anxiety pre-test and post test in the treatment group ($p = 0.001 > \alpha = 0.05$). The average anxiety ODS patients who received music therapy in the pre-test was 63, 25 (SD \pm 3.52) and after receiving music therapy (post test) decreased to 57, 35 (SD \pm 4, 44).

Table 3 Differences Mean Anxiety Pre Test and Post Test At Pasie n ODS That Got Not Got Therapy And Music in Hajj Hospital Surabaya

Worry	Mean \pm SD		t	p
	pre test	Pos tests		
treatment group	63, 25 \pm 3, 52	57.35 \pm 4.44	13.039	0,001
Control group	59.25 \pm 3.49	60.90 \pm 6.0 0 8	-1.212	.240

Table 4 Test Results Effect of Music Therapy Against Decrease Anxiety *One DaySurgery* Patient In Hospital Hajj Surabaya

Worry	STAI Mean \pm SD		t	P
	treatment group	Control group		
reduction	-5.90 \pm 2.024	1.65 \pm 6, 089	5.2 6 2	0,001

On the control group there was no significant difference in the average anxiety pre-test and post test ($p = 0.240 > \alpha = 0.05$). The average score of the patient's pre-test anxiety ODS in Hajj Hospital Surabaya who did not receive music therapy at 59.25 (SD \pm 3.492) and during post test increased to 60.90 (SD \pm 6.008) as in table 3.

Results of analysis using independent sample test showed a significant difference in the average reduction in patient anxiety ODS Hajj Hospital Surabaya between treatment and control groups ($p = 0.000 > \alpha = 0.05$). Patient treatment group who received music therapy experienced a decrease in average anxiety of 5.90 (SD \pm 2.024) whereas in the control group who did not receive music therapy actually increased anxiety average of 1.65 (SD \pm 6.089).

DISCUSSION

Research results was shown their anxiety in patients Hajj Hospital Surabaya ODS in both treatment and control groups. The average score pre-test anxiety using STAI in patients treated group at 63, 25 (SD \pm 3.52), while the control group of 59.25 (SD \pm 3.492). Average pre-test anxiety scores in the treatment group and the control the above shows that moderate anxiety (maximum score 80).

This is in accordance opinions Bisri (2007), quoted by Yendi (2012) that anxiety is increasing in patients undergoing surgery *One Day Surgery*. Patient who underwent surgery in one day (*one day surgery*) only has a short preparatory period, little time orientation in the unknown operating environment and isolated. These conditions cause anxiety higher than the operation planned (elective).

Anxiety usually occurs before surgery when patients were waiting for surgical procedures (Wetsch., *Et al.* 2009; Potter & Perry, 2005). At this time the nurse can meet the needs of comfort (*Relief*) psychospiritual patients including reduced anxiety before surgery (Kolcaba, 2011; Wolf, 2011). Nurses can provide nursing interventions (*Comfort Measures*) one form of music therapy to reduce patient anxiety before surgery one day Surgery as applied in this study.

Research results in 3 indicate a significant difference in the average decrease patient anxiety ODS in Hajj hospital Surabaya who received music therapy with who did not receive music therapy ($p = 0.000 > \alpha = 0.05$). Patients who got the treatment group music therapy experienced a decrease in average anxiety of 5.90 ($SD \pm 2.024$) whereas in the control group who received music therapy showed precisely the average anxiety increased by 1, 65 ($SD \pm 6, 089$) as shown in table 3.

It is proven that music therapy can lower patient anxiety before undergoing surgery one day (ODS). Research that proves the benefits of music for healing / health very much at all. One of the benefits of music is having the effect of distraction. The perception of music auditori occurred in temporal lobe forwarded to the thalamus, midbrain, poud, amygdala, medulla, and hypothalamus (Thaut, 1990). Stimulus music increases the release of endorphins by the pituitary gland, the increase in electrical activity in the brain that spreads well connected to the limbic and autonomic control center of the brain centers result in diverting attention away from pain and reduce anxiety (Campbell, 2002).

In general, music waves induce vibrations in the eardrum stimulus transmitted to the SSP. Music has the function of calming the mind and emotions that stimulate alpha and beta waves that affect SSP pressing relax and lull. Music therapy against stress hormones so soothing and relaxing. patients can be more relaxed and enjoy the songs are given.

Busy operating room environment makes patients experiencing tension. Music helps soften the tension of the operating room atmosphere is busy and stressful. In addition to music therapy can change the perception of the patient group treated on time. When listening to music can make the time seemed to stop for

a patient can be carried in a song lyric and follow sing even carried away in the atmosphere of the song lyrics. Music makes the time seemed to stop thus patient's treatment group did not feel the waiting time operation.

In this study, music therapy interventions provided in accordance with the recommendation of the use of music interventions on clinical order are: 1) the music is soft and slow around 60-80 beats per minute; 2) The maximum volume level of 60 dB; 3) patients choose their own with the instructions; The minimum duration of the play 30 minutes long; and 4) measurement, follow-up and documentation of the effects (Campbell, 2002; Nilsson, 2008).

Music is a universal language. Most of the people love music. The results in 2. The third study showed as much as 75% (15 of 20) in the treatment group were given music therapy was pleased and suited listen to songs that are given. And more as many as 10% said all or most of the songs and the songs are given a favorite, and only a small proportion (1%) stated a little song he liked. Additionally in table 4 contained 40% (8 of 20 patients) treatment group patient's stated goal to use music for relaxation and by 2 to 5% use of music to reduce stress.

In the control group there was no significant difference in the average anxiety pre-test and post test ($p = 0.240 > \alpha = 0.05$). The average score of the patient's pre-test anxiety ODS in Hajj Hospital Surabaya who did not receive music therapy at 59.25 ($SD \pm 3.49$) and when the post test increased to 60.90 ($SD \pm 6.018$). Stocking of average post test anxiety was increased by 1, 65 ($SD \pm 6.089$) as in table 3.

This can be explained the cause of the increase in the average scores of anxiety in the control group, among others, are busy operating room environment to make the patient increasingly tense, waiting a long time to make the patient feel running time minute seemed hours, the anxiety increases as the operation time is getting closer, the patient's mental preparation for a short one-day surgery, there is no support officer, nurse unfriendly act preparation procedure just surgery alone. All of these factors lead to patient discomfort and increase anxiety. High anxiety and prolonged lead to complications and the cancellation of the operation (Bisri 2007 in Yendi, 2012).

According Kolcaba in theory is that patients need physical comfort, psychospiritual, sociocultural and environmental before operasi. Kolcaba in theory mention because it requires the intervention fulfillment of comfort for patients who will undergo surgery. The assumptions developed by Kolcaba that comfort is a concept that has a relationship strong with care science. Nurses have Gives comfort to the patient and his family through intervention by the orientation measurement comfort. Consolation action performed by a nurse will strengthen patients and families who may feel like they are at home aloneso that patients feel comfortable and calm before surgery (Masters, 2013; Kolcaba, 2011).

CONCLUSION AND RECOMMENDATION

Based on the results of the study can be summarized as follows: One Day Surgery Patients decreased anxiety after listening to his favorite music. Patients who did not listen to his favorite music experienced an increase in average anxiety

Some of the things recommended are for nurses operating room nurses should assess the level of anxiety before and after surgery and documented and meet patients comfort by providing an alternative nursing actions before surgery include music therapy

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