

## Research Article

# Top ten caring needs of emergency department patients in Banyumas, Central Java province, Indonesia: patient's needs and cultural approach

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## ABSTRACT

**Background:** Nursing care based on characteristic and concept of caring will give positive impact to quality of care. Application of caring in nursing must correspond to local cultural value and patient's needs. Objective this research explored the caring needs for patients in emergency unit of three district general hospitals (Rumah Sakit Umum Daerah/RSUD) in Banyumas area, Central Java Province, Indonesia.

**Methods:** This need assessment research involved 50 emergency unit patients from three hospitals in Banyumas. Data was collected through interview to complete the list of patient's caring needs in emergency department. Data were analysed through content analysis, validated by five emergency nursing experts and practitioners.

**Results:** The ten most common caring needs of patients in emergency department included: prompt and responsive care; clear information delivery; friendliness, politeness and fairness; clarity and simplicity of administration; clean and comfortable room; short waiting time for care and admission to ward; competent in procedures; providing care, pray and motivation to patients; complete facility and devices; and room safety.

**Conclusions:** Caring needs of emergency patients in Banyumas area district general hospitals encompass administration, behavioural and environmental aspects. This result can be considered by hospitals to improve the quality of care in emergency department. Future researches shall be done to acquire more comprehensive measurement tool of caring, involving administration, behavioural and environmental aspects in emergency department.

**Keywords:** Need assessment, Nurse caring, Emergency department patients

## INTRODUCTION

Globalization has influenced reformation, transformation and cultural integration in world societies on various arrangements.<sup>1</sup> The beginning of ASEAN Economic Community (AEC) in 2015 becomes both opportunity

and challenge to all endeavours in Indonesia, including health. Consequently, hospitals as healthcare institutions are expected to provide quality and affordable care to all layers of society.<sup>2</sup>

The quality of health care in general is strongly linked to the care and number of nurses. The percentage of nurse workforce is ranging from 40 to 60 percent, considerably larger than other health professionals in the hospital. Therefore, the quality of healthcare is mostly determined by nursing care quality.<sup>3</sup> Nurses who meet the criteria of caring in attitude and behaviour will ensure the provision of quality nursing care in the hospital.

Caring in nursing care is a humanistic knowledge and the core of ethical as well as philosophical nursing practice. Caring in nursing care becomes the essence of nursing based on the values of virtue, care, compassion to self and others, and respect to one's spiritual dimension.<sup>4</sup> Caring implementation involves administrative and environmental aspects.<sup>5,6</sup> Various countries have been recently developing caring in nursing care for transcultural context.<sup>1</sup> Caring in nursing care is an important factor to achieve customer satisfaction.

Customer satisfaction towards nursing care is a vital part of every hospital's sustainability.<sup>7</sup> It is also one of "improvement of quality and safety" criteria in hospital accreditation assessment.<sup>8</sup> This means that to be valued as a nursing care with quality, it should be able to give safety, comfort, and satisfaction to customers. Excellent care is also reflected on quality outcomes, for instance cost-effectivity and efficiency.<sup>9</sup>

The phenomena of nursing care quality have been challenging most countries in the world, including Indonesia.<sup>10</sup> The quality of nursing care in some regions of Indonesia has not been considered as adequate. Complaints from patients and their family towards nursing care involve health professional's sluggishness in treating emergency department patients. Information showed that the problem in Indonesian health care quality is generally rooted in administrative factor, facility or environment, and caring behaviour of professionals in hospital nursing care. The hospital is organized into various wards or care facilities which possess unique characteristics. The uniqueness of each department's and human culture's characteristics have been challenging health and nursing research to unify theoretical concepts in nursing care provision.<sup>10</sup> This observation also applies to the distinctive characteristic of hospital's emergency department care.

Emergency department is one of the frontlines and patient entrances to the hospital. This department gives first-care to patients, specifically life-saving and/or emergency care.<sup>11</sup> Incoming patients are typically in an illness episode unforeseeable by themselves and their family. This condition necessitates extra care in biological, psychological, sociological and spiritual aspects. On the other hand, nurse's jobs in emergency department are full of pressure, encompass wide area and restricted by time.<sup>12,13</sup>

Caring needs in Indonesian emergency department has not been done. Previous research explained that caring needs in emergency department consists of behavioural aspect and taking physical, social and spiritual environment into concern.<sup>14</sup> The research has not specifically studied caring needs in administrative process. The condition is possibly different from Indonesian communities' needs, especially emergency department patients in Banyumas area, Central Java Province. Research on caring needs carried out by Coulombe, Yeakel, Maljanian and Bohannon emphasized more on caring behaviour aspect.<sup>4</sup> Then again, we understand that Watson also stated that caring is not limited to behaviours.

As a result, we need a research to explore patient's caring needs in nursing care from behavioural, administrative and environmental aspects. This study on caring needs to be made comprehensively in accordance to expectations of Indonesian local community.

Therefore, knowledge of specific caring needs in emergency patients through need assessment is required. Need assessment aims to explore patient's caring needs based on each care facility's characteristics, patient's needs and cultural value (caring with patient's needs and cultural approach). The result of need assessment can be considered by general hospital managers to determine policies on quality of care in emergency department based on caring. Application of this research can be used to address problems of caring need that have been left unspoken by patients and, consequently, unrecognized by hospital health professionals.

## METHODS

This research was a survey study of need assessment in five stages: 1) getting started, 2) profiling the health of the population, 3) profiling the agreed health priority and identifying required change, 4) planning action and implementation, and 5) evaluation.<sup>15,16</sup> The respondents in this research were 50 emergency department patients in three Banyumas area district general hospitals (RSUD): RSUD Prof. Dr. Margono Soekarjo, Purwokerto; RSUD Banyumas; and RSUD Purbalingga. The sampling of patients was done using criteria designed not to breach ethics in research, as the patients must be in a good general condition, had been comforted, able to communicate and consented to participate as respondents.

### Data collection

Data were collected by 30 minutes-interviews to each emergency patients in presence of their family member. The interview began with open-ended question to explore caring needs towards emergency department care. Questions asked by researcher were: 1) "Please explain the caring needs you have felt during treatment in emergency department"; and 2) "Please identify your

needs in aspects of care in administration, nurse behaviours and environment condition during treatment in emergency department". Afterwards, respondent's answers on caring needs during interview were noted into patient's needs inventory table.

### Analysis

Content analysis was applied in this research.<sup>17</sup> Content analysis was staged by grouping keywords into appropriate categories in the inventory table of patient's needs. A number of categories were grouped together to build a theme on caring needs of patients in hospital emergency department. These themes were arranged into three dimensions of caring needs. The results of content analysis were subsequently validated using confirmatory techniques by five experts who had met the expertise criteria. The expertise criteria as content analysis validator were: nursing lecturers holding Master in Nursing degree with 10 years experience in the field of emergency nursing (two experts); and nurse practitioners in emergency units with minimum degree of Nurse and possessed at least 10 years experience in those units (three experts).

### Ethics

The ethical aspect in this research was considered from permission process, respondent involvement to results publication. The ethical aspect is guaranteed by Medical and Health Research Ethics Committee (MHREC), Faculty of Medicine, Universitas Gadjah Mada based on Ethical Approval number Ref: KE/FK/190/EC.

## RESULTS

### Respondents characteristic

Respondents in this research were patients in emergency department with good general condition, had been comforted, able to communicate and had consented to participate in the study. The respondents characteristics were described by age, sex, level of education and home location as given in Table 1.

Table 1 explains that most respondents' education was in elementary and high school level. The male and female respondents involved in this research were exactly equal in proportion. Based on home location, almost half of all respondents (46%) were living in Banyumas area, while the others were living in other regencies in ex-Banyumas Residency area. Age of respondents were distributed in a range of 21 to 72 years old, with mean of 44,7 and standard of deviation of 1,39 years. Therefore, the average respondents were adults and in productive age. A part of respondents were also students.

### Characteristics of research location

Banyumas is an area in Central Java Province, which is one of the most densely populated provinces in Indonesia. This area is also prone to disasters and holds the highest number of death from road accidents. The Banyumas residents have a unique culture and different traits from other communities in Indonesia. Banyumas residents portray particular characteristics: greatness and glory seeking, rebellious, prone to conflict, hard-working, egalitarian society, valuing freedom, tend to be vulgar, and affirmative and critical culture.<sup>18</sup> Those characteristics could become added value in nursing care if provided according to patients' needs and culture.

**Table 1: Distribution of respondents' frequency based on level of education, sex, home location and age.**

Characteristic	Frequency	Percentage (%)
Level of education		
Elementary	20	40
High school	21	42
Higher education	9	18
Sex		
Male	25	50
Female	25	50
Home location		
Banyumas	23	46
Cilacap	6	12
Purbalingga	16	32
Kebumen	3	6
Brebes	2	4
Age		
Minimum	21 years	
Maximum	72 years	
Mean	44,7 years	
Standard of deviation	1,39 years	

### Caring needs of emergency department patients

Content analysis of study results was acquired from keywords and categories. Keywords and categories were then arranged and grouped into themes supporting caring dimensions in emergency department. The content analysis result had been validated by five experts in emergency nursing. The completed content analysis could be illustrated in following example of content analysis in Table 2.

Caring needs of patients in emergency department of district general hospitals (RSUD) in Banyumas area based on content analysis were typically grouped into three aspects or dimensions of caring, as described in Table 3.

Table 3 shows this research extracted 414 keywords, 25 categories and 10 themes in caring needs of patients at emergency department care which were grouped into three dimensions of behaviour, environment and administration.

Those themes were then interpreted into ten caring needs of emergency department patients from district general hospitals in Banyumas area (Table 4).

**Clear information delivery**

Clear information delivery means that patients wished to be informed of their illness conditions. The clear information should be given despite no stated request from patients. Informations needed by patients were on the disease they were having and its cause, the plan of care and information on moving to wards. Patients also

wanted to be explained on treatments they received, including possible side effects of interventions. The need of care was based on these keywords: “clear information delivered; information on the disease and its management; demand for explanation regardless of patient’s enquiry; explained on reasons for hospitalisation; explained on the cause of disease; explanation for interventions; be informed on moving; information on side effects of interventions; explanation on drug administration; information of examination result; eager to be consulted; open for questions/consultation.”

**Table 2: Example of content analysis.**

Dimension	Theme	Category	Keywords
Caring behaviour	Prompt and responsive care	Promptness	prompt and correct, immediately cared, short time to get admission to ward, quick in actions, responsive management, immediately examined, immediately treated.
		Responsive and correct in special intervention	immediately put on IV line, blood sample taken, be examined, get treated early, pain-relief administration, met patient at the entrance door, immediately examined
	Clear on information delivery	Information	Clear information delivered, information on the disease and its management, demand for explanation regardless of patient’s enquiry, explained on reasons for hospitalisation, explained on the cause of disease, explanation for interventions, be informed on moving, information on side effects of interventions, explanation on drug administration, information of examination result
		Communication	Eager to be consulted, open for questions/consultations

**Table 3: Dimensions in caring needs of emergency department patients from district general hospitals in Banyumas area.**

Caring needs dimension	Theme	Category	Keyword
Nurse behaviour	5	13	205
Administration	2	4	102
Environment	3	8	107

**Friendliness, politeness and fairness**

Friendliness and politeness should be presented through behaviour of nurses in care-giving. Friendliness and politeness should be displayed not only to the patients, but also their accompanying family. Friendliness should be demonstrated by friendly facial expression, natural smile, polite greetings and use of firm, but not rude, intonation. The nurses were also expected to be fair in treating patients. Patients should be treated according to their needs and not being discriminated. This theme was based on keywords of: “friendly; kind to the waiting family members; friendly in providing care; friendly nurse; nice behaviour; polite; not discriminating patients; not being discriminated; fair.”

**Clarity and simplicity of administration**

Clarity and simplicity of administration since registration process were expected by both insured and out-of-pocket patients. Generally, the administration process should be simple, not complicated and not asking for advance payment in registration. Consultation and information were expected to be given by personnels with ease and friendliness. Clear and communicative information board should be available, especially on patient care flow. The waiting turn system should also be clear, including waiting turn to be admitted to wards. The ward room should be prepared and explained to the patients or family. The clarity and simplicity of administration theme was based on keywords of: “simple registration; easy to consult; easy to go through BPJS (insurance); simple payment; no complicated administration; simple and not complicated administration; friendly administration; no advance payment; easy consultation with doctors; prompt medication procurement; clear administration; clear placement in wards; clear waiting turn system; assurance on insurance use; certainty of patient care flow.”

**Clean and comfortable room**

The emergency room was expected by patients to have clean beds, room, environment and toilets. The room was also expected to be spacious enough, well organized, not airless and provide screen or curtains between patient beds. Adequate room lighting, cool temperature and not noisy. Patients required privacy, especially on certain procedure as urinary catheterization. The theme was based on keywords of: “clean room; clean place; clean environment; clean toilet; comfortable environment; room organization; comfortable room; comfortable ambience; not airless; nice environment;curtains or screen available between patient beds; comfortable from cramming personnels; quiet ambience; not crowded; quiet

nurses; not noisy; enough lighting; bright; privacy in urinary catheterization.”

**Short waiting time for care and admission to ward**

Patients expected short waiting time to receive care in emergency department. Patients wished to be admitted to wards immediately. When delay occurred, patients wished to be informed on the reason behind the long waiting time to ward admission. The theme of short waiting time for care and admission to ward was extracted from keywords of: “short stay in emergency department; efficient time; ward information; admission to ward immediately; be explained on the reason for delaying admission to ward; certainty on when to be admitted; information of ward placement plan; room certainty.”

**Table 4: Ten caring needs of emergency department patients.**

Dimension	Theme	Category
Caring behaviour	1. Prompt and responsive care	1. Promptness
		2. Responsive with special intervention
	2. Clear information delivery	3. Information
		4. Communication
	3. Friendliness, politeness and fairness	5. Friendliness
		6. Politeness
		7. Equal treatment
	4. Providing care, prayer and motivations to patients	8. Care
		9. Receive motivation
		10. Receive prayer
		11. Patience
	5. Competent in procedures	12. Skillfull
		13. Correct intervention
Caring environment	6. Clean and comfortable room	14. Cleanliness
		15. Physically comfortable
		16. Privacy
		17. Quiet
	7. Complete facility and devices	18. Complete devices
		19. General facility
	8. Room safety	20. Patient’s safety
		21. Environmental safety
Caring administration	9. Clarity and simplicity of administration	22. Clear administration
		23. Simple administration
	10. Short waiting time for care and admission to ward	24. Waiting time for care
		25. Information on moving to other room

**Competent in procedures**

Patients asked for neat, meticulous, skillful and swift personnel care. The personnel’s ability should be displayed from the earliest procedures, such as examinations, putting on respiratory-support device, taking blood sample and successful IV line placement in the first trial. The theme was based on keywords of: “cared by professional personnel; enough number of nurses; neat, meticulous and nice nurses;swift and skillful nurses; supportive nurses; one-shot IV line placement;swiftness; well examined; correct intervention;

correct medical intervention; correct examination; correct medication; clear medication.”

**Providing care, pray and motivations to patients**

Emergency department patients needed nurses who care, understand patient’s needs and remember patient’s name. Nurses should demonstrate caring attitude through calling patients by names. Caring attitude was also expected to be given to the waiting family members by providing food in cases of long waiting time. Nurses could give patients motivations and encouragement during

treatment. Nurses could give prayers and remind patients to pray continuously and hold patience in enduring their illness. The theme was based on keywords of: "care; caring personnel; flexible enough; responsive; controlled while waiting; memorize patient's name; provided food in case of long waiting time; being respected; name memorized and called by personnels; motivation from nurses; nurses give encouragement; being reminded to shalat (pray); given encouragement; reminding to pray; being reminded to do ibadah (worship); nurses to display patience."

### **Complete facility and devices**

Patients needed adequate emergency room facility, provided with complete devices for patient care. Patients wished to be provided nearby waiting room, resting room and praying room for the waiting family. Emergency room should also provide kiblat direction marker for Muslim's prayers (shalat). The theme was based on: "complete devices; patients were put in the hallway; proper facility; adequate environmental condition; provided waiting room; nearby canteen; resting room for family; nearby facility for praying; shalat area; worship area; shalat direction marker; information on facility for praying; kiblat direction marker."

### **Room safety**

Patients needed safety in emergency room. Patients expected to clearly understand their care provider's status, whether they were hospital staffs or students in training, and to be provided safety features in patient's bed. The theme was based on these keywords: "there is safety features in patient's bed; clear identification between hospital staffs and students in training; not too many workers."

## **DISCUSSION**

Caring needs of district general hospital's emergency department patients in Banyumas area involved behavioural, administrative and environmental dimensions. This result is congruous with previous research, stated that caring needs are consisted of being hopeful for you, being sensitive to you, demonstrating professional knowledge and skill, allowing you to express feelings about your disease and treatment, showing concern for you, and giving your treatments and medications on time. Researchers grouped patient caring needs into three dimensions, based on caring concept which emphasize on behaviour; administrative caring and enviromental aspect.<sup>4,6</sup> Patient's expectations of nurses' caring behaviour were: prompt and responsive care; clear information delivery; friendliness, politeness and fairness; competent in procedures; and providing care, prayer and motivation to patients. Fast and time-restricted care in emergency department is needed due to patient's conditions typically need urgent treatment. The time for

triage system that is proven to be effective is around 3 minutes.<sup>13,19</sup>

Prompt patient treatment is very influential to physical health state, while psychologically will put patients and their family at ease. Prompt and responsive care is strongly related to personnel capacity. Emergency department personnels should have a distinctive ability to give quick and correct care. Therefore, hospital's emergency departments should determine the basic competencies for emergency department personnels. This policy has been implemented in the Netherlands and Singapore by recognizing a medical specialty in emergency since 1984.<sup>20,21</sup>

Prompt care in emergency department needs to take ethical aspects into account, such as respect for patient's autonomy, justice, beneficence and non-maleficence.<sup>22</sup> All emergency department patients have to be treated equally, although the chosen procedure and facility utilisation are in accordance to each patient's unique condition. Patients expect that all of provided caesare truly safe. When situation allows, all procedures should be consented by patient or their family member.

Clear information on patient's condition has to be delivered. The incoming patients are typically in an unforeseeable illness conditon, hence the need for extra care. Clear information and communication is needed to relieve patient and family member from anxiety. Clear information delivery also affects patients and family members to be more cooperative during treatment and care. Clear information delivery is even needed when patients are transported from emergency department to the next care facility.<sup>23</sup>

In administrative dimension, patients need clarity and simplicity in administration, as well as short waiting time for care and ward admission. Recommendations for acceptable emergency department length of stay (LOS) vary internationally with  $\leq 8$  h generally considered acceptable.<sup>24</sup> The association of emergency department atmosphere with life-threatening conditions puts patients in an uncomfortable situation during stay in this facility. Patients demand for more quite and private care, achievable when they are admitted to the ward. Patients and their family members feel more at ease if they could be admitted to the ward as soon as possible. The hospital wards are often in an overloaded capacity, so that patients have to wait for a vacant bed to be admitted. This condition is often complained by patients. As a consequence, it is more likely to be understandable for patients and their family members if they are being clearly informed on the delay of admission and the certainty of when to move.

In caring environment aspect, patients wish to have a clean and comfortable emergency room with complete facility and devices, as well as ensured safety. Contemporary nursing practice focuses on creating caring

environments for nurses, patients, and families within today's complex health organization.<sup>25</sup> The clean and comfortable room allows for development of nurse-patient therapeutic relationship. The nursing process will be better carried in a comfortable room condition. This result fits perfectly with the research about caring behavior in Taiwan, he mentioned that caring behavior perceived by nurses in Taiwan covering; and respecting patients' culture.<sup>26</sup> Maintained privacy in emergency department environment has been proven to boost patient satisfaction.<sup>27</sup>

## CONCLUSION

Caring needs of emergency patients in Banyumas area district general hospitals include administration, behavioural and environmental aspects. The ten most common caring needs of patients in emergency department included: prompt and responsive care; clear information delivery; friendliness, politeness and fairness; clarity and simplicity of administration; clean and comfortable room; short waiting time for care and admission to ward; competent in procedures; providing care, pray and motivation to patients; complete facility and devices; and room safety.

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