



## Clinical Laboratory Implementation of a Companion Diagnosis

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### Description

National development in colorful fields has bettered the quality of health and the socioeconomic conditions of society in general. Indonesia's life expectation has increased significantly. The increase in life expectation has increased the number of aged people and changed the structure of Indonesia's population. The Elderly is someone who reaches the age of 60 times and over, which is the final stage of mortal development. Encyclopedically, the senior population is prognosticated to continue to increase. The senior population in Indonesia is anticipated to rise advanced than the senior population in the world after 2100. The senior population in Indonesia in 2013 was 8.9 of the total population, and according to estimates from the central statistics agency, Indonesia will enter the senior period, where 10 of the population will be aged 60 times and over in 2020. The adding senior population makes the government needs to formulate programs aimed at senior population groups to play a part in the development and not come a burden to the community. Concerning elderly welfare stipulates that the age limit for the senior in Indonesia is 60 times and over. Paragraph 1 specifies that health care sweats for the senior must maintain a healthy and productive life socially and economically following mortal quality. Paragraph 2 stipulates that the government is obliged to insure the vacuity of health service installations and grease senior groups to live singly and productively socially and economically. Colorful programs and programs enforced by the government are stated in concerning perpetration of sweats to ameliorate the welfare of the elderly, which include Religious and spiritual internal services similar as the construction of religious installations with availability services services.

### Socioeconomic Status

The government has made numerous programs to keep the senior healthy and productive in carrying out their lives. Still, there are still numerous obstacles faced so that problems are still plant in the senior,

especially in health problems that play an essential part in the productivity of the senior in everyday life. In old age, a person will witness physical, cognitive, and psychosocial life emphasizes the significance of life expectation and quality of life for the senior. Conditions of the senior in general, similar as old age, loneliness, less prosperous socioeconomic status, and the emergence of degenerative conditions similar as cancer, heart complaint, rheumatism, and cataracts, beget productivity to decline and affect social life. All of the below is the impact of the low quality of life of the senior. This can be caused by a weakened physical condition, poor particular connections, and lack of openings to gain information with adding age, physiological functions drop due to the degenerative process so that non-communicable conditions frequently appear in the senior. In addition, degenerative problems reduce the body's resistance to being susceptible to contagious conditions. A large number of aged people is also accompanied by a high prevalence of non-transmissible conditions, where primary check data show that utmost of the senior experience health problems, similar as rheumatism.

### Hospital Information System

Data from BPS shows that the loftiest senior health complaints are complaints which are the goods of habitual ails which apropos are non-communicable conditions similar as gout, high blood pressure, rheumatism, low blood pressure, and diabetes followed by coughs and snap Meanwhile, the loftiest frequency of rotundity from the senior to the senior is the age group 55-64 times Judging from the type of complaint in the hospital information system in 2010, it was stated that the top 10 species of complaint-causing rehabilitants from all inpatient conditions in the 45-64 time age group and 65 times or aged were essential hypertension. It's enough grueling to fete health problems that do beforehand. Utmost of the symptoms and signs that appear are non-specific, so the problem is frequently linked when it has progressed. This is indeed more delicate because of the emergence of natural movements and symptoms of the aging process and complex habitual conditions that can obscure signs or symptoms that indicate a health problem. The situation occasionally becomes more delicate because some Indonesian people also don't have full mindfulness of the early discovery of implicit issues of non-communicable conditions that they will face. Beforehand discovery of non-communicable conditions should be routinely carried out from 15 times. Still, colorful changes in health are frequently felt but occasionally don't get follow-up or indeed are ignored. Utmost people will seek a place of examination or treatment when health problems or indeed complications from conditions have passed. Although, in general, the community also has experience, knowledge, and commerce with the community that needs to be optimized about implicit problems and literacy and how to overcome them. Mindfulness of the need for early discovery and early treatment can increase the effectiveness of the treatment when this group and the senior are passing ages of health and extremities. Therefore the position of independence and quality of life of the senior can also be maintained and indeed increased.

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