

# **POLITEKNIK KESEHATAN TANJUNGKARANG**

## **JURUSAN GIZI**

**Tugas Akhir, 2021**

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Penatalaksanaan Asuhan Gizi Terstandar Pasien *Diabetes Mellitus* Tipe 2 Di Rumah Sakit Umum Daerah Pringsewu Tahun 2021

xiii + 57 halaman, 10 tabel, 2 gambar, dan 11 lampiran

## **ABSTRAK**

*Diabetes Mellitus* (DM) merupakan penyakit kelainan metabolism yang ditandai dengan hiperglikemia kronis diakibatkan oleh kelainan sekresi insulin, kerja insulin maupun keduanya (PERKENI, 2015). Prevalensi DM di Indonesia berdasarkan diagnosis dokter pada penduduk semua umur sebesar 1,5%, dengan kelompok terbesar pada usia 55 – 64 tahun yakni sebesar 6,3% dan kelompok terkecil pada usia 25-35 tahun sebesar 0,2%. DM paling banyak diderita oleh perempuan sebanyak 1,78%, sedangkan laki-laki sebesar 1,2%. Penyumbang angka prevalensi terbesar yaitu masyarakat yang bertempat tinggal diperkotaan sebanyak 1,9%, sedangkan masyarakat perdesaan sebesar 1,0% (Riskesdas, 2018).

Rancangan penelitian ini adalah penelitian study kasus. Subjek penelitian ini adalah seorang pasien *diabetes mellitus* rawat inap di Rumah Sakit Umum Daerah Pringsewu yang dirawat selama 4 hari. Analisa data yang digunakan dalam penelitian ini yaitu menggunakan analisa deskriptif dengan membandingkan data sebelum dan sesudah proses penatalaksanaan asuhan gizi terstandar (PAGT) serta membandingkan dengan *standar reference*.

Hasil skrining gizi yaitu 3 atau berisiko malnutrisi. Diagnosis medis pasien adalah *diabetes mellitus* dengan kadar gula darah sewaktu pasien dalam batas normal, *ulkus* dan anemia. Diagnosis gizi pasien adalah asupan oral tidak adekuat (NI.2.1), perubahan nilai lab terkait gizi (NC.2.2), dan kurang pengetahuan terkait makanan dan zat gizi (NB.1.1). Pasien diberikan diet DM 1700 kkal, kebutuhan zat gizi pasien berdasarkan perhitungan yaitu energy 1700 kkal, protein 50,4 gram, lemak 47,2 gram, KH 268 gram.

Kadar hemoglobin dan hematokrit pasien mengalami peningkatan selama perawatan, mual dan nafsu makan pasien masih ada, serta rata-rata asupan pasien yaitu energy 65,70%, protein 63,67%, lemak 61,39%, karbodidrat 67,6%, serat 35,33%, kolesterol 135,89 mg, dan natrium 200,56 mg. Asupan energy, protein, lemak, karbohidrat, dan serat belum mencapai target. Untuk instansi sebaiknya dalam pengolahan sayur lebih diperhatikan untuk standar porsinya, serta dalam pengolahan lauk nabati lebih bervariasi lagi.

Kata kunci : Asuhan Gizi, Diabetes Mellitus

Daftar bacaan : 28 (2002-2018)

# **HEALTH POLYTECHNIC OF TANJUNGKARANG**

## **DEPARTMENT OF NUTRITION**

**Final Report, 2021**

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Management of Standardized Nutritional Care for Patient with Type 2 Diabetes Mellitus at Pringsewu General Hospital

xiii + 57 pages, 10 tables, 2 pictures, and 11 appendices

## **ABSTRACT**

Diabetes mellitus (DM) is a metabolic syndrome characterized by chronic hyperglycemia due to abnormalities in either insulin secretion or insulin action, or both (PERKENI, 2015). The prevalence of diagnosed DM in Indonesia among all ages is 1.5%, most commonly found among adults aged between 55 – 64 years old (6.3%), and less common in adults aged between 25 – 35 years old (0.2%). DM also occurs mostly among women (1.78%), while men contribute only 1.2% of the total cases. People who live in the city have a higher prevalence rate (1.9%) compared rural community (1%) (Risikesdas, 2018).

This case study investigated a DM patient, who was being hospitalized at Pringsewu General Hospital for 4 days. The data were collected before and after standardized nutritional care management (PAGT) sequences, and compared with the reference standards.

The result of nutritional screening on the patient was 3, indicating that he was at risk of malnutrition. Medical diagnosis of diabetes mellitus patients with blood sugar levels when the patient is within normal limits, diabetic ulcers and anemia, while his nutrition diagnosis showed inadequate oral intake (NI.2.1), changes in nutrition-related lab values (NC.2.2), and lack of knowledge regarding food and nutrients (NB.1.1). The patient was given a DM diet of 1700 kcal. His measured nutritional needs consisted of 1700 kcal of energy, 50.4 grams of protein, 47.2 grams of fat, and 268 grams of carbohydrate. The patient's hemoglobin and hematocrit levels were increasing during the treatment. Nausea and appetite were still observed, and his average intake included 65.70% energy, 63.67% protein, 61.39% fat, 67.6% KH, 35.33% fiber, 135.89 mg of cholesterol, and 200.56 mg of sodium. Intakes of energy, protein, fat, carbohydrate, and fiber had not reached the targeted levels.

The findings imply that health-care services need to set a more appropriate portion size for vegetables in the meals they served to patients. More varied vegetable-based side dishes should also be considered.

Keywords : nutritional care, diabetes mellitus

Reading list : 28 (2002-2018)