

POLITEKNIK KESEHATAN TANJUNGKARANG
JURUSAN PRODI KEPERAWATAN KOTABUMI
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Asuhan Keperawatan Pasien Dengan Gangguan Kebutuhan Oksigenasi Pada Kasus *Asfiksia Neonatus* Terhadap By.Ny.D Di Ruang Neonatus RSUD Mayjend HM. Ryacudu Kotabumi Lampung Utara Tanggal 8-10 April 2019.

xiv + 57 halaman, 5 tabel, 1 bagan

RINGKASAN

Asfiksia neonatus adalah kegagalan nafas secara spontan dan teratur pada saat lahir atau beberapa saat setelah saat lahir yang ditandai dengan hipoksemia, hiperkarbia dan asidosis. Berdasarkan data buku register tahunan ruang neonatus RSD Mayjend HM Ryacudu Kotabumi Lampung Utara 2018-2020, Penyakit Asfiksia neonatus menduduki peringkat kedua di ruang Neonatus RSUD Mayjend HM Ryacudu Kotabumi Lampung Utara. Rumusan masalah LTA ini yaitu “Bagaimana Asuhan Keperawatan Pasien dengan Kasus Asfiksia Neonatorum Terhadap By.Ny.D dengan Gangguan Kebutuhan Oksigenasi di Ruang Neonatus RSUD Mayjend H.M. Ryacudu?” Tujuan penulisan LTA ini adalah Memberikan gambaran dan mampu melaksanakan Asuhan Keperawatan Asfiksia Neonatorum pada By.Ny.D dengan Gangguan Kebutuhan Oksigenasi di Ruang Neonatus RSUD Mayjend H.M. Ryacudu.

Asuhan keperawatan pada By.Ny.D dengan Asfiksia neonatus meliputi pengkajian bayi tampak sulit bernapas (dispnea), terdapat sianosis, SPo2 84%, pernapas cuping hidung, bayi mengalami asfiksia sedang, nilai apgar skor 6 (enam), dan tidak ada gangguan sensasi, bayi kurang aktif, pola nafas 64x/menit, Suhu 36.2°C, akral dingin, bayi tampak lemah. Diagnosa keperawatan yang ditegakkan menurut pengkajian adalah Gangguan Pertukaran Gas berhubungan dengan Ketidakseimbangan Ventilasi-perfusi, Resiko Hipotermia berhubungan dengan bayi baru lahir, Resiko Infeksi berhubungan dengan paparan organisme pathogen lingkungan. Rencana keperawatan dibuat sesuai dengan teori, SLKI-SIKI dan SDKI (2017) meliputi : Pamantauan respirasi (I.01014), Manajemen Hipotermia (I.14507), Pencegahan Infeksi (I.14539), implementasi dilakukan sesuai dengan label yang dipilih sesuai SIKI tetapi ada yang ditambahkan atau dihilangkan setiap harinya sesuai perkembangan klien. Evaluasi keperawatan dilaksanakan setiap hari sesuai teori proses keperawatan dan dapat disimpulkan bahwa tiga diangnosa dua teratasi satu belum teratasi.

Kesimpulan dari laporan ini tidak semua teori proses keperawatan kasus Asfiksia neonatus sesuai dengan kondisi klien pada kenyataannya, karena disesuaikan dengan kondisi dan kebutuhan klien. Saran dari laporan ini perawat hendaknya melakukan tindakan sesuai dengan standar operasional yang sudah ditetapkan misalnya memonitor pola napas dan Spo2 dalam darah.

Kata kunci : Asuhan keperawatan Asfiksia Neonatus, Oksigenasi
Sumber Bacaan : 16 (2009-2020)

TANJUNGKARANG HEALTH POLYTECHNIC
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Nursing Care for Patients with Disorders of Oxygenation Needs in Cases of Neonatal Asphyxia
Against By.Ny.D in the Neonate Room of Mayjend HM. Ryacudu Kotabumi, North Lampung,
April 8-10 2019.

xiv + 57 pages, 5 tables, 1 chart

ABSTRACT

Neonatal asphyxia is failure of spontaneous and regular breathing at birth or some time after birth which is characterized by hypoxemia, hypercarbia and acidosis. Based on data from the annual register book for the neonate room of RSD Mayjend HM Ryacudu Kotabumi, North Lampung 2018-2020, neonatal asphyxia was ranked second in the Neonate room of the Mayjend HM Ryacudu Hospital, Kotabumi, North Lampung. The formulation of this LTA problem is "How is the Nursing Care of Patients with Asphyxia Neonatorum Cases Against By.Ny.D with Impaired Oxygenation Needs in the Neonate Room of Mayjend H.M. Hospital) Ryacudu? " The purpose of writing this LTA is to provide an overview and be able to carry out Asphyxia Neonatorum Nursing Care at By.Ny.D with Disorders of Oxygenation Needs in the Neonate Room of Mayjend H.M. Ryacudu.

Nursing care for By.Ny.D with neonatal asphyxia includes assessment of the baby with difficulty breathing (dyspnea), cyanosis, 84% SPo₂, nostril breathing, the baby has moderate asphyxia, an Apgar score of 6 (six), and no sensation disturbances. , the baby is less active, the breathing pattern is 64x / minute, the temperature is 36.2oC, the akral is cold, the baby looks weak. Nursing diagnoses that were established according to the assessment were gas exchange disorders associated with ventilation-perfusion imbalance, hypothermia risk associated with newborns, infection risk associated with exposure to environmental pathogenic organisms. Nursing plans are made in accordance with the theory, SLKI-SIKI and IDHS (2017) include: Respiration monitoring (I.01014), Hypothermia Management (I.14507), Infection Prevention (I.14539), implementation is carried out according to the label selected according to SIKI but some are added or removed every day according to the development of the client. Nursing evaluation is carried out every day according to the theory of the nursing process and it can be concluded that three are diagnosed, two are resolved, one has not been resolved.

The conclusion of this report is that not all nursing process theories of neonatal asphyxia cases are in accordance with the client's condition in fact, because it is adapted to the client's conditions and needs. The suggestion from this report is that nurses should take action in accordance with established operational standards, for example monitoring breathing patterns and blood spo₂

Key words: Neonatal Asphyxia Nursing Care, Oxygenation

Reading sources: 16 (2009-2020).