

POLITEKNIK KESEHATAN TANJUNGKARANG
PRODI KEPERAWATAN KOTABUMI
Laporan Tugas Akhir, Juni 2019

Erina,

Asuhan Keperawatan Keluarga dengan Gangguan Pola Nafas Tidak Efektif pada kasus Asma Bronkhial terhadap Individu Ny.S di Wilayah Kerja Puskesmas Kotabumi II Kabupaten Lampung Utara tanggal 13 – 15 Mei 2019
xv + 59 halaman, 12 tabel, 2 gambar

RINGKASAN

Laporan Global Initiatif for Asthma (GINA) tahun 2012, jumlah prevalensi penderita asma bronkhial di Provinsi Lampung 1,45%. Lampung Utara kunjungan penderita asma bronkhial menetap tahun 2016 dan 2017 ada sejumlah 2089 penderita dan menurun ditahun 2018 sebanyak 835 penderita (Dinkes LU, 2018). Puskesmas Kotabumi II jumlah penderita asma bronkhial tiga tahun terakhir mengalami trend peningkatan jumlah penderita yaitu tahun 2016 ada 82, tahun 2017 sebanyak 221 dan tahun 2018 berjumlah 469 orang (Puskesmas Kotabumi II). Penulis tertarik membuat laporan karena di wilayah Puskesmas Kotabumi II terjadi trend peningkatan sehingga perlu dilakukan upaya penanggulangan kasus penyakit asma bronkhial untuk mengurangi kematian.

Tujuan penulisan laporan tugas akhir ini memberikan gambaran Asuhan Keperawatan Keluarga dengan Gangguan Pola Nafas Tidak Efektif pada kasus Asma Bronkhial di Wilayah Kerja Puskesmas Kotabumi II Kabupaten Lampung Utara.

Hasil Pengkajian didapatkan data seperti sesak napas, wheezing sebagai suara napas tambahan, frekuensi RR 28 x/menit, batuk kering, pernapasan dangkal,sesak setelah beraktivitas berat,mengatakan tidak nyaman setelah beraktivitas, tampak lemah, sulit tidur, sering kali terbangun pada malam hari, jumlah jam tidur 5 jam/hari. Sehingga ditegakkan tiga diagnosa keperawatan yaitu Pola Napas Tidak Efektif, Intoleransi Aktivitas, dan Gangguan Pola Tidur. Tiga diagnosa ini kemudian diprioritaskan dan mendapat scoring tertinggi dengan jumlah 5 adalah Pola Nafas Tidak efektif. Rencana dan Pelaksanaan tindakan keperawatan yang dilakukan adalah memberikan cara perawatan Asma Bronkhial dan pendidikan kesehatan dengan cara demonstrasi dan redemonstrasi yaitu mengajarkan teknik non farmakologi yaitu Fisioterapi dada, posisi semi fowler, terapi komplementer menggunakan inhalasi uap dengan minyak kayu putih, membuat minuman dari rebusan jahe dicampur gula. Hasil evaluasi keluarga mampu melakukan perawatan yang meliputi TUK 1, 2, 3, 5, pada TUK 4 dilakukan RTL.

Simpulan Askep kasus Asma Bronkhial sesuai antara kondisi objektif dengan teori. Saran meningkatkan kunjungan rumah dan memberi support kepada klien dan keluarga dalam pemeliharaan kesehatan.

Kata kunci : Askep individu pada keluarga, Asma Bronkhial, Pola Nafas Tidak Efektif

Daftar bacaan : 19 (2010-2017)

POLITEKNIK KESEHATAN TANJUNGKARANG
PRODI KEPERAWATAN KOTABUMI
Final Project Report, June 2019

Erina,
Family Nursing Care with Disorders of Breath Pattern Not Effective
in Bronchial Asthma Cases against Individuals Ny.S
in Kotabumi II Health Center in Work Area
Nort Lampung Regency May 13-15, 2019
xv + 59 pages, 12 tables, 2 images

ABSTRACT

Global Report on Initiatives for Asthma (GINA) in 2012, the total prevalence of asthma sufferers in Lampung Province is 1.45%. North Lampung visits bronchial asthma sufferers settled in 2016 and 2017 there are a number of 2089 patients and decreased in 2018 as many as 835 sufferers (LU Health Office, 2018). Kotabumi II Health Center II, the number of Bronchial Asthma sufferers in the last three years experienced a trend of increasing number of sufferers, namely in 2016 there were 82, in 2017 there were 221 and 2018 totaling 469 people (Kotabumi II Health Center). The author is interested in making a report because in the Kotabumi Health Center II area there is an increasing trend so that efforts need to be made to overcome Bronkhial Asthma cases to reduce mortality.

The purpose of this final project report is to provide an overview of Family Nursing Care with ineffective breathing patterns in Bronchial Asthma cases in the Work Area of Kotabumi II North Lampung Regency.

The results of the study obtained data such as shortness of breath, wheezing as an additional breath sound, RR frequency 28 x / minute, dry cough, shallow breathing, tightness after strenuous activities,said uncomfortable after activity, seemed weak, had difficulty sleeping,often woke up at night, number of hours of sleep 5 hours/day. So that three nursing diagnoses were established namely Ineffective Breath Pattern, Activity Intolerance, and Sleep disorder. These three diagnoses are then prioritized and get the highest scoring with the number 5 is the Ineffective Breath Pattern. The plan and implementation of nursing actions carried out is to provide ways to treat Bronkhial Asthma and health education by demonstration and redevelopment by teaching non-pharmacological techniques namely chest physiotherapy, semi-fowler position, complementary therapy using steam inhalation with eucalyptus oil, making drinks from ginger mixed sugar. The results of family evaluations were able to carry out treatments which included TUK 1, 2, 3, 5, in TUK 4 RTL was conducted.

The conclusions of the Bronkhial Asthma case nursing process correspond between the conditions objective and the theoretical. Suggestions for increasing home visits and supporting clients and families in health care such as prevention of complications of respiratory failure.

Keywords : Askek Individuals in Families, Bronchial Asthma, Ineffective Breathing Pattern
Reading list : 19 (2010-2017)