

**POLITEKNIK KESEHATAN TANJUNGPURUN
JURUSAN KEPERAWATAN
PROGRAM STUDI PROFESI NERS
Laporan Akhir Profesi Ners, Juli 2021**

Riska Anggun Sari

ASUHAN KEPERAWATAN *PERIOPERATIF* PADA PASIEN G₁P₀A₀ + KPD DENGAN TINDAKAN *SECTIO CAESAREA* DI RUANG OPERASI RUMAH SAKIT BHAYANGKARA BANDAR LAMPUNG TAHUN 2021
x + 67 halaman, 17 tabel, 2 gambar, dan 3 lampiran

ABSTRAK

Ketuban pecah dini (KPD) adalah keluarnya cairan dari vagina setelah kehamilan berusia 22 minggu sebelum proses persalinan berlangsung dan dapat terjadi pada kehamilan preterm sebelum kehamilan 37 minggu maupun kehamilan aterm. Ketuban pecah dini termasuk dalam kehamilan beresiko tinggi. Jika menunggu persalinan spontan akan menaikkan insidensi *chorioamnionitis*, persalinan prematur, dan deformitas janin, tetapi jika segera mengakhiri kehamilan akan meningkatkan insidensi bedah *sectio caesarea*. Penelitian ini bertujuan untuk menggambarkan asuhan keperawatan perioperatif pada pasien G₁P₀A₀ + KPD dengan tindakan *sectio caesarea* di ruang operasi.

Peneliti menggunakan pendekatan dengan fokus asuhan keperawatan *perioperatif* yaitu *preoperatif*, *intraoperatif*, dan *postoperatif*. Subyek asuhan keperawatan ini difokuskan pada satu orang pasien ibu hamil dengan diagnosa medis KPD dengan rencana operasi *sectio caesarea*. Penyusunan laporan tugas akhir ini menggunakan teknik pengambilan data dengan observasi, wawancara, pemeriksaan fisik, dan studi dokumentasi.

Berdasarkan pengkajian didapatkan hasil bahwa saat *preoperatif* klien mengatakan khawatir karena baru pertama kali menjalani operasi, wajah klien tegang, banyak bertanya tentang prosedur operasi, dan didapatkan skor ZSAS 61. Intervensi yang dilakukan, menjelaskan prosedur operasi *sectio caesarea* serta sensasi yang mungkin dialami, dan melatih tehnik relaksasi nafas dalam. Evaluasi keperawatan yang didapatkan adalah masalah ansietas belum teratasi.

Pada *intraoperatif* dilakukan spinal *anestesi*, pemajanan instrumen bedah, dilakukan insisi pembedahan, penggunaan *pen cutter*, dan *plate diatermi*. Intervensi yang dilakukan menggunakan ESU, mencatat jumlah pemakaian bhp (*surgical safety checklist*). Evaluasi keperawatan yang didapatkan adalah masalah cedera tidak terjadi.

Pada *postoperatif* klien mengeluh dingin dengan suhu tubuh 34,8°C, nyeri luka *post* operasi dengan skala 6, dan takut untuk bergerak. Intervensi yang dilakukan melakukan penghangatan pasif dan memberikan terapi musik klasik. Evaluasi keperawatan yang didapatkan adalah masalah risiko hipotermia menurun dan nyeri akut berkurang.

Kata Kunci: Ketuban Pecah Dini, *Sectio Caesarea*, Asuhan Keperawatan *Perioperatif*

**HEALTH POLYTECHNIC OF TANJUNGPUR
NURSING MAJOR
NURSE PROFESSIONAL STUDY PROGRAM
Nurse Profession Final Report, July 2021**

Riska Anggun Sari

**PERIOPERATING NURSING CARE FOR G1P0A0 + KPD PATIENT
WITH SECTIO CAESAREA MEASURES IN THE OPERATING ROOM
OF BHAYANGKARA HOSPITAL BANDAR LAMPUNG IN 2021**

x + 67 pages, 17 tables, 2 pictures, and 3 attachments

ABSTRACT

Premature rupture of membranes (PROM) is discharge from the vagina after 22 weeks of pregnancy before the delivery process takes place and can occur in preterm pregnancies before 37 weeks of pregnancy or term pregnancy. Premature rupture of membranes is a high-risk pregnancy. Waiting for spontaneous delivery increases the incidence of chorioamnionitis, preterm labor, and fetal deformities, but terminating the pregnancy immediately increases the incidence of cesarean section. This research aims to describe perioperative nursing care for G1P0A0 + KPD patients with sectio caesarea in the operating room.

Researchers used an approach with a focus on perioperative nursing care, namely preoperative, intraoperative, and postoperative. The subject of this nursing care is focused on one pregnant woman patient with a medical diagnosis of KPD with a sectio caesarea surgery plan. The preparation of this final report uses data collection techniques by observation, interviews, physical examinations, and studies documentation.

Based on the assessment, it was found that preoperatively the patient said she was worried because it was the first time she had surgery, the patient's face was tense, asked a lot of questions about the surgical procedure, and got a ZSAS score of 61. The interventions carried out, explain the sectio caesarea operation procedure and the sensations that may be experienced, and practice deep breathing relaxation techniques. The nursing evaluation obtained is that the anxiety problem has not been resolved.

In intraoperative spinal anesthesia, exposing surgical instruments, surgical incisions are made, use a pen cutter, and *diathermy plate*. Interventions carried out using the ESU, surgical safety checklist. The nursing evaluation obtained was that the problem of injury did not occur.

In postoperative the patient complains of cold with a body temperature of 34.8°C, postoperative wound pain on a scale of 6, and fear of moving. Interventions carried out doing passive warm-ups and giving classical music therapy. The nursing evaluation obtained is the problem of decreased risk of hypothermia and reduced acute pain.

Keywords : PROM, Sectio Caesarea, Perioperative Nursing Care