

POLITEKNIK KESEHATAN TANJUNGPUR
PROGRAM STUDI KEPERAWATAN KOTABUMI
Laporan Tugas Akhir, Juni 2021

Anggun Pratiwi

Asuhan Keperawatan Dengan Gangguan Oksigenasi pada Kasus Stroke Non Hemoragik Terhadap Ny.S di Ruang Syaraf RSUD Mayjend HM Ryacudu Kotabumi Lampung Utara, 08-10 Maret 2021

xvi + 54 Halaman, 9 Tabel, 2 Gambar

RINGKASAN

WHO, Stroke adalah suatu keadaan dimana ditemukan tanda-tanda klinis yang berkembang cepat berupa deficit neurologic fokal dan global, yang dapat memberat dan berlangsung lama selama 24 jam atau lebih dan atau dapat menyebabkan kematian, tanpa adanya penyebab lain yang jelas selain vascular. Di Indonesia penyakit stroke menduduki posisi ketiga setelah jantung dan kanker. Sebanyak 28,5% penderita meninggal dunia atau total. Hanya 15 % saja yang dapat sembuh total dari serangan stroke dan kecacatan. Jumlah penyakit stroke di Indonesia terus meningkat. Jumlah penderita strok ditahun 2007 usia 45-54 sekitar 8%, sedangkan pada tahun 2013 mencapai 10%, sedangkan pada Risesdas 2013 mencapai 24% dan sisanya menderita kelumpuhan sebagian. Di Ruang Syaraf RSUD Mayjend HM Ryacudu didapatkan hasil penyakit stroke pada tahun 2020 dengan jumlah 391 orang menunjukkan stroke adalah penyakit terbanyak dan paling sering terjadi di Ruang Syaraf RSUD Mayjend HM Ryacudu. Bagaimana Asuhan Keperawatan dengan Gangguan Oksigenasi pada Kasus Stroke Non Hemoragi Terhadap Ny. S di Ruang Syaraf RSUD Mayjend HM Ryacudu Kotabumi, Lampung Utara.

Tujuan penulisan laporan tugas akhir mampu memberikan gambaran terkait Asuhan Keperawatan dengan Gangguan Kebutuhan Oksigenasi pada Kasus Stroke Non Hemoragi.

Saat dilakukan pengkajian kesadaran klien samnolen E4 V3 M3 klien mengeluh pusing, klien mengatakan lemas pada seluruh tubuhnya, klien mengatakan tidak bisa menggerakkan tangan dan kaki sebelah kanan, anggota keluarga mengatakan bahwa klien memiliki riwayat penyakit hipertensi sejak 3 tahun yang lalu, pada hasil pemeriksaan tanda-tanda vital didapat hasil tekanan darah 160/100 mmHg, denyut nadi 110x/menit lokasi pemeriksaan dinadi radialis dengan kualitas kuat, frekuensi pernafasan 20x/menit, suhu 36,5°C, aktivitas pasien dibantu keluarga, tampak menghabiskan 1/3 makanan yang diberikan, dan terlihat pelo. Diagnosa keperawatan yang sering muncul yaitu Gangguan Perfusi Jaringan Serebral berhubungan dengan hipertensi SLKI: perfusi jaringan serebral SIKI: monitor (pemantauan) tekanan intra kranial. Gangguan mobilitas fisik berhubungan dengan gangguan neuromuskular SLKI: mobilitas fisik SIKI: dukungan mobilisasi. defisit perawatan diri berhubungan dengan gangguan neuromuskular SLKI: perawatan diri SIKI: dukungan perawatan diri: BAB/BAK, dukungan perawatan diri: berpakaian, dukungan perawatan diri : mandi, Gangguan komunikasi verbal berhubungan dengan gangguan neuromuskular SLKI: Komunikasi verbal SIKI: Promosi Komunikasi : Defisit Bicara, Resiko defisit nutrisi berhubungan dengan faktor psikologis (keengganan untuk makan) SLKI: Status nutrisi SIKI: Manajemen nutrisi, Resiko Gangguan Integritas Kulit berhubungan dengan Faktor resiko kelembaban SLKI: Integritas kulit dan jaringan SIKI: Perawatan integritas kulit. Evaluasi yang didapatkan yaitu satu masalah teratasi dengan diagnosa gangguan perfusi jaringan serebral, dua masalah teratasi sebagian dengan diagnosa gangguan mobilitas fisik dan defisit perawatan diri.

Kesimpulan penulis dapat melakukan asuhan keperawatan secara nyata pada kasus Ny. S dapat dilakukan dengan baik sesuai dengan masalah yang dihadapi oleh Ny. S di Ruang Syaraf RSUD Mayjend HM Ryacudu. Saran perawat diruang syaraf juga dapat meningkatkan komunikasi terapeutik.

Kata kunci : Asuhan Keperawatan, Oksigenasi, Stroke Non Hemoragik
Sumber Bacaan :12 (2010-2020)

TANJUNGPURANG HEALTH POLYTECHNIC
KOTABUMI NURSING STUDY PROGRAM
Final Project Report, June 2021

Anggun Pratiwi

Nursing Care With Impaired Activity Needs in Non-Hemorrhagic Stroke Cases Against Ny.S in the Nervous Room at the General Hospital HM Ryacudu Kotabumi, North Lampung, March 2021

xvi + 54 Page, 9 Table, 2 Picture

ABSTRACT

According to WHO, stroke is a condition where clinical signs develop rapidly in the form of focal and global neurologic deficits, which can be severe and last for 24 hours or more and can cause death, without any other obvious cause other than vascular. In Indonesia, stroke occupies the third position after heart and cancer. A total of 28.5% of patients died or in total. Only 15% can recover completely from stroke and disability. The number of strokes in Indonesia continues to increase. The number of stroke sufferers in 2007 aged 45-54 was around 8%, while in 2013 it reached 10%, while at Riskesdas 2013 it reached 24% and the rest suffered from partial paralysis. In the Neurology Room of the Mayjend HM Ryacudu Hospital, the results of stroke in 2020 with a total of 391 people showed that stroke was the most common disease and most often occurred in the Nervous Room of the Mayjend HM Ryacudu Hospital. How is the Nursing Care of Patients with Oxygen Disorders in Non-Hemorrhagic Stroke Cases Against Ny. S in the Neurology Room at the General Hospital, HM Ryacudu, Kotabumi, North Lampung.

The purpose of writing a final project report is to be able to provide an overview of the Nursing Care of Patients with Impaired Oxygen Needs in Non-Hemorrhagic Stroke Cases.

When assessing the client's awareness of Samnolen E4 V3 M3 the client complains of dizziness, the client says he is weak all over his body, the client says he can't move his right hand and leg, family members say that the client has a history of hypertension since 3 years ago, on the results of the examination the signs -Vital signs obtained blood pressure 160/100 mmHg, pulse 110x/minute, location of radial pulse examination with strong quality, respiratory rate 20x/minute, temperature 36.5°C, patient's activity is assisted by family, seems to spend 1/3 of the food consumed. given, and looks silly pe. Nursing diagnoses that often arise are Cerebral Tissue Perfusion Disorders related to hypertension SLKI: cerebral tissue perfusion SIKI: intracranial pressure monitoring (monitoring). Impaired physical mobility associated with neuromuscular disorders SLKI: physical mobility SIKI: mobilization support. self-care deficit related to neuromuscular disorders SLKI: self-care SIKI: self-care support: defecation, self-care support: dressing, self-care support: bathing, Impaired verbal communication related to neuromuscular disorders SLKI: Verbal communication SIKI: Communication promotion: Deficit Speaking, Risk for nutritional deficit related to psychological factors (reluctance to eat) SLKI: Nutritional status SIKI: Nutritional management, Risk for Impaired Skin Integrity related to moisture risk factors SLKI: Integrity of skin and tissues SIKI: Skin integrity care. The evaluation obtained was that one problem was resolved with a diagnosis of cerebral tissue perfusion disorder, two problems were partially resolved by a diagnosis of impaired physical mobility and self-care deficit.

The conclusion of the author can perform real nursing care in the case of Mrs. S can be done well according to the problems faced by Mrs. S in the Neurology Room of the General Hospital, HM Ryacudu. The nurse's suggestion in the neurology room can also improve therapeutic communication.

Keywords : Nursing Care, Oxygenation, Non-Hemorrhagic Stroke
Reading Source : 12 (2010-2020)