

POLITEKNIK KESEHATAN TANJUNGPUR  
PRODI KEPERAWATAN KOTABUMI  
Laporan Tugas Akhir, Mei 2020  
Endah Nurwidayanti,

Asuhan Keperawatan Kasus Diabetes Melitus pada Tn.R. dengan Ketidakstabilan Kadar Glukosa Dalam Darah pada Kasus Diabetes Melitus Terhadap Tn.R di Ruang Fresia 305 RSUD Handayani Kotabumi Lampung Utara Tanggal 23-25 Maret 2020.

xiii + 84 halaman + 6 tabel, 3 gambar

#### RINGKASAN

*Diabetes mellitus tipe 2* merupakan penyakit hiperglikemia akibat insensivitas sel terhadap insulin mungkin sedikit menurun atau berada dalam rentang normal. Data pasien rawat inap RSUD Handayani Kotabumi Lampung Utara penderita DM sebanyak 22 orang pada tahun 2019.

Tujuan penulisan laporan tugas akhir ini adalah menggambarkan tentang asuhan keperawatan DM pada Tn.R dengan *Ketidakstabilan Kadar Glukosa Dalam Darah* di ruang Fresia RSUD Handayani Kotabumi Lampung Utara tanggal 23-25 Maret 2020. Data yang didapatkan saat pengkajian klien mengatakan mual ingin muntah, nyeri uluhati, BAK terus menerus, frekuensi BAK lebih dari 18 kali di malam hari, haus terus menerus, GDS >200 mg/dL, kadar glukosa urin 160-180 mg/dL, sesak nafas, mulut terasa kering, tidak nafsu makan, berat badan turun, dan klien mengatakan sulit tidur.

Diagnose keperawatan yang muncul pada klien yaitu *Ketidakstabilan Kadar Glukosa Dalam Darah, Defisit Nutrisi, Gangguan Pola Tidur*. Rencana yang ditegakkan antara lain NOC: Keperawatan Hiperglikemia (2111), Kadar Glukosa Dalam Darah (2300), Status Nutrisi (1004), Status Nutrisi: Asupan Nutrisi (1009), Tidur (0004), kelelahan : Efek Yang Mengganggu (0008), Tingkat Kelelahan (0007) dan NIC: Manajemen Hiperglikemia (2120), Monitor Nutrisi (1160), Manajemen Nutrisi (1100), Bantuan Peningkatan Berat Badan (1240), Peningkatan Tidur (1850), Manajemen Lingkungan (1850).

Implementasi yang ditegakkan antara lain Monitor kadar glukosa darah, sesuai indikasi, Monitor tanda dan gejala hiperglikemia : pandangan kabur, kelemahan, Berikan insulin sesuai resep (Injeksi insulin 15 unit/5cc (IM)), Batasi aktivitas ketika kadar glukosa darah lebih dari 250 mg/dL, khususnya jika ketonuria terjadi. Hasil evaluasi pada ketiga diagnose semua masalah teratasi. Kesimpulan laporan ini teori proses keperawatan pada DM sesuai dengan kondisi klien. Saran dari laporan ini diharapkan dapat dijadikan sebagai acuan dalam melakukan proses asuhan keperawatan mulai dari pengkajian sampai evaluasi baik bagi bidang keilmuan maupun praktisi keperawatan di Rumah Sakit.

Kata Kunci : Diabetes Melitus Tipe 2, Asuhan Keperawatan, Gangguan Kebutuhan Nutrisi

Daftar Bacaan : 16 (2010-2020)

POLITEKNIK KESEHATAN TANJUNGPUR  
PRODI KEPERAWATAN KOTABUMI  
Final Project Report, May 2020  
Endah Nurwidayanti

Nursing Care for Diabetes Mellitus Cases in Mr.R. with instability of blood glucose levels in the case of diabetes mellitus against Mr. R in Fresia Room 305 RSU Handayani Kotabumi North Lampung March 23-25, 2020.

xiii + 84 pages + 6 tables, 3 pictures

### ABSTRACT

Type 2 diabetes mellitus is a hyperglycemic disease due to cell insensitivity to insulin which may be slightly decreased or within the normal range. Hospital inpatient data. Handayani Kotabumi North Lampung with DM as many as 22 people in 2019.

The purpose of writing this final project report is to describe the nursing care of DM in Mr. R with the instability of blood glucose levels in the Fresia Hospital room. Handayani Kotabumi North Lampung on March 23-25, 2020. Data obtained during the client's assessment said that nausea wanted to vomit, ulcerative pain, urinating continues, frequency of urinating more than 18 times at night, continuous thirst, GDS > 200 mg / dL, urine glucose levels 160-180 mg / dL, shortness of breath, dry mouth, no appetite, weight loss, and the client says difficulty sleeping.

Nursing diagnoses that appear on the client are the instability of blood glucose levels, nutritional deficits, disturbed sleep patterns. The established plans include NOC: Severity of Hyperglycemia (2111), Glucose Levels (2300), Nutrition Status (1004), Nutrition Status: Nutrition (1009), Sleep (0004), Fatigue: Disruptive Effects (0008), Nutrition Level (1004), Nutrition Status: Nutrition (1009), Sleep (0004), Fatigue: Disruptive Effects (0008) Fatigue (0007) and NIC: Hyperglycemia Management (2120), Nutrition Monitor (1160), Nutrition Management (1100), Weight Loss Assistance (1240), Sleep Improvement (1850), Environmental Management (1850).

Implemented implementations include monitoring blood glucose levels, as indicated, Monitor for signs and symptoms of hyperglycemia: blurred vision, weakness, Give insulin as prescribed (Insulin injection of 15 units / 5cc (IM)), Limit activity when blood glucose levels are more than 250 mg / dL, especially if ketonurin occurs. The results of the evaluation on all three diagnoses were resolved.

The conclusion of this report is the theory of the nursing process in DM according to client conditions. Suggestions from this report are expected to be used as a reference in carrying out the nursing care process from review to evaluation both for the scientific field and nursing practitioners in the Hospital.

Keywords: Type 2 Diabetes Mellitus, Nursing Care, Impaired Nutritional Needs

Reading List : 16 (2010-2020)