

**POLTEKKES TANJUNGPINANG**  
**JURUSAN KEPERAWATAN TANJUNGPINANG**  
**PROGRAM STUDI DIII KEPERAWATAN TANJUNGPINANG**

Laporan Karya Tulis Ilmiah, 16 Mei 2023  
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**ASUHAN KEPERAWATAN GANGGUAN KEBUTUHAN  
OKSIGEN PADA PASIEN STROKE DI RUANG ICU  
RSUD Dr. H. ABDUL MOELOEK  
TAHUN 2023**

xiii+ 71 halaman + 8 gambar + 2 tabel + 7 lampiran

**ABSTRAK**

Stroke merupakan penyakit serebrovaskuler yang terjadi karena berkurangnya aliran darah dan oksigen ke otak, penyebab terjadinya stroke karena sumbatan, penyempitan, dan pecahnya pembuluh darah. Penulisan ini dilakukan untuk memberikan gambaran perbandingan pelaksanaan asuhan keperawatan gangguan kebutuhan oksigenasi pada pasien stroke Hemoragik dan Non Hemoragik diruang ICU RSUD Dr. H. Abdul Moeloek Provinsi Lampung. Penulisan ini menggunakan pendekatan studi kasus asuhan keperawatan yang meliputi proses keperawatan mulai dari pengkajian, diagnosis, intervensi, implementasi, serta evaluasi keperawatan. Teknik pengumpulan data meliputi wawancara, observasi, pemeriksaan fisik dan pemeriksaan penunjang. Asuhan keperawatan dilakukan selama tiga hari mulai dari tanggal 09 – 12 Januari 2023. Diagnosis keperawatan fokus pada kedua pasien dengan gangguan pemenuhan kebutuhan oksigenasi yaitu bersihan jalan napas tidak efektif dan resiko perfusi serebral tidak efektif. Intervensi keperawatan sesuai SIKI (2018) yaitu manajemen jalan napas dan manajemen peningkatan tekanan intrakranial. Hasil asuhan yang didapatkan pada klien 1 sputum berwarna kuning kental, GCS E<sub>1</sub>M<sub>1</sub>V<sub>ETT</sub>, suara napas masih terdengar gargling, suara napas terdengar *wheezing* bunyi napas masih terdengar ronchi, tanda-tanda vital Tekanan Darah 129/81 mmHg, frekuensi nadi 117 x/menit, frekuensi pernapasan 23 x/menit, suhu 36,5<sup>0</sup>C, MAP 97 mmHg, SPO<sub>2</sub> 99%. Sedangkan pada klien 2 terdapat suara napas gargling berkurang, bunyi napas ronchi berkurang, warna sekret bening, GCS E<sub>2</sub>M<sub>5</sub>V<sub>2</sub>, tanda-tanda vital Tekanan Darah 149/82 mmHg, frekuensi pernapasan 20 x/menit, SPO<sub>2</sub> 100%, frekuensi nadi 50 x/menit, suhu 36,1<sup>0</sup>C, MAP 104,34 mmHg. Saran dari penulis yaitu lebih cermat dalam melakukan asuhan keperawatan agar dapat menghasilkan asuhan keperawatan yang komprehensif.

Kata Kunci : Stroke, Oksigen  
Daftar Pustaka: 35 (2015 – 2022)

**TANJUNGPURAN HEALTH POLYTECHNIC  
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**NURSING CARE OF DISORDERED OXYGEN NEEDS  
IN STROKE PATIENTS IN THE ICU ROOM  
RSUD Dr. H. ABDUL MOELOEK  
IN 2023**

xiii+ 71 pages + 2 tables + 8 pictures + 7 attachments

**ABSTRACT**

Stroke is a cerebrovascular disease that occurs due to reduced blood flow and oxygen to the brain, the cause of stroke is due to blockage, narrowing, and rupture of blood vessels. This writing was conducted to provide a comparative description of the implementation of nursing care for impaired oxygenation needs in Hemorrhagic and Non-Hemorrhagic stroke patients in the ICU room of RSUD Dr. H. Abdul Moeloek Lampung Province. This writing uses a case study approach to nursing care which includes the nursing process starting from assessment, diagnosis, intervention, implementation, and nursing evaluation. Data collection techniques include interviews, observation, physical examination and supporting examinations. Nursing care was carried out for three days from 09-12 January 2023. Nursing diagnoses focused on the two patients with impaired oxygenation requirements, namely ineffective airway clearance and the risk of ineffective cerebral perfusion. Nursing interventions according to SIKI (2018), namely airway management and management of increased intracranial pressure. The results of care obtained for the client 1 sputum is thick yellow, GCS E<sub>1</sub>M<sub>1</sub>V<sub>ETT</sub>, breath sounds are still gargling, breath sounds are still rhonchi, vital signs Blood pressure 129/81 mmHg, pulse rate 117 x/minute, respiratory rate 23 x/ minutes, temperature 36.5 °C, MAP 97mmHg, SPO<sub>2</sub> 99%. Whereas on client 2 there is reduced gargling breath sound, reduced crackles, color of clear secretions, GCS E<sub>2</sub>M<sub>5</sub>V<sub>2</sub>, vital signs Blood pressure 149/82 mmHg, respiratory rate 20 x/minute, SPO<sub>2</sub> 100%, pulse rate 50 x/minute, temperature 36.1 °C, MAP 104.34 mmHg. Suggestions from the author are to be more careful in carrying out nursing care in order to produce comprehensive nursing care.

Keyword : Stroke, Oxygen

Bibliography : 35 (2015 – 2022)