

ABSTRAK

**POLITEKNIK KESEHATAN TANJUNGKARANG
JURUSAN KEPERAWATAN
PROGRAM STUDI PROFESI NERS**
Karya Ilmiah Akhir Ners, Agustus 2023

RIA HERMAWATI

**ASUHAN KEPERAWATAN GANGGUAN PENYAPIAHAN VENTILATOR
PADA PASIEN POST CRANIOTOMY DI RUANG ICU RSUD DR. H.
ABDUL MOELOEK PROVINSI LAMPUNG**
(xii+64 halaman, 14 tabel, 1 gambar, 4 lampiran)

Ventilator-associated pneumonia (VAP) merupakan salah satu komplikasi yang dapat terjadi pada pasien *post craniotomy* yang menggunakan ventilator. Tujuan penulisan karya ilmiah ini adalah untuk mengetahui cara mencegah terjadinya VAP pada pasien *post craniotomy* dengan masalah keperawatan gangguan penyapihan ventilator. Karya ilmiah ini menggunakan desain asuhan keperawatan dengan subjek asuhan adalah 2 pasien *post craniotomy* dengan masalah keperawatan gangguan penyapihan ventilator dan diberikan intervensi menggunakan prosedur *bundle VAP*, selanjutnya data dianalisis melalui proses keperawatan. Hasil yang diperoleh dari pemberian asuhan pada kedua subjek didapatkan pada subjek pertama dengan kondisi awal terpasang *Tracheostomy Tube* (TT) dan menggunakan ventilator selama 6 hari serta terdapat tanda adanya peningkatan suhu tubuh, *leukositosis* serta terdapat *secret nonpurulen*, pada akhir pemberian asuhan selama tiga hari didapatkan bahwa subjek mampu dilakukan penyapihan ventilator walaupun belum mampu lepas sepenuhnya serta tidak terjadi VAP. Sedangkan pada subjek kedua didapatkan kondisi awal subjek terpasang *Endotracheal Tube* (ETT) dan telah terpasang ventilator selama 3 hari dan pada akhir pemberian asuhan didapatkan bahwa subjek mampu lepas dari ventilator dan tidak terjadi VAP. Hasil yang didapatkan berbeda pada kedua subjek disebabkan oleh kondisi awal kedua subjek yang berbeda yang dipengaruhi oleh perbedaan luas perdarahan, tingkat kesadaran sebelum operasi serta usia kedua berbeda. Namun intervensi pemberian bundle VAP pada kedua subjek telah terbukti mampu mencegah VAP.

Kata kunci: *craniotomy*, *ventilator bundle*, *Ventilator-associated pneumonia* (VAP)

Referensi: 29 (2008-2022)

ABSTRACT

TANJUNGKARANG HEALTH POLYTECHNIC

NURSING DEPARTMENT

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(xii+ 64 pages, 14 tables, 1 figure, 4 appendices)

Ria Hermawati

NURSING CARE WITH OF VENTILATOR WEANING DISORDERS IN POST-CRANIOTOMY PATIENTS IN THE ICU ROOM OF RSUD DR. H. ABDUL MOELOEK LAMPUNG PROVINCE

Ventilator-associated pneumonia (VAP) is one of the complications that can occur in post-craniotomy patients who use ventilators. The purpose of writing this scientific paper is to find out how to prevent VAP in post-craniotomy patients with nursing problems of ventilator weaning disorders. This scientific work uses a nursing care design with the subject of care being 2 post craniotomy patients with nursing problems of ventilator weaning disorders and given interventions using the VAP bundle procedure, then the data is analyzed through the nursing process. The results obtained from the provision of care to the two subjects were obtained in the first subject with the initial condition attached to the Tracheostomy Tube (TT) and using a ventilator for 6 days and there were signs of an increase in body temperature, leukocytosis and there was a nonpurulent secret, at the end of the provision of care for three days it was found that the subject was able to wean off the ventilator even though he was not able to fully release and there was no VAP. Whereas in the second subject, it was found that the initial condition of the subject was attached to an Endotracheal Tube (ETT) and had been attached to a ventilator for 3 days, and at the end of providing care it was found that the subject was able to be released from the ventilator and no VAP occurred. The results obtained were different in the two subjects due to the different initial conditions of the two subjects which were influenced by differences in the extent of bleeding, the level of consciousness before surgery, and the age of the two subjects. However, the intervention of providing VAP bundles in both subjects has proven to be able to prevent VAP.

Keyword: craniotomy, ventilator bundle, Ventilator-associated pneumonia (VAP)

Reference: 29 (2008-2022)