

## STANDARDIZED NUTRITION CARE PROCESS FOR CHILD PATIENTS WITH DENGUE HEMORRHAGIC FEVER (DHF) AT WATES REGIONAL GENERAL HOSPITAL

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### ABSTRACT

**Background :** Dengue Hemorrhagic Fever (DHF) is still one of the main public health problems in Indonesia. Dengue Hemorrhagic Fever (DHF) is an acute febrile disease caused by one of the four serotypes of the virus from the genus Flavivirus known as the dengue virus. According to data from the DIY Health Office, the number of cases of dengue hemorrhagic fever in Kulon Progo Regency was 203 cases. Children are an age that is susceptible to dengue fever. The provision of nutritional care is necessary for pediatric dengue hemorrhagic fever patients to maintain optimal nutritional status and prevent disease severity.

**Research Objectives :** To determine the implementation of the Standardized Nutrition Care Proses in Children Patients with Dengue Hemorrhagic Fever (DHF) at the Wates General Hospital.

**Research Methods :** This type of research is a descriptive study with a case study design.

**Results and Discussion :** Nutrition screening using the Strong Kids form showed that patients were at moderate risk of malnutrition and needed a nutritional care plan. From the eating history data, the patient had poor eating habits. From anthropometric data, the nutritional status of overweight patients is based on the Z-Score of BB/TB. Biochemical data on the patient's low leukocyte and platelet levels. Physical/clinical data showed that the patient had fever, nausea and weakness. Nutritional diagnosis includes the domain of intake and behavior. Nutritional interventions were carried out according to dietary prescriptions. The diet is adjusted according to the patient's condition. The results of monitoring and evaluation are related to food intake, clinical physical condition, and biochemical examination. Nutrition education is given every time food is delivered to the patient's room. Meanwhile, nutrition counseling was conducted once on the last day of monitoring and evaluation.

**Conclusion :** From the results of the study, it can be seen that the nutritional status of the patient is poor nutrition. The results of monitoring and evaluation on blood pressure increased but nausea and vomiting disappeared. Meanwhile, food intake decreased on the first and second day but increased again on the third day.

**Keywords :** Dengue Hemorrhagic Fever, Standardized Nutrition Care Process.

PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN ANAK PENYAKIT  
DEMAM BERDARAH DENGUE (DBD) DI RUMAH SAKIT UMUM  
DAERAH WATES

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**ABSTRAK**

**Latar Belakang :** Penyakit DBD ini masih merupakan salah satu masalah kesehatan masyarakat yang utama di Indonesia. Demam Berdarah *Dengue* (DBD) adalah penyakit demam akut yang disebabkan oleh salah satu dari empat serotip virus dari genus *Flavivirus* dikenal dengan nama virus *dengue*. Menurut data Dinas Kesehatan DIY, jumlah kasus demam berdarah dengue di Kabupaten Kulon Progo sebanyak 203 kasus. Anak-anak merupakan umur yang *susceptible* terserang DBD. Pemberian asuhan gizi diperlukan bagi pasien anak demam berdarah dengue untuk mempertahankan status gizi yang optimal dan mencegah terjadinya keparahan penyakit.

**Tujuan Penelitian :** Mengetahui pelaksanaan Proses Asuhan Gizi Terstandar pada Pasien Anak Penyakit Demam Berdarah Dengue (DBD) di Rumah Sakit Umum Daerah Wates.

**Metode Penelitian :** Jenis penelitian ini adalah penelitian deskriptif dengan desain studi kasus.

**Hasil dan pembahasan :** Skrining gizi menggunakan form *Strong Kids* diperoleh bahwa pasien berisiko sedang malnutrisi sehingga membutuhkan rencana asuhan gizi. Dari data riwayat makan pasien memiliki kebiasaan makan yang kurang baik. Dari data antropometri status gizi pasien gizi lebih berdasarkan Z-Score BB/TB. Data biokimia kadar leukosit dan trombosit pasien rendah. Data fisik/klinis menunjukkan pasien mengalami demam, mual dan lemas. Diagnosis gizi meliputi domain *intake* dan *behaviour*. Intervensi gizi dilakukan sesuai dengan preskripsi diet. Pemberian diet disesuaikan dengan kondisi pasien. Hasil monitoring dan evaluasi berkaitan dengan asupan makan, keadaan fisik klinis, dan pemeriksaan biokimia. Edukasi gizi diberikan setiap makanan diantar ke kamar pasien. Sedangkan konseling gizi dilakukan satu kali di hari terakhir monitoring dan evaluasi.

**Kesimpulan :** Dari hasil penelitian dapat diketahui bahwa status gizi pasien yakni gizi buruk. Hasil monitoring dan evaluasi pada tekanan darah meningkat tetapi mual dan muntah hilang. Sedangkan untuk asupan makan terjadi penurunan pada hari ke-1 dan ke-2 namun kembali meningkat diharike-3.

**Kata Kunci :** Demam Berdarah *Dengue*, Proses Asuhan Gizi Terstandar.