STANDARDIZED NUTRITIONAL CARE PROCESS FOR NON-HEMORROGIC STROKE PATIENTS WITH HYPERTENSION AT PANEMBAHAN SENOPATI GENERAL HOSPITAL BANTUL YOGYAKARTA

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ABSTRACT

***Background**: Stroke is a brain blood vessel disease which is divided into two types, namely ischemic (non-hemorrhagic) stroke and hemorrhagic stroke. The sources of stroke which are thought to contribute to increasing the number of sufferers are food, stress and lifestyle factors, which will be detected by examining the patient's blood lipids. The patient's standardized nutritional care process must be in accordance with the needs so as not to increase the severity of the stroke suffered, so it is necessary to carry out appropriate nutritional care management to improve the patient's optimal nutritional status.*
***Objective**: To determine the implementation of the standardized nutritional care process for stroke patients at the Panembahan Senopati Regional General Hospital, Bantul, Yogyakarta.*
***Method**: This research uses a descriptive observational method with a case study design. The case study was conducted at the Panembahan Senopati Regional General Hospital, Bantul, Yogyakarta. The research subjects were stroke patients with inclusion criteria. The focus of the study is conducting nutritional screening, nutritional assessment, nutritional diagnosis, objectives of dietary prescriptions, dietary interventions, and monitoring evaluations on patients.*
***Results**: Nutritional screening using MNA-SF showed that the patient was malnourished. The results of the nutritional assessment showed that the patient was malnourished. The patient's nutritional status is calculated using the LiLA percentage indicating good nutritional status. A biochemical examination was carried out once, namely high HDL and LDL cholesterol levels. Physical examination of the cospomestic patient, difficulty swallowing, nausea, weakness, right hand dropping and dry skin. Supporting examinations carried out are ECG examination, CT scan of the head, adult PA thorax examination. 24-hour intake recall for severe deficit patients. The intervention given is the RGRCHOL diet, in the form of soft and filtered food orally with a frequency of eating 3x main meals and 2x snacks. The overall monitoring and evaluation results of food intake are unstable due to the patient's condition.*
***Conclusion**: The results of the examination showed that the patient was malnourished with good nutritional status. After monitoring and evaluating the patient, it was discovered that the patient's food intake was unstable and the patient's condition was getting better.*

***Keywords**: Stroke; implementation of nutritional care; food intake; case reports*

PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN STROKE NON HEMOROGIK DENGAN HIPERTENSI DI RUMAH SAKIT UMUM PANEMBAHAN SENOPATI BANTUL YOGYAKARTA

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ABSTRAK

Latar Belakang: Stroke merupakan penyakit pembuluh darah otak yang dibagi menjadi dua tipe yaitu stroke iskemik (non-hemorogik) dan stroke hemorogik. Sumber penyakit stroke yang diduga turut meningkatkan jumlah penderitan adalah faktor makanan, stress dan gaya hidup, yang akan terdeteksi pada pemeriksaan lemak darah penderita. Proses Asuhan Gizi Terstandar pasien harus sesuai dengan kebutuhan agar tidak meningkatkan keparahan penyakit Stroke yang diderita, sehingga perlu dilakukan penatalaksanaan asuhan gizi yang tepat untuk meningkatkan status gizi pasien yang optimal.
Tujuan: Mengetahui pelaksanaan proses asuhan gizi terstandar pada pasien penderita Stroke di Rumah Sakit Umum Daerah Panembahan Senopati Bantul Yogyakarta.
Metode: Penelitian ini menggunakan metode observasional deskriptif dengan desain Studi Kasus. Studi Kasus dilakukan di Rumah Sakit Umum Daerah Panembahan Senopati Bantul Yogyakarta. Subjek penelitian adalah pasien Stroke dengan kriteria inklusi. Fokus studi yaitu melakukan skrinning gizi, pengkajian gizi, diagnosis gizi, tujuan dari preskripsi diet, intervensi diet, dan monitoring evaluasi pada pasien.
Hasil: Skrinning Gizi menggunakan MNA-SF menunjukan pasien mengalami Malnutrisi. Hasil pengkajian gizi menunjukan pasien mengalami malnutrisi. Status gizi pasien dihitung menggunakan persentase LiLA menunjukan status gizi baik. Pemeriksaan biokimia dilakukan satu kali yaitu kadar HDL dan LDL cholesterol yang tinggi. Pemeriksaan fisik pasien cospomestis, kesulitan menelan, mual, lemas, tangan kanan pos jatuh dan kulit kering. Pemeriksaan penunjang yang dilakukan adalah Pemeriksaan EKG, Pemeriksaan CT Scan Kepala, Pemeriksaan Thorax PA Dewasa. Asupan recall 24 jam pasien defisit tingkat berat. Intervensi yang diberikan yaitu diet RGRCHOL, dengan bentuk makanan lunak dan saring melalui oral dengan frekuensi makan 3x makanan utama dan 2x selingan. Hasil monitoring dan evaluasi secara keseluruhan asupan makanan tidak stabil karena kondisi pasien.
Kesimpulan : Hasil pemeriksaan pasien mengalami malnutrisi dengan status gizi yang baik**.** Setelah dilakukan monitoring dan evaluasi pada pasien diketahui bahwa asupan makanan pasien tidak stabil dan keadaan pasien semakin membaik.

Kata kunci : Stroke; pelaksanaan asuhan gizi; asupan makan; case report