

**STANDARDIZED NUTRITIONAL CARE PROCESS FOR PATIENTS
WITH SUSPECTED CHF, ALO, ARRHYTHMIA, UTI, HYPOKALEMIA,
HYPONATREMIA, AKI AT NAKULA WARD, NYI AGENG SERANG
HOSPITAL, KULON PROGO**

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ABSTRACT

Background: Data from Riskesdas 2018 shows that the percentage of non-communicable diseases in 2018 was 3.8%, with one of the diseases whose prevalence increases every year being heart disease. Based on Riskesdas, the prevalence of heart disease in Indonesia among the entire population in 2018 diagnosed by doctors reached 1.5%. This figure indicates an increase compared to the prevalence in 2013, which was only 0.5% across Indonesia. Yogyakarta Special Region (DIY) ranks third with a prevalence of 2%.

Objective: To examine the implementation of standardized nutritional care processes in suspected CHF patients with ALO, Arrhythmia, UTI, Hypokalemia, Hyponatremia, AKI at Nakula Ward, Nyi Ageng Serang Regional General Hospital, Kulon Progo.

Methods: This descriptive research utilized a case study design. Data collection involved interviews, anthropometric measurements, secondary data review, observations, and documentation.

Results: Nutritional screening using the MNA form indicated that patients were at risk of malnutrition. Mid-upper arm circumference was 24 cm, indicating malnutrition status. Elevated creatinine, low sodium and potassium levels, high troponin, positive urine protein, positive occult blood in urine, and positive urine leukocytes were observed. The patient's eating habits were inadequate and did not meet daily nutritional needs. Nutritional diagnosis included intake and habit domains. Dietary adjustments were made according to the patient's capabilities. Monitoring and evaluation showed leukocyte levels returning to normal, sodium approaching normal, no change in potassium levels, and troponin normal. Physical/clinical complaints persisted, and dietary intake did not reach targets.

Conclusion: The research revealed that the patient had malnutrition. Clinical condition included congestive heart failure and dyspnea. Laboratory findings showed elevated creatinine, low sodium and potassium, high troponin, positive urine protein, positive occult blood in urine, and positive urine leukocytes. Monitoring and evaluation indicated leukocyte normalization, sodium approaching normal, unchanged potassium levels, and normal troponin. Physical/clinical complaints persisted, and dietary intake did not meet targets.

Keywords: CHF, ALO, Arrhythmia, UTI, Hypokalemia, Hyponatremia, AKI, Standardized Nutritional Care Process.

**PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN *CHF* suspek. *ALO*,
ARITMIA, *ISK*, *HIPOKALEMIA*, *HIPONATREMIA*, *AKI* DI BANGSAL
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ABSTRAK

Latar Belakang: Data Riskesdas tahun 2018 menunjukkan presentase penyakit tidak menular pada tahun 2018 sebanyak 3,8% dan salah satu penyakit yang prevalensinya meningkat setiap tahun adalah penyakit jantung. Data Riskesdas menunjukkan prevalensi penyakit jantung di Indonesia pada penduduk semua umur di tahun 2018 yang didiagnosis dokter mencapai 1,5% dari populasi di Indonesia. Angka ini menunjukkan peningkatan dibanding prevalensi tahun 2013 yang mencapai 0,5% di seluruh Indonesia. Provinsi DIY berada pada urutan ke-3 dengan prevalensi 2%.

Tujuan Penelitian: Mengkaji pelaksanaan proses asuhan gizi terstandar pada pasien CHF suspek. ALO, Aritmia, ISK, Hipokalemia, Hiponatremia, AKI di Bangsal Nakula RSUD Nyi Ageng Serang, Kulon Progo.

Metode: Jenis penelitian deskriptif, dengan desain penelitian studi kasus. Pengumpulan data dengan melakukan wawancara dan pengukuran antropometri, data sekunder, observasi, dan dokumentasi.

Hasil: Skrining gizi menggunakan formulir MNA didapatkan hasil pasien berisiko malnutrisi. Panjang LILA 24 cm, status gizi kurang. Kreatinin tinggi, natrium rendah, kalium rendah, troponin tinggi, protein urin positif, darah samar urin positif, dan leukosit urin positif, KU sedang, CM, sesak nafas. Kebiasaan makan pasien sehari-hari kurang baik, belum mencukupi kebutuhan pasien perhari. Diagnosis gizi meliputi domain asupan dan domain kebiasaan. Pemberian diet disesuaikan dengan kebutuhan pasien. Hasil monitoring dan evaluasi pasien leukosit normal, natrium meningkat mendekati normal, kalium tetap, dan troponin normal. Keluhan fisik/klinis masih ada, dan asupan makan belum mencapai target.

Kesimpulan: Dari hasil penelitian diketahui status gizi pasien gizi kurang. Kondisi pasien CM, sesak nafas. Hasil pemeriksaan kreatinin tinggi, natrium rendah, kalium rendah, troponin tinggi, protein urin positif, darah samar urin positif, dan leukosit urin positif. Berdasarkan hasil monitoring dan evaluasi leukosit normal, natrium mendekati normal, kalium tidak mengalami perubahan, dan troponin normal, keluhan fisik/klinis masih ada, dan asupan makan belum mencapai target.

Kata Kunci: CHF, ALO, Aritmia, ISK, Hipokalemia, Hiponatremia, AKI, Proses Asuhan Gizi Terstandar.