

KEJADIAN PENINGKATAN TIK INTRA OPERASI CRANIOTOMI DENGAN GENERAL ANESTESI

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ABSTRAK

Latar belakang: Penatalaksanaan tekanan intrakranial merupakan salah satu bagian terpenting dalam menjaga keberhasilan operasi kraniotomi dengan general anestesi. Tekanan intrakranial harus selalu dipertahankan dalam keadaan yang stabil selama operasi sebagaimana menjaga kestabilan hemodinamik sistemik, karena dua hal tersebut saling berkaitan, dan berlanjut setelah operasi selesai.

Tujuan: Tugas akhir neuroanestesi ini bertujuan untuk menerapkan tindakan elevasi kepala 30 derajat pada kejadian peningkatan TIK intra operasi kraniotomi dengan general anestesi.

Metode: Dalam penulisan studi kasus ini, penulis menggunakan metode deskriptif dengan pendekatan proses asuhan keperawatan anestesi yang meliputi tahap pengkajian, masalah kesehatan anestesi, perencanaan keperawatan, implementasi, dan evaluasi.

Hasil: Intervensi posisi elevasi kepala 30 derajat efektif dalam menurunkan tekanan intrakranial (TIK). Dengan mengatur posisi kepala pasien dengan elevasi 30 derajat dapat meningkatkan *venous drainage* dari kepala dan menyebabkan penurunan tekanan darah sistemik yang dapat dikompromi oleh tekanan perfusi serebral, sehingga dapat menurunkan tekanan darah dan mengurangi tekanan intrakranial (TIK).

Kesimpulan: Intervensi elevasi kepala 30 derajat terhadap Ny. H dan Ny. T efektif dalam menurunkan tekanan intrakranial (TIK) intra operasi kraniotomi.

Kata kunci : Kraniotomi, General Anestesi, Tekanan Intrakranial, Elevasi Kepala 30 Derajat

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INCREASED ICT INTRA-OPERATIVE CRANIOTOMY WITH GENERAL ANESTHESIA

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ABSTRACT

Background: Management of intracranial pressure is one of the most important parts in maintaining the success of craniotomy surgery under general anesthesia. Intracranial pressure must always be maintained in a stable state during surgery as well as maintaining systemic hemodynamic stability, because these two things are interrelated, and continue after the operation is complete.

Objective: To apply 30 degrees of head elevation in the event of an increase in intraoperative ICP during craniotomy under general anesthesia.

Method: In writing this case study, the author used a descriptive method, describing the anesthesia nursing care process approach which includes the assessment stage, anesthesia health problems, nursing planning, implementation and evaluation.

Results: The 30 degree head elevation intervention was effective in reducing intracranial pressure (ICP). By positioning the patient's head with an elevation of 30 degrees, it can increase venous drainage from the head and cause a decrease in systemic blood pressure which can be compromised by cerebral perfusion pressure, thereby reducing blood pressure and reducing intracranial pressure (ICP).

Conclusion: The 30 degree head elevation intervention for Mrs. H and Mrs. T is effective in reducing intracranial pressure (ICP) during craniotomy surgery.

Key words: Craniotomy, General Anesthesia, Intracranial Pressure, Head Elevation 30 Degrees

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