

**ASUHAN GIZI TERSTANDAR PADA PASIEN DENGAN POST  
CRANIOTOMI DASAR TENGGORAK EKSISI TUMOR,  
HIDROCEFALUS ON VENTRICULOPERITONEAL (VP) SHUNT  
KANAN PARINAUD SINDROM ET CAUSA (ec) TUMOR INTRINSIK  
CURIGA TOTAL GLIOMA DI RUANG ICU RAJAWALI  
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**ABSTRAK**

**Latar belakang:** Pasien kritis pasca operasi adalah pasien yang mengalami ketidakstabilan fisiologis, kegagalan organ, dan ketergantungan pada alat medis setelah menjalani operasi serta sering mengalami penurunan kesadaran, keterbatasan mobilisasi, serta ketidakstabilan pada status hemodinamik, respirasi, saturasi oksigen, dan tekanan darah. Pasien di unit perawatan intensif umumnya juga kesulitan memenuhi kebutuhan nutrisinya, sehingga memerlukan implementasi nutrisi klinis sebagai bagian penting dari terapi komprehensif.

**Tujuan:** Mengetahui proses Asuhan Gizi Terstandar Pada Pasien Dengan Post Craniotomi Dasar Tengkorak Eksisi Tumor, Hidrocefalus on Ventriculoperitoneal (VP) Shunt Kanan. Parinaud Sindrom Et Causa (ec) Tumor Intrinsik Curiga Total Glioma di Ruang ICU Rajawali RSUP Dr Kariadi Semarang.

**Metode:** Penelitian ini menggunakan jenis penelitian deskriptif. Desain penelitian ini adalah studi kasus.

**Hasil:** Setelah dilakukan proses asuhan gizi terstandar selama 3 hari berturut-turut, Hasil pengkajian status gizi yaitu data pengukuran data antropometri gizi baik, data biokimia diperoleh kadar Haemoglobin pasien rendah, data klinis/fisik pasien normal dengan kesadaran tersedasi, data Riwayat makan atau kebiasaan makan pasien baik, Monitoring yang dilakukan meliputi biokimia, serta asupan makan. Diperoleh hasil asupan makan meningkat bertahap (mencapai 70%)

**Kesimpulan :** Dari hasil penelitian ini menggunakan MST hasil pasien berisiko mengalami malnutrisi, diagnose gizi menetap, Kebutuhan gizi pasien yaitu energi sebesar 1861,20 kkal, protein 80,65 gram, lemak 62,04 gram, karbohidrat 245,467 gram, Asupan makan pasien sudah mencapai target.

**Kata kunci :** Asuhan Gizi Terstandar, Hidrocefalus, Kraniotomi, VP shunt, Glioma.

**STANDARD NUTRITIONAL CARE FOR PATIENTS WITH POST  
CRANIOTOMY BASE OF SKULL EXCISION TUMOR,  
HYDROCEPHALUS ON VENTRICULOPERITONEAL (VP) RIGHT  
SHUNT PARINAUD SYNDROME ET CAUSA (ec) INTRINSIC TUMOR  
SUSPICIOUS TOTAL GLIOMA IN RAJAWALI ICU ROOM  
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**ABSTRACT**

**Background:** Postoperative critical patients are patients who experience physiological instability, organ failure, and dependence on medical equipment after undergoing surgery and often experience decreased consciousness, limited mobility, and instability in hemodynamic status, respiration, oxygen saturation, and blood pressure. Patients in intensive care units generally also have difficulty meeting their nutritional needs, requiring the implementation of clinical nutrition as an important part of comprehensive therapy.

**Objective:** To determine the process of standardized nutritional care for patients with post-cranial base craniotomy, tumor excision, hydrocephalus on right ventriculoperitoneal (VP) shunt. Parinaud Et Causa Syndrome (ec) Intrinsic Tumor Suspicious Total Glioma in the Rajawali ICU Dr Kariadi Hospital Semarang.

**Method:** This research uses descriptive research. The design of this research is a case study.

**Results:** After carrying out a standardized nutritional care process for 3 consecutive days, the results of the nutritional status assessment were measurement data, anthropometric data, good nutrition, biochemical data obtained by low patient hemoglobin levels, clinical/physical data of normal patients with sedated consciousness, data on eating history or habits. The patient's diet is good. Monitoring carried out includes biochemistry and food intake. The results obtained gradually increased food intake (reaching 70%)

**Conclusion:** From the results of this study using MST, the patient was at risk of malnutrition, diagnosed with persistent nutrition, the patient's nutritional needs were energy of 1861.20 kcal, protein 80.65 grams, fat 62.04 grams, carbohydrates 245.467 grams, the patient's food intake had reached target.

**Keywords:** Standardized Nutritional Care, Hydrocefalus, Craniotomy, VP shunt, Glioma.