

PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN STROKE INFARK
DENGAN HIPERKOLESTEROL DAN HIPOKALEMIA DI RSUD MITRA
PARAMEDIKA

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ABSTRAK

Latar Belakang: Stroke adalah gangguan peredaran otak yang dapat mengakibatkan fungsi otak terganggu. Data Riskesdas 2013 prevalensi stroke nasional 12,1 per mil, sedangkan pada Riskesdas 2018 prevalensi stroke 10,9 per mil, tertinggi di Provinsi Kalimantan Timur (14,7 per mil), terendah di Provinsi Papua (4,1 per mil). Faktor risiko yang sangat berperan dalam timbulnya penyakit stroke adalah faktor risiko yang dapat dikontrol yaitu hiperkolesterol dan hipokalemia. Perlu adanya penanganan khusus agar dapat mengatasi masalah tersebut yaitu memberikan asuhan gizi dengan Proses Asuhan Gizi Terstandar (PAGT).

Tujuan Penelitian: Mengkaji proses pelaksanaan Asuhan Gizi Terstandar pada Pasien Stroke Infark dengan Hiperkolesterol dan Hipokalemia di RSUD Mitra Paramedika.

Metode Penelitian: Jenis penelitian yang digunakan pada penelitian ini adalah observasional deskriptif dengan desain penelitian Studi Kasus (*Case Study*).

Hasil dan Pembahasan: Skrining gizi menggunakan MNA diperoleh bahwa pasien berisiko malnutrisi. Dari data riwayat gizi, pasien memiliki kebiasaan yang kurang baik. Dari data antropometri status gizi berdasarkan IMT termasuk dalam kategori gizi baik. Data biokimia kadar natrium, kalium, limfosit, dan monosit rendah, untuk kadar GDS, granulosit, LDL, dan MCV tinggi. Data fisik/klinis pasien diperoleh bahwa nadi dan tekanan darah tinggi. Diagnosis gizi meliputi domain *intake*, domain klinis, dan domain *behaviour*. Intervensi gizi dilakukan sesuai dengan tujuan dan preskripsi diet. Pemberian diet sesuai kondisi pasien. Hasil monitoring dan evaluasi berkaitan dengan data fisik/klinis dan asupan makan. Edukasi gizi dilakukan setiap hari dan konseling gizi dilakukan sebelum pasien pulang dari rumah sakit.

Kesimpulan: Dari hasil penelitian dapat ditemukan bahwa status gizi pasien baik. Hasil monitoring dan evaluasi fisik/klinis pada nadi dan tekanan darah menjadi normal sedangkan hasil monitoring asupan makan selama intervensi semakin hari semakin meningkat.

Kata Kunci : Stroke Infark, Hiperkolesterol, Hipokalemia, Proses Asuhan Gizi Terstandar

STANDARDIZED NUTRITION CARE PROCESS IN STROKE INFARCTION
PATIENTS WITH HYPERCHOLESTEROL AND HYPOKALEMIA IN MITRA
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ABSTRACT

Background: Stroke is a disorder of the circulatory brain that can result in impaired brain function. Riskesdas data 2013 national stroke prevalence 12.1 per mile, while in Riskesdas 2018 the prevalence of stroke 10.9 per mile, the highest in East Kalimantan Province (14.7 per mile), the lowest in Papua Province (4.1 per mile). Risk factors that play a role in the onset of stroke are controllable risk factors namely hypercholesterol and hypokalemia. There needs to be special treatment in order to overcome the problem, namely providing nutritional care with a Standardized Nutrition Care Process (PAGT).

Research Objectives: Reviewing the implementation of Standardized Nutrition Care Process in Stroke Infarction Patients with Hypercholesterol and Hypokalemia at Mitra Paramedika Hospital.

Research Method: The type of research used in this study is descriptive observational with case study design.

Results and Discussion: Nutritional screening using MNA found that patients were at risk of malnutrition. From the data of nutritional history, patients have poor habits. From anthropometry data nutritional status based on BMI falls into the category of good nutrition. Biochemical data on high levels of sodium, potassium, lymphocytes, and monocytes, for high levels of GDS, granulocytes, LDL, and MCV. Physical/clinical data of patients obtained that pulse and high blood pressure. Nutritional diagnosis includes the intake domain, the clinical domain, and the behaviour domain. Nutritional interventions are carried out in accordance with the purpose and prescription of the diet. Diet according to the patient's condition. The results of monitoring and evaluation relate to physical/clinical data and food intake. Nutrition education is conducted daily and nutrition counseling is conducted before the patient comes home from the hospital.

Conclusion: From the results of the study can be found that the nutritional status of the patient is good. The results of monitoring and physical/clinical evaluation of the pulse and blood pressure become normal while the results of monitoring the intake of food during the intervention are increasing every day.

Keywords : Stroke Infarction, Hypercholesterolemia, Hypokalemia, Standardized Nutrition Care Process

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