

**ASUHAN KEPERAWATAN PADA AN. S DENGAN KEJANG
DEMAM KOMPLEKS DI RUANG MELATI
RSUD SLEMAN YOGYAKARTA**

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INTISARI

Latar Belakang: Kejang demam termasuk kedalam peringkat keempat dari sepuluh besar penyakit terbanyak dalam satu tahun terakhir dengan persentase 11,56% berdasarkan laporan tahunan RSUD Sleman tahun 2021. Sedangkan, pada buku Register Ruang melati bulan januari sampai april 2022 angka kejadian kejang demam sekitar 15 kasus. Komplikasi yang dapat ditimbulkan yaitu seperti epilepsi, hemiperesis, trauma otak, retradasi mental akibat kerusakan otak yang parah, mengakibatkan cacat fisik, cacat mental, gangguan perilaku, gangguan belajar, dan bahkan sampai meninggal.

Tujuan: untuk memperoleh gambaran dan pengalaman nyata dalam melaksanakan asuhan keperawatan pada pasien dengan diagnosa kejang demam kompleks menggunakan metode proses keperawatan berdasarkan *Evidence Based Practice*.

Metode: Asuhan keperawatan ini menggunakan metode studi kasus deskriptif pada satu pasien kelolaan dengan pendekatan proses keperawatan yang meliputi tahap pengkajian, perumusan diagnosa, perencanaan keperawatan, implementasi, evaluasi dan dokumentasi menggunakan analisis kasus berdasarkan permasalahan yang ditemukan pada pasien dengan kejang demam kompleks.

Hasil: Setelah dilakukan pengkajian dan analisa data didapatkan tiga diagnosa keperawatan yaitu hipertermia, defisit nutrisi dan risiko cedera. Intervensi yang dilakukan yaitu manajemen hipertermia, pencegahan kejang dan manajemen nutrisi. Implementasi dilakukan berdasarkan intervensi selama tiga hari dan evaluasi dilaksanakan setiap akhir melakukan implementasi

Kesimpulan: Setelah dilakukan tindakan asuhan keperawatan selama tiga hari didapatkan hasil hipertermia teratasi, tidak terjadi cedera kejang demam berulang, dan defisit nutrisi teratasi sebagian.

Kata Kunci: Anak, Kejang Demam Kompleks

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**NURSING CARE FOR CHILD S WITH COMPLEX
FEBRILE SEIZURES IN THE MELATI ROOM
SLEMAN HOSPITAL YOGYAKARTA**

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ABSTRACT

Background: Febrile seizures are included in the fourth rank of the top ten most common diseases in the past year with a percentage of 11.56% based on the Sleman hospital annual report in 2021. Meanwhile, in the Jasmine room register book from January to April 2022, the incidence of febrile seizures is around 15 cases. Complications that can be caused include epilepsy, hemiparesis, brain trauma, mental retardation due to brain damage, physical disabilities, mental disabilities, behavioral disorders, learning disorders and even death.

Objective: to obtain an overview and real experience in carrying out nursing care in patients with Complex febrile seizures using the nursing process method based on evidence based practice.

Methods: This nursing care use a descriptive case study method in one managed patient with a nursing process approach which includes stage of assessment, nursing diagnosis, planning, implementation, evaluation and documentation using case analysis based on problems found in patients with complex febrile seizures.

Results: After assessing and analyzing the data, three nursing diagnoses were obtained, namely hyperthermia, nutritional deficit and risk of injury. The interventions which carried out were hyperthermia management, seizure prevention and nutritional management. Implementation was carried out based on an intervention for three days and an evaluation was carried out at the end of each implementation

Conclusion: After three days of nursing care, the results showed hyperthermia was resolved, there were no recurrent febrile seizures, and the nutritional deficit was partially resolved.

Keywords: Child, Complex febrile seizures

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