

TUGAS AKHIR NERS (TAN)

ASUHAN KEPERAWATAN PADA NY. S DENGAN KANKER OVARIUM DI RUANG BOUGENVILLE II RSUP DR. SARDJITO YOGYAKARTA

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ABSTRAK

Latar Belakang: Kanker ovarium sering disebut sebagai pembunuh diam-diam “*silent killer*” karena diyakini sebagian besar pasien didiagnosis pada stadium lanjut dan sering tidak ditemukan gejala yang jelas pada stadium awal Data WHO 2016, menunjukkan bahwa sekitar 21.000 orang terkena kanker ovarium. Kasus kanker ovarium di Indonesia pada tahun 2020 yaitu sebesar 14.896 dari total 213.546 penderita kanker di Indonesia (7%) (Globocan, 2020). Prevalensi kanker di Daerah Istimewa Yogyakarta (DIY) sebesar 9,66% dengan urutan jenis kanker tertinggi adalah kanker ovarium (Riskesdas, 2018). Pada stadium lanjut yaitu stadium II-IV akan mengalami perubahan pada tubuh karena sudah bermetastase ke jaringan luar pelvis misalnya jaringan hati, gastrointestinal, dan paru-paru sehingga akan menyebabkan anemia, asites, efusi pleura, nyeri ulu hati dan anoreksia (Reeder, 2013). **Tujuan :** Diketuainya asuhan keperawatan pada pasien kanker ovarium di bangsal bugenvil II RSUP dr. Sardjito Yogyakarta berdasarkan *Evidence Based Practice*. **Metode :** Melakukan studi kasus pada satu pasien dengan menerapkan proses asuhan keperawatan yang meliputi pengkajian, diagnosis, perencanaan, implementasi dan evaluasi keperawatan **Hasil :** Ny. S dengan diagnosa medis kanker ovarium dilakukan pembedahan dengan re-laparotomy debulking untuk mengangkat seluruh ovarium. Diagnosa keperawatan yang ditemukan pada *post* operasi yaitu nyeri akut, defisit perawatan diri, risiko infeksi dan risiko perdarahan. Intervensi keperawatan yang ditetapkan pada *post* operasi antara lain manajemen nyeri, perawatan *personal hygiene*, manajemen perdarahan, dan kontrol infeksi. Implementasi yang dilakukan antara lain mengajarkan nafas dalam, memutarakan musik klasik, memfasilitasi kebersihan diri, memonitor perdarahan, melakukan perawatan luka. **Kesimpulan :** Asuhan keperawatan pada pasien Ny.S dengan diagnosa medis kanker ovarium dapat dilaksanakan dengan baik karena pasien dan keluarga kooperatif sehingga tujuan dapat tercapai sesuai dengan kriteria hasil yang sudah ditetapkan untuk mencapai derajat kesehatan yang paripurna.

Kata kunci: Kanker ovarium, *re-laparotomy debulking*

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NERS FINAL PROJECT

NURSING CARE REPORT OF MRS. S WITH CANCER OVARY IN BOUGENVILLE II, DR. SARDJITO YOGYAKARTA HOSPITAL

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ABSTRACT

Background: Ovarian cancer is often referred to as the silent killer because it is believed that most patients are diagnosed at an advanced stage and often have no obvious symptoms at an early stage. WHO 2016 data shows that around 21,000 people develop ovarian cancer. Ovarian cancer cases in Indonesia in 2020 amounted to 14,896 out of a total of 213,546 cancer patients in Indonesia (7%) (Globocan, 2020). The prevalence of cancer in the Special Region of Yogyakarta (DIY) is 9.66% with the highest order of cancer types being ovarian cancer (Risksedas, 2018). At an advanced stage, namely stages II-IV, the body will experience changes because it has metastasized to tissues outside the pelvis such as liver, gastrointestinal, and lung tissue so that it will cause anemia, ascites, pleural effusion, heartburn and anorexia (Reeder, 2013). **Purpose:** To find out nursing care for ovarian cancer patients in the bougenville II ward, dr. Sardjito Yogyakarta based on Evidence Based Practice. **Method :** Conduct a case study on one patient by applying the nursing care process which includes assessment, diagnosis, planning, implementation and evaluation of nursing. **Results :** Ny. S with a medical diagnosis of ovarian cancer underwent surgery with re-laparotomy debulking to remove the entire ovary. Nursing diagnoses found in the *postoperative* period were acute pain, self-care deficit, risk of infection and risk of bleeding. The nursing interventions specified in the *postoperative* period include pain management, personal hygiene care, bleeding management, and infection control. The implementations include teaching deep breathing, playing classical music, facilitating personal hygiene, monitoring bleeding, and performing wound care. **Conclusion:** Nursing care for Mrs. S patient with a medical diagnosis of ovarian cancer can be implemented properly because the patient and family are cooperative so that the goals can be achieved in accordance with the established outcome criteria to achieve complete health status.

Keywords: Ovarian cancer, re-laparotomy debulking

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