

**REPORT OF PHYSICAL NURSING CARE IN MRS.P WITH DISORDERED
THINKING PROCESSES GROWTH AT WISMA SRIKANDI
RSJ GRAHASIA DIY**

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ABSTRACT

Background : *Delusion is a severe mental disorder and is often found in people with schizophrenia. Delusion is a false belief but is strongly maintained by the sufferer without clear evidence and is not in accordance with reality. This disorder is a serious mental disorder, this condition is characterized by the patient's difficulty to distinguish between what is reality and what is imagination. Surveillance data from the DIY Health Service in the last 5 years the number of severe mental disorders in DIY rose from 2.3 per mile in 2013 to 10 per mile in 2018 with a total number of 14,947 people and based on the report on recapitulation of inpatient data at the Grhasia Mental Hospital DIY 1 In the last year, the number of people with schizophrenia at the Grhasia Mental Hospital DIY was 824 people (SIMRS Grhasia, 2022).* **Objective:** *To gain real experience in carrying out nursing care for patients with process disorders based on Evidence Based Practice.* **Methods:** *This report uses a descriptive method or a description of a case in one patient who was treated at Grahasia Hospital DIY.* **Results:** *After the assessment, the patient revealed the contents of the delusions, showed behavior according to the contents of the delusions, thought content did not match reality, was tense, spoke excessively, speech was difficult to understand because it did not match reality, threatened verbally, and convoluted speech (flight of ideas).), hearing voices, expressing irritation, acting as if hearing something, sensory distortion, threatening pacing by clenching both hands and mouth clenching, irritability, loud voice, and aggressive behavior / tantrum. In the implementation of nursing diagnoses, there are three nursing diagnoses, namely thought process disorders. Delusions of grandeur, impaired sensory perception: auditory hallucinations and risk of violent behavior. Implementation is carried out for 3 days with interventions that have been prepared and evaluation is carried out at the end of each implementation.* **Conclusion:** *After the patient was given nursing care for 3 days, the results of thought process disorders: grandiose delusions could be controlled, sensory perception disorders: auditory hallucinations were resolved and the risk of violent behavior was reduced.*

Keywords: *Mental Nursing Care, delusions of greatness*

**LAPORAN ASUHAN KEPERAWATAN JIWA PADA NY. P DENGAN
GANGGUAN PROSES PIKIR : WAHAM KESESARAN DI WISMA
SRIKANDI RSJ GRAHASIA DIY**

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ABSTRAK

Latar Belakang : Waham merupakan gangguan jiwa berat dan sering ditemukan pada penderita skizofrenia. Waham merupakan suatu keyakinan yang salah tetapi dipertahankan dengan kuat oleh penderita tanpa bukti yang jelas dan tidak sesuai dengan realita. Gangguan ini merupakan gangguan mental yang serius, kondisi ini ditandai dengan kesulitan pasien untuk membedakan mana hal yang bersifat kenyataan dan yang merupakan imajinasi. Data surveilans Dinas Kesehatan DIY dalam 5 tahun terakhir angka gangguan jiwa berat di DIY naik dari 2,3 per mil pada 2013 menjadi 10 per mil pada tahun 2018 dengan total jumlah 14.947 Jiwa dan berdasarkan laporan data rekapitulasi rawat inap di Rumah Sakit Jiwa Grhasia DIY 1 tahun terakhir, jumlah penderita skizofrenia di Rumah Sakit Jiwa Grhasia DIY yaitu 824 orang (SIMRS Grhasia, 2022). **Tujuan :** Memperoleh pengalaman nyata dalam melaksanakan asuhan keperawatan pada pasien gangguan proses berdasarkan Evidence Based Practice. **Metode :** Laporan ini menggunakan metode deskriptif atau gambaran suatu kasus pada satu pasien yang di rawat di RSJ Grahasia DIY. **Hasil :** Setelah dilakukan pengkajian didapatkan hasil pasien mengungkapkan isi waham, menunjukkan perilaku sesuai isi waham, isi pikir tidak sesuai realita, tegang, bicara berlebihan, pembicaraan sulit dipahami karena tidak sesuai realita, mengacau secara verbal, dan pembicaraan berbelit-belit (*flight of idea*), mendengar suara bisikan, menyatakan kesal, bersikap seolah mendengar sesuatu, distorsi sensori, mondar-mandir mengancam dengan menggegal kedua tangan dan mulut mengeram, mudah tersinggung, suara keras, dan perilaku agresif / amuk. Pada penegakkan diagnosa keperawatan terdapat tiga diagnosa keperawatan yaitu gangguan proses pikir. Waham kebesaran, gangguan persepsi sensori : halusinasi pendengaran dan resiko perilaku kekerasan. Implementasi dilakukan selama 3 hari dengan intervensi yang telah disusun dan evaluasi dilaksanakan setiap akhir melakukan implementasi. **Kesimpulan :** Setelah pasien diberikan tindakan asuhan keperawatan selama 3 hari, hasil gangguan proses berpikir: waham kebesaran dapat dikendalikan, gangguan persepsi sensori: halusinasi pendengaran teratasi dan risiko perilaku kekerasan berkurang.

Kata kunci : Asuhan Keperawatan Jiwa, waham kebesaran