STANDARDIZED NUTRITIONAL CARE PROCESS IN TYPHOID FEVER PATIENTS WITH MILD DEHYDRATION PROFUSE VOMITUS IN WONOSARI REGIONAL PUBLIC HOSPITAL

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ABSTRACK

Background: Typhoid fever is an acute infection that occurs in the gastrointestinal tract more precisely in the small intestine caused by Salmonella enterica serotype typhi (Salmonella typhi). Typhoid fever caused by Salmonella typhi bacteria is transmitted through the fecal-oral route. The mode of transmission of typhoid fever can occur through several ways or what is known as fecal oral. Patients who experience symptoms in the gastrointestinal system such as diarrhea, nausea, and vomiting can result in nutritional imbalances that are less than needed. Based on this, an appropriate Standardized Nutritional Care Process (PAGT) is needed for patients with typhoid fever to maintain nutritional status, prevent disease severity, and accelerate the healing process in patients.
Objective: Knowing the management of the Standardized Nutritional Care Process (PAGT) in Typhoid Fever patients with Profuse Vomitus Mild Dehydration at Wonosari Regional General Hospital.
Methods: This type of research uses a case study design and is descriptive.
Results: The results of the assessment of nutritional status based on anthropometric measurements (weight and height) obtained the results of the calculation of nutritional status for BB / U (1.02 SD) which is at risk of overweight, TB / U (1.44 SD) normal, and IMT / U (0.23 SD) normal. Based on physical examination, the patient has complaints of weakness, nausea, and abdominal pain after eating, previously the patient also experienced vomiting, liquid stools 1 time. Based on clinical examination, the results of blood pressure, normal temperature respiration and rapid pulse were obtained. Based on the results of 24 jan recall, energy intake, protein, fat, carbohydrates, fiber and fluids are categorized as severe deficits. Nutritional interventions Nutritional interventions provided are Gastric Diet III, with the form of soft food, administration by oral route, and frequency of 3 × main meals and 2 × snacks.
Conclusion: The screening results of An. B using STRONG-Kids screening got a total score of 2 which means the patient has a moderate risk but needs further nutritional care because the patient has vomited more than 3 times, and has lost weight. The patient has complaints of weakness, nausea and abdominal pain.

Keywords: Standardized Nutritional Care Process, Typhoid Fever, Profuse Vomitus, Mild Dehydration.

PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN DEMAM TIFOID DENGAN *VOMITUS PROFUSE* DEHIDRASI RINGAN DI RUMAH AKIT UMUM DAERAH WONOSARI

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ABSTRAK

Latar Belakang: Demam tifoid merupakan infeksi akut yang terjadi pada saluran pencernaan lebih tepatnya pada usus halus yang disebabkan *Salmonella enterica serotype typhi (Salmonella typhi).* Demam tifoid yang disebabkan oleh bakteri *Salmonella typhi* ditularkan melalui rute fecal-oral. Cara penularan demam tifoid dapat terjadi melalui beberapa cara atau yang dikenal dengan *fecal oral*. Pasien yang mengalami gangguan gejala pada sistem gastrointestinal seperti diare, mual, dan muntah dapat mengakibatkan ketidakseimbangan nutrisi yang kurang dari kebutuhan. Berdasarkan hal tersebut, Proses Asuhan Gizi Terstandar (PAGT) yang tepat sangat diperlukan bagi pasien penderita demam tifoid guna mempertahankan status gizi, mencegah keparahan penyakit, dan mempercepat proses penyembuhan pada pasien.
Tujuan: Mengetahui penatalasanaan Proses Asuhan Gizi Terstandar (PAGT) pada pasien Demam Tifoid dengan *Vomitus Profuse* Dehidrasi Ringan di Rumah Sakit Umum Daerah Wonosari.
Metode: jenis penelitian ini menggunakan desain studi kasus dan bersifat deskriptif.
Hasil: Hasil penilaian status gizi berdasarkan pengukuran antropometri (berat badan dan tinggi badan) didapatkan hasil perhitungan status gizi untuk BB/U (1,02 SD) yaitu berisiko berat badan berlebih, TB/U (1,44 SD) normal, dan IMT/U (0,23 SD) normal. Berdasarkan pemeriksaan Fisik pasien menpunyai keluhan lemas, mual, dan sakit perut setelah makan, sebelumnya pasien juga mengalami muntah, BAB cair sebanyak 1 kali. Berdasarkan pemeriksaan klinis didapatkan hasil tekanan darah, respirasi suhu normal dan nadi cepat.Berdasarkan hasil *recall* 24 jan asupan energi, protein, lemak, karbohidrat, serat dan cairan dikategorikan defisit berat. Intervensi gizi Intervensi gizi yang diberikan yaitu Diet Lambung III, dengan bentuk makanan lunak, pemberian dengan rute oral, dan frekuensi 3× makan utama dan 2× selingan.
Kesimpulan: Hasil skrining An. B menggunakan skrining STRONG-Kids mendapatkan total skor 2 yang dimana pasien memiliki risiko sedang tetapi membutuhkan asuhan gizi lanjutan dikarenakan pasien mengalami muntah lebih dari 3 kali, dan mengalami penurunan berat badan. Pasien memiliki keluhan lemas, mual dan sakit perut.

Kata Kunci: Proses Asuhan Gizi Terstandar, Demam Tifoid, *Vomitus Profuse*, Dehidrasi Ringan.