

PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN *CHRONIC KIDNEY DISEASE* (CKD) STAGE 5 ON HEMODIALISA DAN HIPERTENSI DI RSUD dr. TJITROWARDOJO PURWOREJO

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ABSTRAK

Latar Belakang : Hasil Riset Kesehatan Dasar tahun 2018 menunjukkan bahwa prevalensi penyakit CKD atau sering dikenal gagal ginjal kronis di Indonesia pada penduduk usia ≥ 15 tahun berdasarkan diagnosis dokter pada tahun 2018 adalah 0,38% atau sekitar 713,783 jiwa.. PAGT pada pasien CKD diperlukan sebagai upaya mengontrol kadar kreatin, ureum, natrium serta kalium, mencegah malnutrisi, mencegah keparahan, dan mempercepat proses penyembuhan.

Tujuan : Mengkaji hasil penatalaksanaan Proses Asuhan Gizi Terstandar pada Pasien *Chronic Kidney Disease* (CKD) Stage 5 On Hemodialisa dan Hipertensi di Rumah Sakit RSUD dr. Tjitrowardojo Purworejo

Metode : Jenis penelitian deskriptif dengan desain penelitian studi kasus. Subjek penelitian yaitu satu pasien dengan kriteria inklusi dan eksklusi. Data primer diperoleh dari pengukuran dan wawancara, sedangkan data sekunder diperoleh dari rekam medis.

Hasil : Skrining gizi pasien berisiko malnutrisi, status gizi menggunakan percentile LILA yaitu gizi buruk. Data biokimia diperoleh kadar kreatinin dan ureum pasien tinggi, Sedangkan kadar natrium, hemoglobin dan hematokrit pasien rendah. Untuk kadar kalium pasien normal, data fisik/klinis kondisi lemah, nafsu makan menurun, sesak nafas, perut begah, respirasi lambat, tekanan darah tinggi, dan riwayat makan pasien masih belum sesuai. Diagnosis gizi meliputi domain asupan, klinis, dan behavior. Intervensi gizi diterapkan berdasarkan permasalahan diagnosis gizi. Monitoring evaluasi berkaitan dengan antropometri, biokimia, fisik/klinis, asupan makan, dan behavior (edukasi dan konseling).

Kesimpulan : Berdasarkan hasil intervensi menunjukkan bahwa kadar ureum dan kreatinin pasien tetap tinggi, sedangkan kadar natrium normal dan kadar kalium rendah setelah hemodialisa dan untuk pemeriksaan fisik/ klinis tekanan darah, respirasi normal, edukasi mencapai keberhasilan pasien tidak mengkonsumsi makanan dari luar rumah sakit serta dapat mereview kembali materi konseling.

Kata Kunci : Proses Asuhan Gizi Terstandar (PAGT), *Chronic Kidney Disease*, Hemodialisa, Hipertensi

**STANDARD NUTRITIONAL CARE PROCESS FOR CHRONIC KIDNEY
DISEASE (CKD) PATIENTS STAGE 5 ON HEMODIALYSIS AND
HYPERTENSION AT DR. TJITROWARDOJO REGIONAL HOSPITAL
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ABSTRACT

Background : The results of the 2018 Basic Health Research show that the prevalence of CKD or often known as chronic kidney failure in Indonesia in the population aged ≥ 15 years based on a doctor's diagnosis in 2018 was 0.38% or around 713,783 people. PAGT in CKD patients is needed as an effort to control creatine, urea, sodium, and potassium levels, prevent malnutrition, prevent severity, and accelerate the healing process.

Objective : Reviewing the results of the implementation of the Standardized Nutrition Care Process in Patients with Chronic Kidney Disease (CKD) Stage 5 on Hemodialysis and Hypertension at the Dr. Tjitrowardojo Purworejo Regional Hospital

Method : Descriptive research type with case study research design. The subject of the research is one patient with inclusion and exclusion criteria. Primary data is obtained from measurements and interviews, while secondary data is obtained from medical records.

Results : Nutritional screening of patients at risk of malnutrition, nutritional status using the LILA percentile, namely malnutrition. Biochemical data obtained high creatinine and urea levels of patients, while sodium, hemoglobin and hematocrit levels of patients are low. For potassium levels, patients are normal, physical/clinical data of weak conditions, decreased appetite, shortness of breath, bloating, slow respiration, high blood pressure, and patient's eating history are still not appropriate. Nutritional diagnosis includes intake, clinical, and behavioral domains. Nutritional interventions are applied based on nutritional diagnosis problems. Monitoring evaluation is related to anthropometry, biochemistry, physical/clinical, food intake, and behavior (education and counseling).

Conclusion : Based on the results of the intervention, it was shown that the patient's urea and creatinine levels remained high, while sodium levels were normal and potassium levels were low after hemodialysis and for physical/clinical examinations, blood pressure, respiration were normal, education achieved the success of patients not consuming food from outside the hospital and being able to review the counseling material.

Keywords : Standardized Nutrition Care Process (PAGT), Chronic Kidney Disease, Hemodialysis, Hypertension