

**PROSES ASUHAN GIZI TERSTANDAR (PAGT) PADA PASIEN
DIABETES MELLITUS TIPE 1 RAWAT INAP DI RUMAH SAKIT
UMUM DAERAH dr TJITROWARDOJO PURWOREJO**

Pramuditya Diah Ambarwati¹, Idi Setiyobroto², Isti Suryani³
¹²³Jurusan Gizi Poltekkes Kemenkes Yogyakarta,
Jl. Tatabumi No.3 Banyuraden, Gamping, Sleman
Email : pramudityada185@gmail.com

ABSTRAK

Latar Belakang : Menurut IDF, Indonesia merupakan negara penderita diabetes terbanyak kelima dengan jumlah 19,5 juta jiwa. Data Riskesdas tahun 2018 menunjukkan prevalensi diabetes mellitus di Indonesia berdasarkan pemeriksaan dokter pada penduduk umur ≥ 15 tahun menurut provinsi sebesar 2,0%. Daerah Istimewa Yogyakarta memiliki prevalensi Diabetes Mellitus yang lebih tinggi dari angka prevalensi nasional yaitu sebesar 4,5%.

Tujuan : Mengkaji hasil penatalaksanaan Proses Asuhan Gizi Terstandar Pasien Diabetes Mellitus Tipe 1 Rawat Inap di RSUD dr Tjitrowardojo Perworejo.

Metode : Jenis penelitian *deskriptif observasional*. 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 malnutrisi, status gizi menggunakan *percentile* Lila yaitu gizi kurang. Data biokimia diperoleh GDS, GDP dan GD2PP tinggi. Data fisil/klinis kondisi lemah, mual saat makan, nyeri perut dan nafsu makan menurun. Kebiasaan makan kurang baik. Diagnosis gizi meliputi domain asupan, domain klinis dan domain *behavior*. Intervensi gizi berupa diet DM 1300 dengan bentuk makanan lunak lewat oral dengan frekuensi pemberian 3 kali makan utama dan 2 kali selingan. Monitong evaluasi berkaitan dengan antropometri, biokimia, fisik/klinis, asupan makan serta edukasi dan konseling.

Kesimpulan : Hasil intervensi, GDS, GDP dan GD2PP menurun namun masih tergolong tinggi, kondisi fisik menurun, keluhan mual, pusing dan nyeri perut membaik, asupan makan meningkat pada hari kedua intervensi namun kembali menurun pada hari ketiga, serta edukasi mencapai keberhasilan pasien tidak mengkonsumsi makanan dari luar rumah sakit.

Kata Kunci : Proses Asuhan Gizi Terstandar (PAGT), Diabetes Mellitus.

**STANDARDIZED NUTRITION CARE PROCESS FOR INPATIENTS
WITH TYPE 1 DIABETES MELLITUS AT dr. TJITROWARDOJO
REGIONAL GENERAL HOSPITAL, PURWOREJO**

Pramuditya Diah Ambarwati¹, Idi Setiyobroto², Isti Suryani³
¹²³ Department of Nutrition, Poltekkes Kemenkes Yogyakarta,
Jl. Tatabumi No.3 Banyuraden, Gamping, Sleman
Email : pramudityada185@gmail.com

ABSTRACT

Background: According to the International Diabetes Federation (IDF), Indonesia ranks fifth in the number of diabetes cases, with approximately 19.5 million individuals affected. Data from the 2018 Basic Health Survey indicates a diabetes mellitus prevalence of 2.0% among the population aged 15 years and older, as assessed by doctors, with the Special Region of Yogyakarta showing a higher prevalence of 4.5% compared to the national average.

Objective: To evaluate the outcomes of the Standardized Nutrition Care Process for inpatients with Type 1 Diabetes Mellitus at dr. Tjitrowardojo Regional General Hospital, Purworejo.

Methods: This is a descriptive observational study. The subjects included one patient who met the inclusion and exclusion criteria. Primary data were collected through measurements and interviews, while secondary data were obtained from medical records.

Results: Nutritional screening indicated that the patient was malnourished, with nutritional status assessed using the Lila percentile showing inadequate nutrition. Biochemical data revealed high levels of GDS, GDP, and GD2PP. Clinical/physical data indicated weakness, nausea during meals, abdominal pain, and decreased appetite. Eating habits were poor. The nutritional diagnosis included domains of intake, clinical status, and behavior. Nutritional intervention consisted of a 1300-calorie DM diet with soft food provided orally, with a frequency of three main meals and two snacks. Monitoring and evaluation were related to anthropometry, biochemistry, physical/clinical status, food intake, as well as education and counseling.

Conclusion: Following the intervention, GDS, GDP, and GD2PP levels decreased but remained high. Physical condition worsened, while complaints of nausea, dizziness, and abdominal pain improved. Food intake increased on the second day of intervention but decreased again on the third day. Education was successful in ensuring that the patient did not consume food from outside the hospital.

Keywords: Standardized Nutrition Care Process, Diabetes Mellitus.