

**STANDARDIZED NUTRITION CARE PROCESS FOR DIABETIC ULCER
PATIENTS WITH RENAL INSUFFICIENCY AND BACTERIAL INFECTION
IN INPATIENT CARE AT PKU MUHAMMADIYAH
HOSPITAL YOGYAKARTA**

Mutia Pratami¹, Idi Setiyobroto², Isti Suryani³.

¹²³ Jurusan Gizi Poltekkes Kemenkes Yogyakarta

Jl. Tatabumi No.3 Banyuraden, Gamping, Sleman

Email : heymutiaphaha@gmail.com

ABSTRACT

Background: According to the International Diabetes Federation (IDF) 2021, there are 537 million individuals aged 20-79 years worldwide living with diabetes mellitus (DM), resulting in 6.7 million deaths attributed to DM. The 2023 Indonesian Health Survey (SKI) reported a prevalence of DM based on physician diagnosis at 2.2% among the population aged ≥ 15 years in Indonesia. In the Special Region of Yogyakarta, the prevalence of DM based on physician diagnosis among the population aged ≥ 15 years is 3.6%.

Objective: To evaluate the results of Standardized Nutritional Care Management in patients with diabetic ulcers, renal insufficiency, and bacterial infection hospitalized at PKU Muhammadiyah Hospital Yogyakarta.

Methods: This study is a descriptive observational research. The subjects included one individual. Primary data were obtained through measurements and interviews, while secondary data were collected from medical records.

Results: Nutritional screening indicated that the patient was at risk of malnutrition, with poor nutritional status assessed using the Lila percentile. The patient exhibited high GDS and HbA1c levels, while hemoglobin, hematocrit, and erythrocyte counts were low. Urea and creatinine levels were elevated, and leukocyte counts, neutrophils were high, while lymphocytes were low. The patient presented with weakness, dizziness, decreased appetite, ulcer pain, bilateral leg edema, and normal blood pressure, pulse, temperature, and respiration. Nutritional diagnoses included intake domain (NI), clinical domain (NC), and behavior domain (NB). Nutritional interventions were planned and implemented based on the identified nutritional diagnosis. Monitoring and evaluation included anthropometry, biochemistry, physical/clinical assessments, dietary intake, as well as education and counseling.

Conclusion: GDS levels normalized, and hemoglobin increased. Physical complaints improved, with blood pressure, pulse, temperature, and respiration stabilizing within normal limits. Dietary intake increased according to needs. Education was successful, as the patient refrained from consuming food from outside the hospital and was able to review the counseling material.

Keywords: Standardized Nutritional Care Management (PAGT), Diabetes Mellitus, Complications.

PROSES ASUHAN GIZI TERSTANDAR (PAGT) PADA PASIEN *ULKUS
DIABETIKUM DENGAN INSUFISIENSI RENAL DAN BACTERIAL
INFECTION* RAWAT INAP DI RUMAH SAKIT PKU MUHAMMADIYAH
YOGYAKARTA

Mutia Pratami¹, Idi Setiyobroto², Isti Suryani³.

¹²³ Jurusan Gizi Poltekkes Kemenkes Yogyakarta

Jl. Tatabumi No.3 Banyuraden, Gamping, Sleman

Email : heymutiaphaha@gmail.com

ABSTRAK

Latar Belakang : Menurut International Diabetes Federation (IDF) 2021 terdapat 537 juta populasi usia 20-79 tahun di dunia memiliki penyakit diabetes melitus (DM). Terdapat 6,7 juta kematian yang disebabkan DM. Menurut Survey Kesehatan Indonesia (SKI) tahun 2023 prevalensi DM berdasarkan diagnosis dokter di Indonesia pada penduduk usia ≥ 15 tahun sebesar 2,2%. Prevalensi DM di Daerah Istimewa Yogyakarta berdasarkan diagnosis dokter di Indonesia pada penduduk usia ≥ 15 tahun sebesar 3,6%.

Tujuan : Mengkaji hasil Penatalaksanaan Proses Asuhan Gizi Terstandar Pada Pasien *Ulkus Diabetikum* dengan *Insufisiensi Renal* dan *Bacterial Infection* Rawat Inap di Rumah Sakit PKU Muhammadiyah Yogyakarta.

Metode : Jenis penelitian yaitu deskriptif observasional. Subjek penelitian berjumlah satu orang. Data primer diperoleh dari pengukuran dan wawancara, data sekunder diperoleh dari rekam medis.

Hasil : Skrining gizi pasien berisiko malnutrisi, status gizi kurang menggunakan *percentile* Lila. GDS, HbA1c tinggi, hb, hematokrit, eritrosit rendah, ureum, kreatinin tinggi, leukosit, netrofil tinggi, limfosit rendah. Kondisi lemah, pusing, nafsu makan menurun, nyeri ulkus, edema kedua kaki, tekanan darah, nadi, suhu, respirasi normal. Diagnosis gizi meliputi domain *intake* (NI), domain *clinis* (NC), domain *behavior* (NB). Intervensi gizi direncanakan dan diimplementasikan berdasarkan permasalahan diagnosis gizi. Monev meliputi antropometri, biokimia, fisik/klinis, asupan makan, serta edukasi dan konseling.

Kesimpulan : GDS normal, hb meningkat. Keluhan fisik membaik, tekanan darah, nadi, suhu, dan respirasi stabil dalam batas normal. Asupan makan meningkat sesuai dengan kebutuhan. Edukasi mencapai keberhasilan pasien tidak konsumsi makanan dari luar RS, serta dapat mereview kembali materi konseling.

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